

Federal Communications Commission

## (REFERENCE COPY - Not for submission)

## FCC Form 399: Reimbursement Request

Facility ID: File Number:	39736 000002	Service: <b>DTV</b> 24802	Call Sign:	WFLX	Channel: <b>35 (UHF)</b>
FRN: <b>00</b>	18223693	Date	05/06		
		Submitted:	/2019		

#### Applicant Name, Type, and Contact Information

## Applicant Information

RAYCOM MEDIA4370+1 (404)Robert.LimitedLICENSEE, LLCPEACHTREE504-Folliard@gray.LiabilityDoing Business As:ROAD, NE9828tvCompanyRAYCOM MEDIAATLANTA, GAJ0319J011ed StatesJ011ed States	Applicant	Address	Phone	Email	Applicant Type
	LICENSEE, LLC Doing Business As: RAYCOM MEDIA	PEACHTREE ROAD, NE ATLANTA, GA 30319	504-	Folliard@gray.	Liability

#### Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information	Preparer Contact Name and Information				
	Applicant	Address	Phone	Email	
	The Preparer is same as the reimbursement contact.				

Broadcaster	Question	Response
Information		
and		
Transition		
Plan		

Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	Install interim tx on ch-27 utilizing existing interim antenna and line Remove and replace existing top mounted antenna Re use existing transmission line Install new main and standby transmitters

Transmitters Section		Question	Response
	Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

Auxiliary	Add Transmitter Information					
Transmitter	Section	Question	Response			
	Existing Transmitter Description	Type of change	Purchase New			
		Use	Auxiliary (Backup)			
		Description of Use	Emergency Backup			
		Ownership	Owned			
		Owner	N/A			
		Site	N/A			
		Is this transmitter currently shared with another station?	No			
		Is this transmitter currently in operating condition?	Yes			
	Existing Transmitter	Manufacturer				
	Manufacturer and Type	Model	Ranger			
		Year	2009			
		Туре	Solid State			
		Solid State Cooling	Air Cooled			
		Solid State Power Capacity	1.1 kW			

Auxiliary	New Transmitter Costs				
Transmitter	Section	Question	Response		
	New Transmitter	Use	Auxiliary (Backup)		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	No		
		Manufacturer			
		Model	UAXTE-2R37		
		Transmitter Type	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power capacity	1.2 kW		
		Justification for New Transmitter	Existing transmitter can not be retuned Manufacturers letter attached. tx to be used as interim with new ch-27 filter		

# Auxiliary Other Transmitter Costs

Transmitter	Section	Question	Response
	Electrical Service	Service Entrance (3 phases 800A 208V)	No
		Switchgear (industrial 800 amp)	No
		Transformer (480V)	No
		Power	N/A
		Rigid Conduit and Wiring	No
		Size	N/A
		Length	N/A

	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Other Transmitter Cost Not Listed

AuxiliaryOther Transmitter CoTransmitterInformation not provided.

Primary	Existing Transmitter Information				
Transmitter	Section	Question	Response		
	Existing Transmitter Description	Type of change	Purchase New		
		Use	Primary (Main)		
		Description of Use	N/A		
		Ownership	Owned		
		Owner	N/A		
		Site	N/A		
		Is this transmitter currently shared with another station?	No		
		Is this transmitter currently in operating condition?	Yes		
	Existing Transmitter	Manufacturer			
	Manufacturer and Type	Model	CCT-U- DCX 1H		
		Year	2003		
		Туре	Inductive Output Tube		
		IOT Power Type	Single		
		Power Capacity	20 kW		

## **Existing Transmitter Information**

Primary	New Transmitter Costs				
Transmitter	Section	Question	Response		
	New Transmitter	Use	Primary (Main)		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	Yes		
		Manufacturer			
		Model	ULXTE-72		
		Transmitter Type	Solid State		
		Solid State Cooling	Liquid Cooled		
		Solid State Power capacity	47.2 kW		
		Justification for New Transmitter	Existing IOT transmitter can not be retuned. Manufacturers comments attached. Solid state is a less expensive option than a two tube IOT. Headroom analysis attached.		

