

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID:	41221	Service: DTV	Call Sign:	WNEM-TV	Channel: 30 (UHF)
File Number:	000002	27599	olgn.		
FRN: 00	18223693	Date Submitted:	07/09 /2019		

Applicant Name, Type, and Contact Information

Information Applicant Applicant Address Email Phone Туре MEREDITH Joshua Pila +1 RegAffairs@meredith. Corporation CORPORATION 1716 (515) com LOCUST 284-Doing Business As: MEREDITH STREET 3000 CORPORATION DES MOINES, IA 50309 United States

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Name and Information	Name and Information		
Contact 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.	No
	Briefly describe transition plan	The WNEM repack plan includes the replacement of main solid state transmitter, addition of a interim antenna, and replacement of current side mounted horizontal antenna with top mounted elliptical antenna. all expected costs are included

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

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	DCX/IOX	
		Year	2002	
		Туре	Inductive Output Tube	
		IOT Power Type	Two	
		Power Capacity	36.15 kW	

Existing Transmitter Information

Primary	New Transmitter Costs		
Transmitter	Section	Question	Response
	New Transmitter Use	Use	Primary (Main)
		Change Type	Purchase New
		Is this a request for upgraded equipment?	Yes
		Manufacturer	
		Model	PARALLAX HPTV- PARLX-U24
		Transmitter Type	Solid State
		Solid State Cooling	Liquid Cooled
	Solid State Power capacity	Solid State Power capacity	39.3 kW
		Justification for New Transmitter	The current transmitter is not returnable or available and we intend on replacing with a solid state transmitter with power level to support new elliptical antenna. A comparison chart of transmitter costs along with costs of the IOT are attached.

Primary			
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	Yes
		Description	These costs are for the electrical work required to support the new Transmitter and Heat Exchanger.
	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

Primary	Other Transmitter Cost Not Listed	
Transmitter	Name	Description
	Project managment and planning	Comark site planning visit and design. A quote is attached

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

Primary	Existing Antenna Inform	nation			
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	Side 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)	1000.0 kW		

Manufacturer	
Model	TFU- 30DSC-R 4C140
Year	2002

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?	Yes	
		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	Тор	
		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)	1000.0 kW	
		Manufacturer		

Model	TFU-31ET /VP-R 4C140
Year	2017
Justification for New Antenna	The curren antenna is a single channel and cannot be retuned

Primary Other Antenna Costs

Antenna

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	
	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?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No

Sweep	Test
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Primary Other Antenna Cost Not Listed

Antenna Information not provided.

New Antenna Description Use Interpret of Use N// Description of Use Change Type Pu Change Type Ownership Owner N// Owner Is antenna shared? No Is antenna directional? No Will antenna be located on or in close proximity to an antenna farm? No Manufacturer and Type Class Fu Mounting Antenna position in stack No Polarization Ho No	New Antenna Costs			
New Antenna Manufacturer and Type Class Nu New Antenna Manufacturer and Type Class Fu No No No No No No <th>sponse</th>	sponse			
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Manufacturer and Type Mounting Sic Mounting Antenna position in stack No Polarization Ho)			
Mounting Sic Antenna position in stack No Polarization Ho	ll Power			
Polarization Ho	de Mount			
	ot in Stack			
Type Bro	orizontal			
	oadband Inel			
Number of Stations Supported 1				
Number of Panels/Bays 8				
Lower Limit 46	0.00 MHz			
Upper Limit 694	8.00 MHz			
Design power capacity in use 10	0.0 %			
Other Antenna Type N//	A			
ERP: (Effective Radiated Power) 20.	.0 kW			
Manufacturer				
	U-8WB-1- C160			
Year 20	17			

Justification for New Antenna

Other Antenna Costs Interim Antenna Section Question Response **Elbow Complex** Do you require the separate purchase of No the Elbow Complex? Broadband or Single Channel? N/A Feed Line Size N/A Do you require the separate purchase of No Side Mount Brackets side mount brackets for an antenna?

Do you require separate purchase of

high or medium power antenna?

transmission line and antenna?

Do you require the sweep testing of

pattern scatter analysis for a side mount

No

Yes

Other Antenna Cost Not Listed

Sweep Test

Interim Antenna

Information not provided.

