



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **83946** | Service: **DTV** | Call **WEPH** | Channel: **17 (UHF)**
ID: | Sign:
File **0000027785**
Number:
FRN: **0020176533** | Date **10/30**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|-----------------------------|----------------------|----------------|
| CHRISTIAN TELEVISION NETWORK OF MISSISSIPPI, INC. Doing Business As: CHRISTIAN TELEVISION NETWORK OF MISSISSIPPI, INC. | PO BOX 6922 CLEARWATER, FL 33758 United States | +1 (727) 535- 5622 | soneal@ctntv. net | Not-for-Profit |

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 |
|--|---|----------------------|-----------------------------|
| Joseph C. Chautin III <i>Hardy, Carey, Chautin & Balkin, LLP</i> | 1080 West Causeway Approach Mandeville, LA 70471 United States | +1 (985) 629-0777 | jchautin@hardycarey. com |

**Broadcaster
Information
and
Transition
Plan**

| Question | Response |
|--|--|
| 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 | WEPH will install temp low power antenna & line. Then, existing xmtr will feed temp LP antenna thru mask filter. Removal of old antenna & line. Then, installation of new line, antenna, new xmtr, and mask filter to begin. |

Transmitters

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

**Primary
Transmitter****Existing Transmitter Information**

| 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 and Type | Manufacturer | |
| | Model | CST II |
| | Year | 2010 |
| | Type | Inductive Output Tube |
| | IOT Power Type | Single |
| | Power Capacity | 20 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? | No |
| | Manufacturer | |
| | Model | Parallax HPTV-PRLX-U12 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 20 kW |
| | Justification for New Transmitter | Manufacturer (ABS) no longer in business. Transmitter no longer field supported. |

**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 | additional breakers in panel, EMT or flexible metal conduit, misc wiring |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Type | 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 leasehold 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 Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|--------------------------|--|
| TRANSMISSION LINE | transmitter building interior transmission line components for transmitter interconnects |

Antennas

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

**Primary
Antenna**

Existing Antenna Information

| 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? | Yes |
| Existing Antenna Manufacturer and Type | Class | Full Power |
| | Mounting | Side 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) | 1000.0 kW |

| | |
|--------------|----------------------|
| Manufacturer | |
| Model | ATW28H3- HSC4-49H |
| Year | 2010 |

**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? | 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? | Yes |
| New Antenna Manufacturer and Types | Class | Full Power |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | 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) | 517.0 kW |
| Manufacturer | | |

| | |
|-------------------------------|---|
| Model | TFU-18DSC-R C250 |
| Year | 2017 |
| Justification for New Antenna | Existing antenna not capable of operating on new channel. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|---|----------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | |
| | 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 |
| 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? | Yes |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

**Primary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

**Interim
Antenna**

New Antenna Costs

| Section | Question | Response |
|--|--|--------------------|
| New Antenna Description | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Ownership | Owned |
| | Owner | N/A |
| | Is antenna shared? | No |
| | Is antenna directional? | No |
| | Will antenna be located on or in close proximity to an antenna farm? | Yes |
| New Antenna Manufacturer and Type | Class | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | 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) | 40.0 kW |
| | Manufacturer | |
| | Model | 750 10402 |
| | Year | 2018 |

| | |
|-------------------------------|---|
| Justification for New Antenna | A temporary low power antenna & line will be needed during the re-channeling process to keep WEPH on the air. |
|-------------------------------|---|

Interim Antenna

Other Antenna Costs

| Section | Question | Response |
|---------------------------------|---|----------|
| 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 an 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? | No |

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 |
|---|--|----------------------|
| 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 Line Manufacturer and Type | Manufacturer | |
| | Type | Rigid |
| | Diameter | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 19 3/4 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1350 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 | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 19 1/2 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1350 feet per run |
| | Justification for New Transmission Line | Existing line section length is not compatible with new channel frequency. |

**Primary
Transmission
Line** **Other Transmission Line Expenses Not Listed**

Information not provided.

**Interim
Transmission
Line**

New Transmission Line

| Section | Question | Response |
|------------------------------------|---|--|
| New Transmission Line Costs | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Type | Flexible Air |
| | Diameter | 1 5/8 inches |
| | Segment Length | N/A |
| | Other Segment Length | |
| | Number of parallel runs | 1 |
| | Length | 170 feet per run |
| | Justification for New Transmission Line | 170 feet of line purchased to connect interim antenna to unused rigid line already installed on the tower. |

**Interim
Transmission
Line**

Other Transmission Line Expenses Not Listed

Information not provided.

