



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **43170** | Service: **DTV** | Call **WMAE-TV** | Channel:  
ID: | Sign:  
**9 (High VHF)** | File **0000026661**  
Number:  
FRN: **0001739002** | Date **12/10**  
Submitted: **/2019**

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

| Applicant  | Address  | Phone                       | Email                            | Applicant Type       |
|--|--|-----------------------------|----------------------------------|----------------------|
| <b>MISSISSIPPI<br/>AUTHORITY FOR<br/>EDUCATIONAL TV</b>              | Greg Wells<br>3825<br>RIDGEWOOD<br>ROAD<br>JACKSON,<br>MS 39211<br>United States | +1<br>(601)<br>432-<br>6197 | Greg.<br>Wells@mpbonline.<br>org | Government<br>Entity |
| Doing Business As:<br>MISSISSIPPI<br>AUTHORITY FOR<br>EDUCATIONAL TV |  |                             |                                  |                      |

## 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                        |
|---|--|----------------------|------------------------------|
| <b>Robert Gehman</b><br><i>ConsultingEngineer</i><br><i>Kessler and Gehman</i><br><i>Associates, Inc.</i> | Robert Gehman<br>507 NW 60<br>Street<br>Suite D<br>Gainesville, FL<br>32607<br>United States | +1 (352)<br>332-3157 | bob@kesslerandgehman.<br>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. | No   |
| Briefly describe transition plan   | Replace transmitter using existing antenna and line. |

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

| Section   | Question   | Response             |
|---|--|----------------------|
| <b>Existing Transmitter Description</b>           | Type of change   | Purchase<br>New      |
|   | Use  | Primary<br>(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  | PLATINUM<br>PTCD10P1 |
|   | Year   | 2007                 |
|   | Type   | Solid State          |
|   | Solid State Cooling  | Air Cooled           |
|   | Solid State Power Capacity                                 | 2.2 kW               |

**Primary  
Transmitter**

**New Transmitter Costs**

| Section                | Question                                  | Response  |
|------------------------|---|---|
| <b>New Transmitter</b> | Use                                       | Primary (Main)  |
|                        | Change Type                               | Purchase New  |
|                        | Is this a request for upgraded equipment? | No  |
|                        | Manufacturer                              |   |
|                        | Model                                     | TBD   |
|                        | Transmitter Type                          | Solid State   |
|                        | Solid State Cooling                       | Air Cooled  |
|                        | Solid State Power capacity                | 2.2 kW  |
|                        | Justification for New Transmitter         | The manufacturer of the existing transmitter advises that the transmitter cannot be re-tuned to the assigned channel. See attachment. |

**Primary  
Transmitter**

**Other Transmitter Costs**

| Section                   | Question                              | Response |
|---------------------------|---------------------------------------|----------|
| <b>Electrical Service</b> | Service Entrance (3 phases 800A 208V) | No       |
|                           | Switchgear (industrial 800 amp)       | Yes      |
|                           | Transformer (480V)                    | Yes      |
|                           | Power                                 | 150 kVA  |
|                           | Rigid Conduit and Wiring              | Yes      |

|  |   |            |
|--|---|------------|
|  | Size  | 3 inches   |
|  | Length  | 100.0 feet |
|  | Other Electrical Service  | No         |
|  | Description   | N/A        |
| <b>HVAC Service</b>  | Does the replacement transmitter require HVAC Service?  | No         |
|  | Type  | N/A        |
|  | Size  | N/A        |
|  | 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**

| <b>Name</b>                          | <b>Description</b>   |
|--------------------------------------|--|
| <b>Additional Interior RF System</b> | Interior RF System Existing Transmitter to Interim Transmission line |
| <b>Standby Exciter and Switch</b>    | Standby Exciter with Automatic Change Over Switch                    |

**Antennas**

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

**Primary Antenna****Existing Antenna Information**

| Section                                       | Question   | Response        |
|---|--|-----------------|
| <b>Existing Antenna Description</b>           | Type of change   | Retune Existing |
|   | 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?                             | No              |
|   | 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   | Other           |
|   | 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              | Batwing    |
| ERP: (Effective Radiated Power) | 31.0 kW    |
| Manufacturer                    | Dielectric |
| Model                           | TAB-12H    |
| Year                            | 1990       |

**Primary Antenna**

**Adjustment to Existing Antenna**

| Section                               | Question                                      | Response |
|---------------------------------------|---|----------|
| <b>Sweep Test of Existing Antenna</b> | Do you need a sweep test of existing antenna? | Yes      |

**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                                    |          |

**Primary Antenna**

**Other Antenna Cost Not Listed**

| Name           | Description   |
|----------------|---|
| <b>Rigging</b> | Rigging to replace elbow complex which was found to be mismatched |

| <b>Transmission Line</b> | <b>Section</b>                            | <b>Question</b> | <b>Response</b>                                 |
|--------------------------|---|-----------------|---|
|                          | <b>Transmission Line Related Expenses</b> |                 | Do you have transmission line related expenses? |

| <b>Tower Equipment And Rigging Costs</b> | <b>Section</b>                                  | <b>Question</b> | <b>Response</b>                                       |
|--|---|-----------------|---|
|  | <b>Tower Equipment or Rigging Costs Changes</b> |                 | Do you have tower equipment or rigging costs changes? |

| <b>Outside Professional Services Costs</b>        | <b>Section</b>                             | <b>Question</b>  | <b>Response</b>                                     |   |
|---|--|--|---|---|
|   | <b>Outside Project Management Services</b> |  | Do you require outside project management services? | Yes   |
|   |  |  | Number of Hours                                     | 204   |
|   |  |  | Explanation   | Fewer Project Management "PM" tasks are required & Other Engineering Services "OES" are required, therefore the PM total has been reduced to 20 hrs (\$3,000 at \$150/hr), & a new OES category has been created & funded with the money removed from PM. |
| <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                         | No  |
|   | Quantity  | N/A |
|   | 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                         | No  |
|   | Quantity  | N/A |
|   | 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 | Yes   |
| <b>RF Field Engineering Services</b> | Comprehensive coverage verification via field study  | No  |
|                                      | RF exposure measurements   | No  |
|                                      | Additional Field Engineering Service   | Yes   |
|                                      | Number of Days   | 13  |
|                                      | Justification  | It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services. |