Primary Transmitter	Other Transmitter Costs			
	Section	Question	Response	
	Electrical Service	Service Entrance (3 phases 800A 208V)	No	
		Switchgear (industrial 800 amp)	Yes	
		Transformer (480V)	Yes	
		Power	300 kVA	
		Rigid Conduit and Wiring	No	

	Size	N/A
	Length	N/A
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

# Primary Other Transmitter Cost Not Listed

**Transmitter** Information not provided.

Antennas	Section	Question	Response
	Antenna Related Expenses	Do you have antenna related expenses?	Yes

## Add Antenna Information

Auxiliary	Add Antenna Information				
Antenna	Section	Question	Response		
	Existing Antenna Description	Type of change	Retune Existing		
		Antenna Use	Auxiliary (Backup)		
		Description of Use	Standby		
		Ownership	Owned		
		Owner	N/A		
		Site	N/A		
		Is this antenna currently shared with any other stations?	Yes		
		Is this antenna directional?	Yes		
		Is antenna in operating condition?	Yes		
		Is antenna located on or in close proximity to an antenna farm?	No		
	Existing Antenna Manufacturer and Type	Class	Full Power		
		Mounting	Side Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Horizontal		
		Туре	Broadband Panel		
		Number of Stations Supported	2		
		Number of Panels	12		
		Design power capacity in use	90.0 %		
		Lower Limit	540.00 MHz		

Upper Limit	650.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	1000.0 kW
Manufacturer	Dielectric
Model	TUA-SP4- 12/48H
Year	2003

# Facility ID's and Call Signs of all stations with whom the antenna is shared.

Facility ID	Call Sign
83929	WHDT

## Auxiliary Adjustment to Existing Antenna

Antenna	Section	Question	Response
	Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	

# Auxiliary Other Antenna Costs

Antenna	Section	Do you need a Combiner for a Shared Antenna?       No         Type       Number of channels supported       N/A         Frequencies of channels supported       N/A	Response
	Combiner for Shared Antenna		No
		Туре	
		Number of channels supported	N/A
		Frequencies of channels supported	N/A
		Frequency	-

## Other Antenna Cost Not Listed

Auxiliary Antenna Information not provided.

Primary	Existing Antenna Information				
Antenna	Section	Question	Response		
	Existing Antenna Description	Type of change	Purchase New		
		Antenna Use	Primary (Main)		
		Description of Use	N/A		
		Ownership	Owned		
		Owner	N/A		
		Site	N/A		
		Is the existing antenna shared with another station or stations?	No		
		Is the existing antenna directional?	Yes		
		Is antenna in operating condition?	Yes		
		Is antenna located on or in close proximity to an antenna farm?	No		
	Existing Antenna	Class	Full Power		
	Manufacturer and Type	Mounting	Top Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Horizontal		
		Туре	Slotted Coaxial		
		Number of Stations Supported	N/A		
		Number of Panels	N/A		
		Design power capacity in use	N/A		
		Lower Limit	N/A		
		Upper Limit	N/A		
		Other Antenna Type	N/A		
		ERP: (Effective Radiated Power)	630.0 kW		

Manufacturer	
Model	TFU-31ETT P210
Year	2008

Primary	New Antenna Costs				
Antenna	Section	Question	Response		
	New Antenna Description	Use	Primary (Main)		
		Description of Use	N/A		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	No		
		Ownership	Owned		
		Owner	N/A		
		Is antenna shared?	No		
		Is antenna directional?	Yes		
		Will antenna be located on or in close proximity to an antenna farm?	No		
	New Antenna Manufacturer and Types	Class	Full Power		
		Mounting	Top Mount		
		Antenna position in stack	Not in Stack		
		Polarization	Elliptical		
		Туре	Slotted Coaxial		
		Number of Stations Supported	N/A		
		Number of Panels/Bays	N/A		
		Lower Limit	N/A		
		Upper Limit	N/A		
		Design power capacity in use	N/A		
		Other Antenna Type	N/A		
		ERP: (Effective Radiated Power)	728.0 kW		
		Manufacturer			
			1		

Model	TFU-16ETT /VP-R P210
Year	2018
Justification for New Antenna	Existing antenna can not be re-tuned

Primary Antenna	Other Antenna Costs			
	Section	Question	Response	
	Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No	
		Туре		
		Number of channels supported	N/A	
		Frequencies of channels supported	N/A	
		Frequency	N/A	
		Do you need a combiner output splitter /switcher for dual feed lines?	N/A	
	Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No	
		Broadband or Single Channel?	N/A	
		Feed Line Size	N/A	
	Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No	
	Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No	
	Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes	

## Other Antenna Costs

# Primary Other Antenna Cost Not Listed

Antenna Information not provided.