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 | Move Equipment |
| | 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? | Yes |
| | One or more FM, AM or TV radio broadcaster(s) | Yes |
| | Others Types of Users | No |
| | 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 | 1040183 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 33° 47' 40.0" N- |
| | Longitude (NAD83) | 089° 05' 16.0" W- |
| | Overall Structure Height | 1559.69 feet |
| | Support Structure Height | 1501.95 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 579.72 feet |

| | |
|------------------|---|
| Structure Type | GTOWER - Guyed Structure Used for Communication Purposes |
| Tower Owner | Mississippi TV, LLC |
| Date Constructed | 08/06/2013 |

**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 |
|-------------|-----------|---------|
| 74148 | WTVA | DTV |

**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

Information not provided.

Outside Professional Services Costs

| Section | Question | Response |
|---|--|---|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 627 |
| | Explanation | Project management (Invoice processing, progress reporting, daisy chain monitoring and analysis, program management, and site visits as required) |
| 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 Services | 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 | 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 | Yes |
| Address transition timing and coordination issues w/ other stations and wireless providers | No | |
| RF Field Engineering Services | Comprehensive coverage verification via field study | No |
| | RF exposure measurements | No |
| | Additional Field Engineering Service | Yes |
| | Number of Days | 2 |
| | Justification | optimization of new transmission line to operated on new channel |

**Outside
Professional
Services
Costs**

Other Professional Services Expenses Not Listed

| Name | Description |
|-------------------------------|-------------------------------------|
| Structural Analysis | Broadcast Tower Structural Analysis |
| Tower Mapping | Broadcast Tower Mapping |
| Attorney Fees - Other Matters | Legal Services |

Other Expenses

| Section | Question | Response |
|-------------------------------------|--|----------|
| 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 | 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? | Yes |
| | Does this relocation require MVPD Notification of a Channel Change? | Yes |

**Other
Expenses**

Other Expenses Not Listed

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 |
|--|-----------------------------|-----------------------|---|-----------------------|---------------------------|
| Primary Transmitter Parallax HPTV-PRLX-U12 | \$696,000.00 | \$762,583.83 | | \$458,015.90 | |
| TRANSMISSION LINE | <i>\$5,000.00</i> | \$5,000.00 | interconnect transmission line components within transmitter building | N/A | N/A |
| Other Electrical Service: additional breakers in panel, EMT or flexible metal conduit, misc wiring | <i>\$7,000.00</i> | \$7,000.00 | interconnect needed from existing electrical service to new transmitter components | \$2,142.00 | N/A |
| UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW | \$684,000.00 | \$750,583.83 | see Estimated Cost Justification WEPH-110-1st Primary Transmitter - UHF Liquid Cooled 14-20 kW v0 | \$455,873.90 | N/A |
| Sub-total | \$696,000.00 | \$762,583.83 | N/A | \$458,015.90 | N/A |
| Total for all systems | \$1,589,157.00 | \$1,686,858.66 | N/A | \$1,263,507.04 | N/A |

Components

| Actual Information Description | File Name |
|---|--|
| TRANSMISSION LINE | Information not provided. |
| Other Electrical Service: additional breakers in panel, EMT or flexible metal conduit, misc wiring | <p data-bbox="703 349 1378 584">Component Description: WEPH-110-1st Primary Transmitter - Other Electrical Service - Additional Wiring and Conduit Amount: \$306.00</p> <p data-bbox="703 689 1378 925">Component Description: WEPH-110-1st Primary Transmitter - Other Electrical Service - Additional Wiring and Conduit Amount: \$1,836.00</p> |
| UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW | <p data-bbox="703 1059 1334 1171">Component Description: REMOVE OLD TRANSMITTER Amount: \$3,978.00</p> <p data-bbox="703 1276 1374 1469">Component Description: 110-1st Primary Transmitter - UHF Liquid Cooled Solid State, 50.1 kW Amount: \$612.00</p> <p data-bbox="703 1574 1378 1767">Component Description: WEPH-110-1st Primary Transmitter - UHF Liquid Cooled 14-20 kW Amount: \$306.00</p> <p data-bbox="703 1872 1334 1984">Component Description: TRANSMITTER INSTALLATION Amount: \$1,836.00</p> |

