



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **136750** | Service: **DTV** | Call **WZRB** | Channel: **25 (UHF)** |  
ID: | Sign:  
File **0000028354**  
Number:  
FRN: **0003720042** | Date **08/01**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>ION MEDIA LICENSE COMPANY, LLC</b>	Bianca Frye 601	+1 (561)	BiancaFrye@ionmedia.com	Limited Liability Company
Doing Business As: ION MEDIA LICENSE COMPANY, LLC	Clearwater Park Road West Palm Beach, FL 33401 United States	682- 4110		

## Reimbursement Contact Information

### Reimbursement Contact Name and 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 Information and Transition Plan

Question	Response
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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	Install and operate from interim antenna on pre repack channel utilizing current non retunable transmitter. Replace current top mount antenna, transmission line and transmitter for operation on post repack channel.

## Transmitters

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

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCX
	Year	1997
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	40 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	MPTV-PRLX-U4
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.5 kW
	Justification for New Transmitter	See attached Transmitter Exhibits. See attached Transmitter Upgrade Disclaimer

**Primary  
Transmitter**

**Other Transmitter Costs**

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	Electrical Installation for replacement transmitter
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	5 tons
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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 Transmitter**      **Other Transmitter Cost Not Listed**

Name	Description
<b>Removal of Existing Equipment</b>	Removal of existing transmitters and equipment / Site Prep
<b>RF Interconnect</b>	Interconnect between RF System and transmission line

**Antennas**

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

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	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
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	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) .....	240.0 kW

Manufacturer	
Model	TFU- 22GTH-R 4BP300
Year	1997



Primary  
Antenna

New Antenna Costs

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	Not in Stack
	Polarization	Elliptical
	Type	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) .....	155.0 kW
	Manufacturer	

Model	ATW16H3-ETPX-25H
Year	2018
Justification for New Antenna	Current slot antenna cannot be re-channelled

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	4 1/16 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

Primary Antenna	Other Antenna Cost Not Listed Information not provided.
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**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	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
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Design power capacity in use	25.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	31.0 kW
	Manufacturer	
	Model	TFU-8WB- 1-R
	Year	2017

	Justification for New Antenna	Interim antenna needed to to complete move to new channel
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**Interim Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	4 1/16 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Interim Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

**Primary**  
**Transmission Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	570 feet per run

Primary  
Transmission Line

New Transmission 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
	Type	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	590 feet per run
	Justification for New Transmission Line	See attached Transmission Line Exhibit

Primary  
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Sweep existing transmission line	Sweep existing transmission line



**Tower Equipment And Rigging Costs**

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

**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	Leased
	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?	Unknown
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1044529
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	34° 02' 39.0" N-
	Longitude (NAD83)	080° 59' 50.0" W-
	Overall Structure Height	550.19 feet
	Support Structure Height	501.96 feet
	Ground Elevation Above Mean Sea Level (AMSL)	379.92 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Roberts Tower Company II, LLC
	Date Constructed	04/20/1988

### Primary Tower

#### Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	No reinforcements needed

### Primary Tower

#### Tower Rigging Costs

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

### Primary Tower

#### Other Tower Expenses Not Listed

Name	Description
Structural Study	Structural analysis required after tower mapping completed

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
<b>Outside RF consulting Engineering Services</b>	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
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	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	Yes
	Environmental Assessment	Yes
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**

If wireless is not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	Local Zoning	Yes
	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
<b>Other Miscellaneous Expenses</b>	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?	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

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b>
	Information not provided.

## Cost Information

### Transmitters

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
<b>Primary Transmitter MPTV-PRLX-U4</b>	<b>\$368,750.00</b>	<b>\$314,958.80</b>		<b>\$176,567.04</b>	
RF Interconnect	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Other Electrical Service: Electrical Installation for replacement transmitter	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$19,250.00	N/A	N/A	N/A
Removal of Existing Equipment	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	\$273,500.00	\$220,708.80	See attached Hitachi Comark Quote #P3488PRLXU4-020118-R1	\$176,567.04	N/A
<b>Sub-total</b>	<b>\$368,750.00</b>	<b>\$314,958.80</b>	<b>N/A</b>	<b>\$176,567.04</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,334,155.00</b>	<b>\$1,224,371.80</b>	<b>N/A</b>	<b>\$603,118.99</b>	<b>N/A</b>

### Components

Actual Information	
Description	File Name
RF Interconnect	Information not provided.