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

Primary Transmissio	Existing Transmission Line			
	n Section	Question	Response	
	Existing Transmission Line Description	Type of change	Purchase New	
		Use	Primary (Main)	
		Description of Use	N/A	
		Ownership	Owned	
		Owner	N/A	
		Site	N/A	
		Is the existing transmission line shared with another station or stations?	No	
		Is Transmission Line in operating condition?	Yes	
	Existing Transmission	Manufacturer		
Line Mar Type	Line Manufacturer and Type	Туре	Rigid	
		Diameter	8 3/16 inches	
		Other Diameter	N/A	
		Segment Length	19 3/4 inches	
		Other Segment Length	N/A	
		Number of parallel runs	1	
		Length	1566 feet per run	

Primary	New Transmission Line		
Transmissio	n Line Section	Question	Response
	New Transmission Line Costs	Use	Primary (Main)
		Description of Use	N/A
		Change Type	Purchase New
		Is this a request for upgraded equipment?	No
		Туре	Rigid
		Diameter	6 1/8 inches
		Other Diameter	N/A
		Segment Length	20 inches
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	1600 feet per run
		Justification for New Transmission Line	Existing line segment lengths will not work on the new repack channel.

# Primary Other Transmission Line Expenses Not Listed

Transmission to me tion not provided.

Tower	Section	Question	Response
Equipment And Rigging Costs	Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

marv	Existing	Tower
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Primary Tower	Existing Tower		
	Section	Question	Response
	Existing Tower Description	Type of change	Modify Existing
		Tower Use	Primary (Main)
		Description of Use	N/A
		Ownership	Owned
		Is this tower consider Complex?	No
		Is this tower currently shared with any other stations?	Yes
		One or more FM, AM or TV radio broadcaster(s)	Yes
		Others Types of Users	No
		Is tower documented for structural analysis?	Yes
		Is tower compliant with Rev G?	No
	Existing Tower Structure	Do you have a tower registration number?	Yes
	Registration	ASR Number	1028084
	Coordinates (NAD83 ( North American Datum of	Latitude (NAD83)	26° 34' 30.7" N-
	1983))	Longitude (NAD83)	080° 14' 31.1" W-
		Overall Structure Height	1532.00 feet
		Support Structure Height	1496.00 feet
		Ground Elevation Above Mean Sea Level (AMSL)	17.00 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	WFLX LLC
	Date Constructed	08/01/1982

## FM, AM or TV radio broadcasters. Facility ID's, Call Signs and Services of other broadcast stations with whom the tower is shared

Facility ID	Call Sign	Service
20436	WRMF	FM
61084	WXEL-TV	DTV
83929	WHDT	DTV

# Primary Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

## Primary Tower Rigging Costs

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Tower

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	No

Primary	Other Tower Expenses Not Listed		
Tower	Name Description		
	Construction Mats	required for tag line per conservation permit. Permit and rental quote attached	

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	595
-		Explanation	Pattern analysis Antenna Spec Transmitter Spec Building drawings Installation Supervision Accounting Internal Legal 399 Prep
	Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
		Prepare engineering section of Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare engineering section of Form FCC License to Cover Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare request for Special Temporary Authority	Yes
		Quantity	1
		Do you have Distributed Transmission System engineering services?	N/A
		Critical Facility	N/A
		Terrain-Shielded Facility	N/A

Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	No
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Other Professional Services Expenses Not Listed Professional Services roostsided.

Other	Section	Question	Response
Expenses	AM Pattern Disturbance	Is an Impact Study needed?	No
		Is Remediation needed?	No
	Facility Expenses	Name	N/A
		Other Distributed Transmission System Expenses Not listed	N/A
		Name	N/A
		Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
	Permit and Filing Costs	Local Zoning	No
		Non-zoning permits	No
		BLM or NFS Coordination	No
		FCC Construction Permit Minor Change	No
		FCC License to Cover Application	No
		FCC Special Temporary Authority Application	No
	Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	No
		Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
		Does this relocation require Equipment Storage?	Yes
		Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
		Does this relocation require MVPD Notification of a Channel Change?	Yes