Component Description: Transmitter system
- PRLX U12 D17
Amount: \$298,687.93

Component Description: "LABOR 10/1/2018
THROUGH 10/8
/2018 LABOR 10/8
/2018 THROUGH
10/14/2018"
Amount: \$1,110.00

Component Description: Transmitter system
- PRLX U12 D17
Amount: \$373,359.92

Component Description: System, WEPH
PRLX U12 D17
Amount: \$74,671.98

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 |
|--|-----------------------------|---------------------|--|---------------------|---------------------------|
| Interim Antenna 750 10402 | \$26,300.00 | \$9,702.86 | | \$9,702.85 | |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | \$26,300.00 | \$9,702.86 | see WEPH-280-Interim Antenna Kathrein 750 10402 HPol Increase Justification V1 | \$9,702.85 | N/A |
| Primary Antenna TFU-18DSC-R C250 | \$179,130.00 | \$178,540.00 | | \$173,540.00 | |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$6,400.00 | N/A |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |

| | | | | | |
|--|---------------------|----------------|--|----------------|-----|
| UHF - High Power, Side Mount, basic slot antenna, 517 kW input, directional,, horizontally polarized | \$167,140.00 | \$167,140.00 | see Estimated Cost Justification WEPH-210- Primary Antenna - TFU- 18DSC-R C250 - H- POL v0 | \$167,140.00 | N/A |
| Sub-total | \$205,430.00 | \$188,242.86 | N/A | \$183,242.85 | N/A |
| Total for all systems | \$1,589,157.00 | \$1,686,858.66 | N/A | \$1,263,507.04 | N/A |

Components

| Actual Information | | |
|--|-------------------------------|--|
| Description | File Name | |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | Component Description: | WEPH-280-Interim Antenna Kathrein 750 10402 HPol |
| | Amount: | \$2,448.00 |
| | Component Description: | UHF - Low power side mount interim |
| | Amount: | \$7,254.85 |

| | |
|---|--|
| <p>Sweep test of existing antenna</p> | <p>Component Description: WEPH-210-Primary Antenna - Sweep Test</p> <p>Amount: \$4,433.27</p> <p>Component Description: WEPH-510-Project Management</p> <p>Amount: \$639.15</p> <p>Component Description: Sweep - repack</p> <p>Amount: \$1,327.58</p> |
| <p>Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)</p> | <p>Information not provided.</p> |

UHF - High Power, Side Mount, basic slot antenna, 517 kW input, directional,, horizontally polarized

Component Description: WEPH-210-
Primary Antenna -
TFU-18DSC-R
C250 - H-POL
Amount: \$306.00

Component Description: PERMANENT
ANTENNA
INSTALLATION
Amount: \$2,754.00

Component Description: UHF high power
side mount antenna
Amount: \$34,035.89

Component Description: UHF - HIGH
POWER SIDE
MOUNT
Amount: \$16,386.24

Component Description: UHF - HIGH
POWER SIDE
MOUNT
Amount: \$113,657.87

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 |
|--|-----------------------------|---------------------|---|---------------------|---------------------------|
| Interim Transmission Line | \$5,610.00 | \$30,538.72 | | \$30,538.72 | |
| Flexible Air Transmission Line - dielectric, 1 5 /8" | \$5,610.00 | \$30,538.72 | Per Estimated Cost Justification WEPH-380-Interim Transmission Line v0, Please see Quotes DTVPros Quote JEHQ1488; PO 18209; DTVPros Quote JEHQ1504; and Purchase Order 18209-A .Proposal 01191808T (Coast to Coast 2053 and 2062) | \$30,538.72 | x |
| Primary Transmission Line | \$272,700.00 | \$263,779.18 | | \$263,779.16 | |

| | | | | | |
|---|----------------|----------------|---|----------------|-----|
| Rigid Transmission Line - copper, 6 1/8" | \$272,700.00 | \$263,779.18 | see Estimated Cost Justification WEPH-310- Primary Transmission Line - 6 1_8 v0 | \$263,779.16 | N/A |
| Sub-total | \$278,310.00 | \$294,317.90 | N/A | \$294,317.88 | N/A |
| Total for all systems | \$1,589,157.00 | \$1,686,858.66 | N/A | \$1,263,507.04 | N/A |