Pattern Scatter Analysis

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

Existing Transmission Line Primary Existing Transmission

smissio	n Line Section	Question	Response
	Existing Transmission Line Description	Type of change	Utilize Existing
		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 Line Manufacturer and	Manufacturer	Dielectric
Type		Туре	Rigid
		Diameter	8 3/16 inches
		Other Diameter	N/A
		Segment Length	20 inches
		Other Segment Length	N/A
		Number of parallel runs	1
	Length	1100 feet per run	

Primary Other Transmission Line Expenses Not Listed Transmission

55101	'Name	Description	
	Line extension	A need for 60 foot of additional line is required for the new installation	
	Feed line switch	Feedline switch to use between interim and main antenna	

Fransmission	Section	Question	Response
	New Transmission Line Costs	Use	Interim
		Description of Use	N/A
		Change Type	Purchase New
		Туре	Flexible Air
		Diameter	3 inches
		Segment Length	N/A
		Other Segment Length	
		Number of parallel runs	1
		Length	750 feet per run
		Justification for New Transmission Line	We need to add a new line for the interim antenna

Interim New Transmission Line

Other Transmission Line Expenses Not Listed Transmission

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

Primary Existing Tower

Tower	Section	Question	Response
	Existing Tower	Type of change	Modify Existing
	Description	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?	No
		One or more FM, AM or TV radio broadcaster(s)	N/A
		Others Types of Users	N/A
		Is tower documented for structural analysis?	No
		Is tower compliant with Rev G?	No
	Existing Tower Structure Registration	Do you have a tower registration number?	Yes
		ASR Number	1006698
	Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	43° 28' 14.0" N-
		Longitude (NAD83)	083° 50' 36.0" W-
		Overall Structure Height	1042.64 feet
		Support Structure Height	971.44 feet
		Ground Elevation Above Mean Sea Level (AMSL)	584.97 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	MEREDITH CORPORATION DBA = WNEM TV
Date Constructed	01/01/1984

Primary Tower Modification Costs

Tower

Tower

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

Primary Tower Rigging Costs

SectionQuestionResponseTower Rigging CostsComplex TowerN/AHelicopter Services
RequiredAre helicopter services required?No

Primary Other Tower Expenses Not Listed

Tower Information not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	20
		Explanation	We need outside project support to review quotes, project plans along with mapping and review of new antenna performance. Over sight of total installation.
	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	Yes
		For Main Facility	Yes
		Prepare engineering section of Form FCC License to Cover Application	Yes
		For Auxiliary Facility	Yes
		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	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	Yes
	Environmental Assessment	Yes
	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	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
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	Yes
		BLM or NFS Coordination	No
		FCC Construction Permit Minor Change	Yes
		FCC License to Cover Application	Yes
		FCC Special Temporary Authority Application	Yes
	Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
		Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
		Does this relocation require Equipment Storage?	No
		Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
		Does this relocation require MVPD Notification of a Channel Change?	No

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	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter PARALLAX HPTV- PARLX-U24	\$1,556,400.00	\$1,197,148.36		\$1,196,635.92	
Project managment and planning	\$15,300.00	\$15,300.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***This is the cost for transmitter site planning, visit and design. (quote attached)	\$15,300.00	N/A
Other Electrical Service: These costs are for the electrical work required to support the new Transmitter and Heat Exchanger.	\$68,100.00	\$68,100.00	N/A	\$68,100.00	N/A

UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,113,748.36	N/A	\$1,113,235.92	N/A
Sub-total	\$1,556,400.00	\$1,197,148.36	N/A	\$1,196,635.92	N/A
Total for all systems	\$3,483,758.30	\$3,005,696.66	N/A	\$1,476,055.04	N/A

Components

Actual Information Description	File Name	
Project managment and planning	Component Description: Amount:	100 percent invoice for design services \$15,300.00
Other Electrical Service: These costs are for the electrical work required to support the new Transmitter and Heat Exchanger.	Component Description: Amount:	electrical installation costs \$68,100.00

Component Description: Amount:	20 percent invoice \$222,647.18
Component Description:	This invoice is for the last 5 percent
Amount:	of transmitter cost \$55,661.80
Component Description:	70 percent invoice payment
Amount:	\$779,265.14
Component Description:	5 percent of Invoice
Amount:	\$55,661.80
	Amount: Component Description: Amount: Component Description: Amount: Component Description:

Antennas

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
Interim Antenna TFU-8WB-1- R C160	\$66,630.00	\$66,300.00		\$46,192.50	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,760.00	N/A
UHF – Broadband Panel, Side Mount Auxiliary /Interim, 20 horizontally polarized	\$59,900.00	\$59,900.00	SYSTEM DIAGNOSTIC - DELETE AND REPLACE WITH APPROPRIATE ESTIMATE	\$40,432.50	Amount is the same as originally submitted.
Primary Antenna TFU-31ETT /VP-R 4C140	\$308,530.00	\$278,943.00		\$198,134.40	
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$10,298.00	N/A	\$8,238.40	N/A

UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically	\$289,500.00	\$262,245.00	N/A	\$184,776.00	N/A
or circularly polarized					
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,120.00	N/A
Sub-total	\$375,160.00	\$345,243.00	N/A	\$244,326.90	N/A
Total for all systems	\$3,483,758.30	\$3,005,696.66	N/A	\$1,476,055.04	N/A

Components

mponent Description: nount:	45 percent of interim antenna sweep \$2,880.00
mponent Description: nount:	45 percent of Interim antenna \$2,880.00
,	mponent Description:

UHF – Broadband Panel,Side Mount Auxiliary/Interim,20 horizontally polarized	Component Description: Amount:	45 percent of Interim antenna \$20,216.25
	Component Description: Amount:	45 percent of Interim antenna \$20,216.25
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	Component Description:	80 percent of main antenna elbow Elbow
	Amount:	complex \$8,238.40
UHF - High Power Top Mount (200-1000 kW), One	O-manual D-second	20
station antenna, elliptically	Component Description:	80 percent of main antenna
or circularly polarized	Amount:	\$184,776.00
Sweep test of existing		
antenna	Component Description:	80 percent of
		main antenna R
		sweep
	Amount:	\$5,120.00

Transmission Line

Cost Information

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

Description Interim Transmission Line	Predetermined Cost Estimate \$44,250.00	Estimated Cost \$42,836.00	Estimated Cost Justification	Actual Cost \$26,703.18	Actual Cost Justification
Flexible Air Transmission Line - dielectric, 3"	\$44,250.00	\$42,836.00	Line length required to feed interim antenna	\$26,703.18	N/A
Primary Transmission Line	\$46,586.30	\$46,586.30		\$8,389.04	
Feed line switch	\$36,100.00	\$36,100.00	Antenna switch needed for Interim to main switching during testing and installation	N/A	N/A
Line extension	\$10,486.30	\$10,486.30	N/A	\$8,389.04	N/A
Sub-total	\$90,836.30	\$89,422.30	N/A	\$35,092.22	N/A
Total for all systems	\$3,483,758.30	\$3,005,696.66	N/A	\$1,476,055.04	N/A

Components

Actual Information	
Description	File Name

Flexible Air Transmission Line - dielectric, 3"	Component Description:	45 percent of
		Interim antenna feedline
	Amount:	\$13,351.59
	Anount	φ10,001.00
	Component Description:	45 percent of
		Interim antenna
	Amount:	\$13,351.59
Feed line switch	Information not provided.	
Line extension		
	Component Description:	80 percent of
		Hanger assy fix 6 1
	Amount:	/8 \$109.76
		\$100.10
	Component Description:	80 percent of
		RTLSCR675-20
		15' to 20 '
	Amount:	extension
	Amount:	\$1,375.20
	Component Description:	80 percent of main
		feed line Test 6-75
	Amount:	\$1,694.40
	Component Description:	Other hangers
		Vertical spring 6 1
		/8"
	Amount:	\$1,085.28
	Component Description:	R58792 Other line
		extension
	Amount:	\$4,124.40

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	\$1,288,800.00	\$1,218,800.00		\$0.00	
Tall Tower (greater than 500')	\$210,500.00	\$202,800.00	Added costs due to line removal	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$16,000.00	N/A	N/A	N/A
Serious tower reinforcement /modifications	\$1,052,000.00	\$1,000,000.00	N/A	N/A	N/A
Sub-total	\$1,288,800.00	\$1,218,800.00	N/A	\$0.00	N/A
Total for all systems	\$3,483,758.30	\$3,005,696.66	N/A	\$1,476,055.04	N/A

Components

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	\$142,795.00	\$133,245.00		\$0.00	
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$79,995.00	N/A	N/A	N/A
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$10,000.00	N/A	N/A	N/A
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$500.00	N/A	N/A	N/A

Project management of the transition	\$3,160.00	\$3,000.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	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	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/A	N/A	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
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover	\$1,580.00	\$1,500.00	N/A	N/A	N/A

Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	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
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	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 request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Sub-total	\$142,795.00	\$133,245.00	N/A	\$0.00	N/A
Total for all systems	\$3,483,758.30	\$3,005,696.66	N/A	\$1,476,055.04	N/A

Components

Information not provided.

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 Justification
Other Expenses	\$29,767.00	\$21,838.00		\$0.00	
DTV Medical Facility Notification	\$11,550.00	\$3,676.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Non-zoning permits	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$1,577.00	\$1,577.00	Dumpster and trash removal for construction.	N/A	N/A

Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	The main antenna delivery was not included on quote	N/A	N/A
Sub-total	\$29,767.00	\$21,838.00	N/A	\$0.00	N/A
Total for all systems	\$3,483,758.30	\$3,005,696.66	N/A	\$1,476,055.04	N/A

Components

Information not provided.

Cost	Grand Total			
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$3,483,758.30	\$3,005,696.66	\$1,476,055.04

Reimbursem	entestiatus	Response
	The facility has ceased operating on its pre- auction channel.	Yes
	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.	
		 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. The above-named 	
		entity acknowledges that all certifications and attached documentation are considered material representations.	
		3. 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.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.	
declare, under penalty of p an authorized representative named applicant for the Aut specified above.	e of the above- Oaks

Certification	Section	Question	Response
Gertinication	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).	
		 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. 	
		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).
- 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) fied above.	Larence K Oaks Technology Meredith LMG 07/09/2019

Attachments

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