Other Electrical Service: Electrical Installation for replacement transmitter	Information not provided.								
5 Ton system	Information not provided.								
Removal of Existing Equipment	Information not provided.								
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	<table> <tr> <td><b>Component Description:</b></td><td>30% "deposit" payment for Comark Transmitter. Supporting documentation attached.</td></tr> <tr> <td><b>Amount:</b></td><td>\$66,212.64</td></tr> <tr> <td><b>Component Description:</b></td><td>50% "progress" payment on Comark transmitter. Supporting documentation attached.</td></tr> <tr> <td><b>Amount:</b></td><td>\$110,354.40</td></tr> </table>	<b>Component Description:</b>	30% "deposit" payment for Comark Transmitter. Supporting documentation attached.	<b>Amount:</b>	\$66,212.64	<b>Component Description:</b>	50% "progress" payment on Comark transmitter. Supporting documentation attached.	<b>Amount:</b>	\$110,354.40
<b>Component Description:</b>	30% "deposit" payment for Comark Transmitter. Supporting documentation attached.								
<b>Amount:</b>	\$66,212.64								
<b>Component Description:</b>	50% "progress" payment on Comark transmitter. Supporting documentation attached.								
<b>Amount:</b>	\$110,354.40								



## Cost Information

### Antennas

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
<b>Interim Antenna TFU-8WB-1-R</b>	<b>\$61,225.00</b>	<b>\$60,988.00</b>		<b>\$54,588.00</b>	
UHF - High Power, Side Mount, basic slot antenna, 8 bay,, 31 kW input, directional,, horizontally polarized	<i>\$44,925.00</i>	\$44,925.00	Please see attached Dielectric Quote #900069CMZ WZRB ION INTERIM.	\$44,925.00	N/A
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$9,663.00	Please see attached Dielectric Quote #900069CMZ WZRB ION INTERIM.	\$9,663.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Primary Antenna ATW16H3-ETPX-25H</b>	<b>\$305,800.00</b>	<b>\$184,188.00</b>		<b>\$60,872.73</b>	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$3,125.00	N/A

Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$9,100.00	N/A	\$2,897.23	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$168,688.00	V-Pol cost not included in reimbursement request	\$54,850.50	N/A
<b>Sub-total</b>	\$367,025.00	\$245,176.00	N/A	\$115,460.73	N/A
<b>Total for all systems</b>	\$1,334,155.00	\$1,224,371.80	N/A	\$603,118.99	N/A

## Components

Actual Information	
Description	File Name
UHF - High Power, Side Mount, basic slot antenna, 8 bay,, 31 kW input, directional,, horizontally polarized	<p><b>Component Description:</b> Cost of interim antenna. Supporting documentation is attached.</p> <p><b>Amount:</b> \$44,925.00</p>

<p>Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)</p>	<table> <tr> <td data-bbox="710 174 1018 212"><b>Component Description:</b></td><td data-bbox="1150 174 1353 365">Cost of interim elbow complex. Supporting documentation is attached.</td></tr> <tr> <td data-bbox="710 376 818 414"><b>Amount:</b></td><td data-bbox="1150 376 1270 414">\$8,200.00</td></tr> <tr> <td data-bbox="710 515 1018 553"><b>Component Description:</b></td><td data-bbox="1150 515 1369 745">Cost of reducer for interim antenna package. Supporting documentation is attached.</td></tr> <tr> <td data-bbox="710 757 818 795"><b>Amount:</b></td><td data-bbox="1150 757 1270 795">\$1,463.00</td></tr> </table>	<b>Component Description:</b>	Cost of interim elbow complex. Supporting documentation is attached.	<b>Amount:</b>	\$8,200.00	<b>Component Description:</b>	Cost of reducer for interim antenna package. Supporting documentation is attached.	<b>Amount:</b>	\$1,463.00
<b>Component Description:</b>	Cost of interim elbow complex. Supporting documentation is attached.								
<b>Amount:</b>	\$8,200.00								
<b>Component Description:</b>	Cost of reducer for interim antenna package. Supporting documentation is attached.								
<b>Amount:</b>	\$1,463.00								
<p>Sweep test of existing antenna</p>	<p>Information not provided.</p>								

Sweep test of existing antenna

**Component Description:**

35% "upon mfg" payment for repack sweep of primary antenna operations. Explanation of variance form and supporting documentation is attached. This invoice has been paid.