Components

| Actual Information | |
|--------------------|-----------|
| Description | File Name |

Flexible Air Transmission
Line - dielectric, 1 5/8"

Component Description: Interim
Transmission line
work
Amount: \$10,969.68

Component Description: WEPH-310-Interim
Transmission Line
Amount: \$7,443.35

Component Description: HJ7-50A 1-5/8" air-
dielectric coaxial
cable, per ft.
Amount: \$5,446.31

Component Description: Interim
Transmission line
Amount: \$6,300.00

Component Description: R0018683505
CONN 4-50
ADPTR MYAT X
DIELECTRIC "QS
12-5-18, Shipping
Charges -
Overnight
Amount: \$379.38

Rigid Transmission Line -
copper, 6 1/8"

Component Description: WEPH-310-
Primary
Transmission Line
- 6 1/8"
Amount: \$306.00

Component Description: WEPH-310-
Primary
Transmission Line
- 6 1/8"
Amount: \$101,403.07

Component Description: WEPH-310-
Primary
Transmission Line
- 6 1/8"
Amount: \$124,756.96

Component Description: Rigid transmission
line
Amount: \$37,313.13

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 GTOWER | \$210,500.00 | \$239,773.07 | | \$239,773.07 | |
| Tall Tower (greater than 500') | \$210,500.00 | \$239,773.07 | Estimated Cost Justification WEPH-410-Primary Tower - Tower Equipment and Rigging Costs - Tall Tower >500' v2 | \$239,773.07 | x |
| Sub-total | \$210,500.00 | \$239,773.07 | N/A | \$239,773.07 | N/A |
| Total for all systems | \$1,589,157.00 | \$1,686,858.66 | N/A | \$1,263,507.04 | N/A |

Components

| Actual Information | |
|--------------------------------|--|
| Description | File Name |
| Tall Tower (greater than 500') | Component Description: REMOVE AUX ANTENNA |
| | Amount: \$918.00 |
| | Component Description: Tower Service |
| | Amount: \$16,337.00 |

Component Description: WEPH-410-
Primary Tower -
Tower Equipment
and Rigging Costs
- Tall Tower over
500'
Amount: \$18,055.07

Component Description: Tower Service-
MS
Amount: \$35,000.00

Component Description: Customer Deposit
for Repack Side
mount TV antenna
system
replacement
services.
Amount: \$58,990.00

Component Description: Weather Delay
Amount: \$5,580.00

Component Description: Tower Service-
MS
Amount: \$50,000.00

Component Description: WEPH-410-
Primary Tower -
Tower Equipment
and Rigging Costs
- Tall Tower over
500'
Amount: \$18,055.07

Component Description: Tower Service-
MS
Amount: \$2,620.00

Component Description:

"Completion of the
WEPH TV Side
Mount Antenna
System
Replacement
Services, as
agreed in or
proposal
#06071806T, and
your PO #18041"

Amount:

\$52,273.00

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 | \$149,272.00 | \$152,851.00 | | \$64,400.60 | |
| Attorney Fees - Other Matters | <i>\$1,226.00</i> | \$1,226.00 | Please see Estimated Cost Justification WEPH-550-Attorney - Other Matters v0 | \$1,226.00 | N/A |
| Tower Mapping | <i>\$7,900.00</i> | \$7,900.00 | Invoices received | \$7,900.00 | N/A |
| Structural Analysis | <i>\$9,000.00</i> | \$9,000.00 | N/A | \$9,000.00 | N/A |
| Additional Field Engineering Service, 2 Days | <i>\$4,000.00</i> | \$4,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$3,680.00 | \$3,500.00 | N/A | \$297.00 | N/A |
| Project management of the transition | \$99,066.00 | \$104,475.00 | Please see Widely Strategic Support Quote, and DTVPros Quote 1240-03 | \$39,664.10 | N/A |

| | | | | | |
|--|------------|------------|-----|------------|-----|
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$548.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$1,187.50 | 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 |
| 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 | \$750.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | \$683.00 | N/A |

| | | | | | |
|---|----------------|----------------|-----|----------------|-----|
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | N/A | \$1,145.00 | N/A |
| Sub-total | \$149,272.00 | \$152,851.00 | N/A | \$64,400.60 | N/A |
| Total for all systems | \$1,589,157.00 | \$1,686,858.66 | N/A | \$1,263,507.04 | N/A |