# Other Expenses Not Listed

**Expenses** Information not provided.

## Transmitters

### Cost Information

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description Primary	Predetermined Cost Estimate \$1,548,000.00	Estimated Cost \$1,477,269.83	Estimated Cost Justification	Actual Cost \$137,428.97	Actual Cost Justification
Transmitter ULXTE-72		. , .		·	
Switchgear - industrial 800 amp	\$38,200.00	\$37,683.20	GatesAir Quote Q- 69671	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,431,820.21	Quote attached Headroom analysis attached	\$137,428.97	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$7,766.42	N/A	N/A	N/A
Auxiliary Transmitter UAXTE-2R37	\$126,000.00	\$60,793.56		\$42,736.58	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$60,793.56	Quote attached	\$42,736.58	N/A
Sub-total	\$1,674,000.00	\$1,538,063.39	N/A	\$180,165.55	N/A
Total for all systems	\$2,971,886.00	\$2,660,617.65	N/A	\$273,109.89	N/A

## Components

Actual Information	
Description	File Name

Switchgear - industrial 800 amp	Information not provided.	
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	Component Description: Amount:	Line interactive, 1.00KVA, 120VAC \$394.41
	Component Description: Amount:	Transmitter \$676,049.65
	Component Description: Amount:	Primary Trnasmitter \$137,034.56
Transformer 3 phase/480v - 300 KVA	Information not provided.	

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description: Amount:	Transmitter, Mask Filter Saystem, RF Accessories, Electrical, Installation & Proof \$7,891.62
	Component Description: Amount:	Transmitter, Mask Filter Saystem, RF Accessories, Electrical, Installation & Proof \$26,305.40
	Component Description: Amount:	MASK 1.25KW 6P UHF ATSC/6 TUNE \$3,278.48
	Component Description: Amount:	UAXTE-2R37 \$5,261.08

## Antennas

## Cost Information

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

			Estimated		
	Predetermined	Estimated	Cost		Actual Cost
Description	Cost Estimate	Cost	Justification	Actual Cost	Justification
Primary Antenna TFU-16ETT /VP-R P210	\$296,230.00	\$194,151.76		\$51,953.01	
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$187,465.00	Quote attached. Estimated cost is for H pol only. \$23,400 has been deducted for v-pol components.	\$45,266.25	N/A
Sweep test of existing antenna	\$6,730.00	\$6,686.76	Dielectric invoice MAN000018	\$6,686.76	per invoices received
Auxiliary Antenna TUA-SP4-12 /48H	\$9,776.00	\$9,446.00		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$0.00	N/A
UHF – Broadband Panel, Side Mount Auxiliary /Interim, 1000 horizontally polarized	\$3,046.00	\$3,046.00	filter only required to use existing aux antenna as interim. Quote attached	N/A	N/A
Sub-total	\$306,006.00	\$203,597.76	N/A	\$51,953.01	N/A

Total for	\$2,971,886.00	\$2,660,617.65	N/A	\$273,109.89	N/A
all					
systems					

## Components

Actual Information Description	File Name	
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	Component Description: Amount:	Antenna, Elbow Complex, Engineer, Repackvpol \$45,266.25
Sweep test of existing antenna	Component Description: Amount:	WFLX Sweep Test \$1,600.00
	Component Description: Amount:	Antenna system checkout \$5,086.76
Sweep test of existing antenna	Information not provided.	
UHF – Broadband Panel, Side Mount Auxiliary/Interim, 1000 horizontally polarized	Information not provided.	

## **Transmission Line**

## Cost Information

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$323,200.00	\$212,161.50		\$0.00	
Rigid Transmission Line - copper, 6 1/8"	\$323,200.00	\$212,161.50	Dielectric Quote 513583JKT Rev 1	N/A	N/A
Sub-total	\$323,200.00	\$212,161.50	N/A	\$0.00	N/A
Total for all systems	\$2,971,886.00	\$2,660,617.65	N/A	\$273,109.89	N/A

### Components

Information not provided.

## **Tower Equipment and Rigging Costs**

#### Cost Information

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$413,400.00	\$414,550.00		\$6,500.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$9,500.00	N/A	\$6,500.00	N/A
Construction Mats	\$32,300.00	\$32,300.00	Superior Mat Co. rental quote attached. Required per South Florida Water Management permit (attached)	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$222,750.00	See attached Tower King II, Inc proposal C- 19-007	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Sub-total	\$413,400.00	\$414,550.00	N/A	\$6,500.00	N/A
Total for all systems	\$2,971,886.00	\$2,660,617.65	N/A	\$273,109.89	N/A

## Components

Actual Information Description	File Name	
Structural engineering tower load study for well documented tower	Component Description: Amount:	Structural analysis to original design standard \$2,250.00
	Component Description: Amount:	1.000 003 Engineering / \$2,000.00
	Component Description:	Structural analysis to original design standard
	Amount:	\$2,250.00
Construction Mats	Information not provided.	
Tall Tower (greater than 500')	Information not provided.	
Minor tower reinforcement /modifications	Information not provided.	