**Amount:**

\$2,187.50

**Component Description:**

15% "payment with order" payment for repack sweep of primary antenna operations. Explanation of variance form and supporting documentation attached. This invoice has been paid.

**Amount:**

\$937.50

<p>Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>35% "upon mfg" payment for primary elbow complex. Explanation of variance form and supporting documentation is attached. This invoice has been paid.</p> <p>\$2,028.06</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>15% "payment with order" payment for primary elbow complex. Explanation of variance form and supporting documentation attached. This invoice has been paid.</p> <p>\$869.17</p>

UHF - High Power Top  
Mount (200-1000 kW), One  
station antenna , elliptically  
or circularly polarized

**Component Description:**

35% "upon mfg"  
payment for  
primary antenna  
and mounts.  
Explanation of  
variance form and  
supporting  
documentation is  
attached. This  
invoice has been  
paid.

**Amount:**

\$38,395.35

**Component Description:**

15% "payment with  
order" payment for  
primary antenna.  
Explanation of  
variance form and  
supporting  
documentation  
attached. This  
invoice has been  
paid.

**Amount:**

\$16,455.15

Cost  
Information

Transmission Line

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	\$90,180.00	\$81,417.00		\$34,977.47	
Rigid Transmission Line - copper, 4 1 /16"	\$83,780.00	\$75,017.00	N/A	\$34,977.47	N/A
Sweep existing transmission line	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$90,180.00	\$81,417.00	N/A	\$34,977.47	N/A
Total for all systems	\$1,334,155.00	\$1,224,371.80	N/A	\$603,118.99	N/A

Components

Actual Information Description	File Name
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Rigid Transmission Line - copper, 4 1/16"	<div data-bbox="708 174 1362 607"> <p><b>Component Description:</b> 35% "upon mfg" payment for primary transmission line. Explanation of variance form and supporting documentation is attached. This invoice has been paid.</p> <p><b>Amount:</b> \$24,484.23</p> </div> <div data-bbox="708 757 1362 1189"> <p><b>Component Description:</b> 15% "payment with order" payment for primary transmission line. Explanation of variance form and supporting documentation attached. This invoice has been paid.</p> <p><b>Amount:</b> \$10,493.24</p> </div>
Sweep existing transmission line	Information not provided.



Cost  
Information

Tower Equipment and Rigging Costs

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	\$258,300.00	\$350,985.00		\$274,613.75	
Structural Study	<i>\$21,500.00</i>	\$21,500.00	Please see attached Vertical Bridge Quote #051818 and Elevated Structural Quote WZRB.	\$21,500.00	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$4,000.00	***System Notice: Estimate adjusted and locked because line has been superseded.***	\$4,000.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$325,485.00	Proposed cost for tower service. Please see attached Worldwide Communications Quote #S-19-937.	\$249,113.75	N/A
Sub-total	\$258,300.00	\$350,985.00	N/A	\$274,613.75	N/A
Total for all systems	\$1,334,155.00	\$1,224,371.80	N/A	\$603,118.99	N/A

Components

Actual Information Description	File Name
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Structural Study

**Component Description:** Cost of tower structural study. Supporting documentation attached. This invoice has been paid.

**Amount:** \$7,000.00

**Component Description:** Cost of structural analysis. Supporting documentation is attached. This invoice has been paid.

**Amount:** \$2,500.00

**Component Description:** Cost to review rigging plan. Supporting documentation is attached.

**Amount:** \$4,000.00

**Component Description:** Cost of tower mapping analysis. Supporting documentation attached. This invoice has been paid.