Components

| Actual Information | |
|-------------------------------|--|
| Description | File Name |
| Attorney Fees - Other Matters | <p>Component Description: Memo to C. Mavros re required pre-transition notices for WEPH; timing.</p> <p>Amount: \$162.00</p> |
| | <p>Component Description: Legal services</p> <p>Amount: \$78.00</p> |
| | <p>Component Description: Legal services</p> <p>Amount: \$81.00</p> |
| | <p>Component Description: Legal services</p> <p>Amount: \$567.00</p> |
| | <p>Component Description: Review/respond to memo from C. Mavros</p> <p>Amount: \$338.00</p> |
| | |

| | |
|--|--|
| Tower Mapping | <p>Component Description: Tower Mapping Amount: \$3,950.00</p> <p>Component Description: Tower Mapping Amount: \$3,950.00</p> |
| Structural Analysis | <p>Component Description: Engineering Evaluation, Corrosion Risk Analysis, Amount: \$4,500.00</p> <p>Component Description: Engineering Evaluation, Corrosion Risk Analysis, Tower Mapping Amount: \$4,500.00</p> |
| Additional Field Engineering Service, 2 Days | Information not provided. |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | <p>Component Description: WEPH-550-Attorney - Prepare and File Special Temporary Authorization Amount: \$81.00</p> <p>Component Description: WEPH-550-Attorney - Prepare and File Special Temporary Authorization Amount: \$216.00</p> |
| Project management of the transition | |

Component Description: Project Management
Amount: \$3,321.10

Component Description: WEPH MVPD Notification
Amount: \$1,500.00

Component Description: Project Management
Amount: \$1,609.35

Component Description: Project Management
Amount: \$2,034.65

Component Description: Project Management
Amount: \$1,023.10

Component Description: Project Management
Amount: \$1,632.05

Component Description: WEPH Medical Notification
Amount: \$2,130.49

Component Description: Project Management
Amount: \$2,436.95

Component Description: Project Management
Amount: \$1,750.70

Component Description: Project
Management
Amount: \$3,360.35

Component Description: Project
Management
Amount: \$1,336.60

Component Description: Project
Management
Amount: \$3,146.30

Component Description: Project
Management
Amount: \$5,192.90

Component Description: WEPH-210-Primary
Antenna - Sweep
Test
Amount: \$1,050.00

Component Description: Project
Management
Amount: \$3,584.10

Component Description: Project
Management
Amount: \$1,832.70

Component Description: Project
Management
Amount: \$2,374.65

Component Description: Project
Management
Amount: \$2,473.00

| | |
|---|--|
| | <p>Component Description: Project Management</p> <p>Amount: \$1,505.60</p> |
| <p>Prepare and or review reimbursement form</p> | <p>Component Description: WEPH-590-Prepare and Review Reimbursement Form</p> <p>Amount: \$468.00</p> <p>Component Description: Draft Form 399 on LMS.</p> <p>Amount: \$80.00</p> |
| <p>Perform engineering study for new channel assignment and antenna development</p> | <p>Component Description: Engineering study work for new channel assignment and antenna development.</p> <p>Amount: \$312.50</p> <p>Component Description: "1. Engineering study work for new channel assignment and antenna development. 2. Preparation of the engineering portion of FCC Form 2100."</p> <p>Amount: \$875.00</p> |

| | |
|---|--|
| <p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p> | <p>Component Description: WEPH-530-RF Eng - Prepare Engineering Section Construction Permit Application (Main)</p> <p>Amount: \$2,000.00</p> |
| <p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p> | <p>Information not provided.</p> |
| <p>Prepare request for Special Temporary Authorization</p> | <p>Component Description: Professional Services</p> <p>Amount: \$750.00</p> |

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application

Component Description: Load and prepare initial draft Form 2100 for repacked channel construction permit application.