## **Outside Professional Services**

## Cost Information

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$203,660.00	\$248,425.00		\$27,954.70	
Project management of the transition	\$94,010.00	\$144,675.00	Widelity Strategic Support Quote	\$25,079.70	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A

Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	\$250.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,000.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$625.00	N/A
Sub-total	\$203,660.00	\$248,425.00	N/A	\$27,954.70	N/A
Total for all systems	\$2,971,886.00	\$2,660,617.65	N/A	\$273,109.89	N/A

# Components

Actual Information	
Description	File Name

Project management of the		
transition	Component Description:	Project
		management
	Amount:	\$5,514.50
	Component Description:	Project
		Management
	Amount:	\$3,301.90
	Component Description:	Project
		Management
	Amount:	\$3,195.85
		. ,
	Component Description:	Project
		Management
	Amount:	\$2,212.45
	Component Description:	Project
		Management
	Amount:	\$4,054.10
	Component Description:	Project
		Management
	Amount:	\$6,800.90
Comprehensive coverage verification via field study, if needed	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	

Prepare request for Special Temporary Authorization	Component Description: Amount:	RF Eng - Special Temporary Authorization \$250.00
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	Preparation of Engineering Section FCC form 2100 \$2,000.00
Perform engineering study for new channel assignment and antenna development	Component Description:	Engineering study work for new channel assignment and antenna development. \$500.00
	Component Description: Amount:	Engineering study work for new channel assignment and antenna development. \$125.00

## **Other Expenses**

### Cost Information

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justificatior
Other Expenses	\$51,620.00	\$43,820.00		\$2,786.63	
MVPD Notification of Channel Change	\$3,750.00	\$3,750.00	Quote attached	\$0.00	N/A
Develop and air announcement of upcoming channel change	\$2,850.00	\$2,850.00	on air rescan announcement Quote attached	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$3,750.00	Group quote attached	N/A	N/A
Equipment Delivery and Handling Charges	\$2,970.00	\$2,970.00	On site forklift rental estimate Representative quote attached	\$2,786.63	N/A
Equipment Storage	\$30,500.00	\$30,500.00	Estimate for Dielectric on site antenna storage Dielectric letter attached	N/A	N/A
Sub-total	\$51,620.00	\$43,820.00	N/A	\$2,786.63	N/A
Total for all systems	\$2,971,886.00	\$2,660,617.65	N/A	\$273,109.89	N/A

## Components

Actual Information
Description File Name

MVPD Notification of Channel Change	Information not provided.	
Develop and air announcement of upcoming channel change	Information not provided.	
DTV Medical Facility Notification	Component Description:	Medical Notification Mailing
	Amount:	\$3,750.00
Equipment Delivery and Handling Charges		
	Component Description:	Forklift Variable
		Reach 10000#
		50' & UP
	Amount:	\$2,786.63
Equipment Storage	Information not provided.	

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$2,971,886.00	\$2,660,617.65	\$273,109.89

Reimbursem	entestiatus	Response
	The facility has ceased operating on its pre- auction channel.	No
	Construction of final facilities or all necessary modifications are complete.	No
	All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.	
		<ol> <li>The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> </ol>	
		2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.	
		<b>3.</b> The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.	

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

e is v r a r v a c c	The above-named entity certifies that it is in full compliance with all statutes, ules, regulations and governmental equirements for which compliance is a pre-requisite for obtaining the payments herein equested.	
an autho named a	e, under penalty of perjury, that I am prized representative of the above- applicant for the Authorization(s) d above.	Robert J. Folliard , III Assistant Secretary 05/06/2019

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		<ol> <li>The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> </ol>	
		2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.	
		3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.	

- 4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
- 5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster **Relocation Fund are** necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

8.	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.	
9.	The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.	
an au name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ied above.	Robert J. Folliard , III Assistant Secretary 05/06/2019

#### Attachments

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