**Amount:** \$4,000.00

**Component Description:** Cost of structural study. Supporting documentation attached. This invoice has been paid.

**Amount:** \$4,000.00

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<p>Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study</p>	<table> <tr> <td data-bbox="710 168 1037 224"><b>Component Description:</b></td><td data-bbox="1037 168 1428 448">Cost of tower mapping analysis. Supporting documentation attached. This invoice has been paid.</td></tr> <tr> <td data-bbox="710 448 1037 504"><b>Amount:</b></td><td data-bbox="1037 448 1428 504">\$4,000.00</td></tr> </table>	<b>Component Description:</b>	Cost of tower mapping analysis. Supporting documentation attached. This invoice has been paid.	<b>Amount:</b>	\$4,000.00				
<b>Component Description:</b>	Cost of tower mapping analysis. Supporting documentation attached. This invoice has been paid.								
<b>Amount:</b>	\$4,000.00								
<p>Tall Tower (greater than 500')</p>	<table> <tr> <td data-bbox="710 616 1037 672"><b>Component Description:</b></td><td data-bbox="1037 616 1428 862">Security Deposit for Future Tower Service. Supporting documentation attached.</td></tr> <tr> <td data-bbox="710 862 1037 918"><b>Amount:</b></td><td data-bbox="1037 862 1428 918">\$20,000.00</td></tr> <tr> <td data-bbox="710 996 1037 1052"><b>Component Description:</b></td><td data-bbox="1037 996 1428 1276">75% "deposit" for tower service. Supporting documentation attached. This invoice has been paid.</td></tr> <tr> <td data-bbox="710 1276 1037 1332"><b>Amount:</b></td><td data-bbox="1037 1276 1428 1332">\$229,113.75</td></tr> </table>	<b>Component Description:</b>	Security Deposit for Future Tower Service. Supporting documentation attached.	<b>Amount:</b>	\$20,000.00	<b>Component Description:</b>	75% "deposit" for tower service. Supporting documentation attached. This invoice has been paid.	<b>Amount:</b>	\$229,113.75
<b>Component Description:</b>	Security Deposit for Future Tower Service. Supporting documentation attached.								
<b>Amount:</b>	\$20,000.00								
<b>Component Description:</b>	75% "deposit" for tower service. Supporting documentation attached. This invoice has been paid.								
<b>Amount:</b>	\$229,113.75								

Cost  
Information

Outside Professional Services

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	\$161,210.00	\$152,750.00		\$1,500.00	
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	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
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$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 FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	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

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,500.00	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 request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
<b>Sub-total</b>	\$161,210.00	\$152,750.00	N/A	\$1,500.00	N/A
<b>Total for all systems</b>	\$1,334,155.00	\$1,224,371.80	N/A	\$603,118.99	N/A

## Components

Actual Information	
Description	File Name
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.

ASR modification (prepare FCC Form 854)	Information not provided.
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.
NEPA Section 106 environmental review, if needed	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees - Negotiation of lease and other matters for shared locations	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.
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Perform engineering study for new channel assignment and antenna development	Information not provided.

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b></p> <p>Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid.</p> <p><b>Amount:</b></p> <p>\$1,500.00</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare request for Special Temporary Authorization	Information not provided.
Prepare and or review reimbursement form	Information not provided.



## Cost Information

### Other Expenses

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
<b>Other Expenses</b>	<b>\$88,690.00</b>	<b>\$79,085.00</b>		<b>\$0.00</b>	
MVPD Notification of Channel Change	<i>\$500.00</i>	\$500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$0.00</i>	\$0.00	The amount is yet to be determined (TBD) and ION will submit on-air announcement costs when finalized.	N/A	N/A
Equipment Storage	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Local Zoning	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,000.00	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
<b>Sub-total</b>	\$88,690.00	\$79,085.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,334,155.00	\$1,224,371.80	N/A	\$603,118.99	N/A

## Components

Information not provided.

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$1,334,155.00	\$1,224,371.80
			\$603,118.99

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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	<p>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.</p>	
		<ol style="list-style-type: none"> <li>1. 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> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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).
5. 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.

<p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Mario Vasquez</b>  <i>Vice President - Finance, Operations</i></p> <p>08/01/2019</p>

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 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 AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		<ol style="list-style-type: none"> <li>1. 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> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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.



<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Mario Vasquez</b>  <i>Vice President - Finance, Operations</i></p> <p>08/01/2019</p>

## Attachments