Amount: \$80.00

Component Description: WEPH-550- Attorney - Prepare and File Construction Permit (Main)

Amount: \$80.00

Component Description: WEPH-550- Attorney - Prepare and File Construction Permit (Main)

Amount: \$133.00

Component Description: Legal services

Amount: \$390.00

Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application

Component Description: WEPH-550- Attorney - Prepare and File License to Cover (Main)

Amount: \$405.00

Component Description: WEPH-550- Attorney - Prepare and File License to Cover (Main)

Amount: \$740.00

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 |
|--|-----------------------------|--------------------|------------------------------|--------------------|---------------------------|
| Other Expenses | \$49,645.00 | \$49,090.00 | | \$23,182.74 | |
| MVPD Notification of Channel Change | <i>\$1,500.00</i> | \$1,500.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$400.00</i> | \$400.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$30,000.00</i> | \$30,000.00 | N/A | \$14,056.75 | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | N/A | \$3,630.49 | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | \$190.00 | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$6,000.00</i> | \$6,000.00 | N/A | \$5,305.50 | N/A |
| Sub-total | \$49,645.00 | \$49,090.00 | N/A | \$23,182.74 | N/A |
| Total for all systems | \$1,589,157.00 | \$1,686,858.66 | N/A | \$1,263,507.04 | N/A |

Components

| Actual Information Description | File Name |
|---|--|
| MVPD Notification of Channel Change | <p>Component Description: WEPH-610-MVPD Notification</p> <p>Amount: \$574.00</p> |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Equipment Delivery and Handling Charges | <p>Component Description: LABOR-EQUIPMENT HANDLING AND RELOCATION 8-15-2018 THROUGH 8-31-2018</p> <p>Amount: \$975.00</p> <p>Component Description: Equipment Delivery and Handling</p> <p>Amount: \$9,736.75</p> <p>Component Description: LABOR 9-01-2018 THROUGH 9-14-2019</p> <p>Amount: \$900.00</p> <p>Component Description: LABOR 9-16-2018 through 9-30-2018</p> <p>Amount: \$1,065.00</p> <p>Component Description: LABOR 12-02 through 12-07-2019</p> <p>Amount: \$540.00</p> |

| | |
|---|---|
| | <p>Component Description: WEPH-610-Equipment Delivery and Handling Charges</p> <p>Amount: \$9,736.75</p> <p>Component Description: LABOR 8-03-2018 THROUGH 8-15-2018, EQUIPMENT DELIVERY AND HANDLING</p> <p>Amount: \$840.00</p> |
| DTV Medical Facility Notification | <p>Component Description: WEPH Medical Notification</p> <p>Amount: \$2,130.49</p> <p>Component Description: WEPH MVPD Notification</p> <p>Amount: \$1,500.00</p> |
| FCC Filing Fees - Special Temporary Authorization request | <p>Component Description: WEPH-610-FCC Filing Fee - Special Temporary Authorization</p> <p>Amount: \$190.00</p> |

Disposal Costs (for
equipment and other waste,
net of any salvage value)

Component Description: Disposal Costs
Amount: \$4,387.50

Component Description: WEPH-610-
Disposal Costs
Amount: \$918.00

Component Description: WEPH-610-
Disposal Costs
Amount: \$4,387.50

Cost Information **Grand Total**

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|------------------------------|------------------------------------|-----------------------|--------------------|
| Total for all systems | \$1,589,157.00 | \$1,686,858.66 | \$1,263,507.04 |

Reimbursement Status

| Question | Response |
|--|-----------------|
| The facility has ceased operating on its pre-auction channel. | Yes |
| Construction of final facilities or all necessary modifications are complete. | Yes |
| 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 |
|---------------|---|---|----------|
| | <p>Submission of Estimated Expenses Statements</p> | <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"> 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. 2. 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).
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.

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.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**CHRIS L
MAVROS**
*D.E.,
Christian
Television
Network*

10/30/2019

| Certification | Section | Question | Response |
|---------------|--|--|----------|
| | <p>Submission of Actual Cost Documentation Statements</p> | <p>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).</p> | |
| | | <ol style="list-style-type: none"> 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. 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.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**CHRIS L
MAVROS**
*D.E.,
Christian
Television
Network*

10/30/2019

| Certification | Section | Question | Response |
|---------------|---|--|----------|
| | <p>Submission of Final Allocation or Accounting Information Statements</p> | <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"> 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. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. | |

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
4. 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.
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
6. 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.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**CHRIS L
MAVROS**
*D.E.,
Christian
Television
Network*

10/30/2019

Attachments