**Outside Professional Services Costs**

**Other Professional Services Expenses Not Listed**

| Name                 | Description                                    |
|----------------------|--|
| Other Legal Services | Other Legal Services related to the DTV Repack |

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**Other Engineering Services**

Fewer Project Management "PM" tasks are required & Other Engineering Services "OES" are required, therefore the PM total has been reduced to 20 hrs (\$3,000 at \$150 /hr), & a new OES category has been created & funded with the money removed from PM.

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**Other Expenses**

| <b>Section</b>                      | <b>Question</b>  | <b>Response</b> |
|-------------------------------------|--|-----------------|
| <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   | No              |
|                                     | Non-zoning permits   | No              |
|                                     | BLM or NFS Coordination  | No              |
|                                     | FCC Construction Permit Minor Change   | No              |
|                                     | FCC License to Cover Application   | No              |
|                                     | FCC Special Temporary Authority Application  | No              |
| <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             |

**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 |
|--|-----------------------------|---------------------|------------------------------|--------------------|---------------------------|
| <b>Primary Transmitter TBD</b>                             | <b>\$321,450.00</b>         | <b>\$310,500.00</b> |                              | <b>\$0.00</b>      |                           |
| Standby Exciter and Switch                                 | <i>\$25,000.00</i>          | \$25,000.00         | N/A                          | N/A                | N/A                       |
| Additional Interior RF System                              | <i>\$75,000.00</i>          | \$75,000.00         | N/A                          | N/A                | N/A                       |
| 3" Rigid Conduit and Wiring (Cost per foot)                | \$5,200.00                  | \$4,900.00          | N/A                          | N/A                | N/A                       |
| High VHF - Air Cooled Solid State Transmitter 1.1 . 4.4 kW | \$152,500.00                | \$145,000.00        | N/A                          | N/A                | N/A                       |
| Switchgear - industrial 800 amp                            | \$38,200.00                 | \$36,300.00         | N/A                          | N/A                | N/A                       |
| Transformer 3 phase/480v - 150 KVA                         | \$25,550.00                 | \$24,300.00         | N/A                          | N/A                | N/A                       |
| <b>Sub-total</b>   | <b>\$321,450.00</b>         | <b>\$310,500.00</b> | <b>N/A</b>                   | <b>\$0.00</b>      | <b>N/A</b>                |
| <b>Total for all systems</b>                               | <b>\$552,310.96</b>         | <b>\$505,568.96</b> | <b>N/A</b>                   | <b>\$45,122.52</b> | <b>N/A</b>                |

**Components**

Information not provided.

**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>Primary Antenna TAB-12H</b>   | <b>\$34,330.00</b>          | <b>\$33,800.00</b>  |                              | <b>\$0.00</b>      |                           |
| Rigging  | <i>\$20,000.00</i>          | \$20,000.00         | N/A                          | N/A                | N/A                       |
| Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed) | \$7,600.00                  | \$7,400.00          | N/A                          | N/A                | N/A                       |
| Sweep test of existing antenna   | \$6,730.00                  | \$6,400.00          | N/A                          | N/A                | N/A                       |
| <b>Sub-total</b>   | <b>\$34,330.00</b>          | <b>\$33,800.00</b>  | <b>N/A</b>                   | <b>\$0.00</b>      | <b>N/A</b>                |
| <b>Total for all systems</b>   | <b>\$552,310.96</b>         | <b>\$505,568.96</b> | <b>N/A</b>                   | <b>\$45,122.52</b> | <b>N/A</b>                |

**Components**

Information not provided.

**Cost Information** **Transmission Line**  
Information not provided.

**Cost Information** **Tower Equipment and Rigging Costs**  
Information not provided.

**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 | \$162,980.96                | \$128,268.96   |                              | \$45,122.52 |                           |
| Other Legal Services          | <i>\$10,000.00</i>          | \$10,000.00    | N/A                          | \$1,173.50  | N/A                       |



|  |             |            |   |            |     |
|--|-------------|------------|---|------------|-----|
| Project management of the transition   | \$32,232.00 | \$3,000.00 | Fewer Project Management "PM" tasks are required & Other Engineering Services "OES" are required, therefore the PM total has been reduced to 20 hrs (\$3,000 at \$150/hr), & a new OES category has been created & funded with the money removed from PM. | \$2,100.00 | N/A |
| Prepare and or review reimbursement form   | \$2,630.00  | \$2,500.00 | N/A   | \$2,500.00 | 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  | \$2,750.00 | N/A   | \$2,750.00 | 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 |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00         | \$5,000.00   | N/A  | \$49.50     | 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 |
| Additional Field Engineering Service, 13 Days  | <i>\$26,000.00</i> | \$26,000.00  | N/A  | \$4,405.68  | N/A |
| Other Engineering Services   | <i>\$69,768.96</i> | \$69,768.96  | KGA-MPB Contract GS# 529-004 + \$425 KGA invoice 139-312 | \$30,143.84 | N/A |
| <b>Sub-total</b>   | \$162,980.96       | \$128,268.96 | N/A  | \$45,122.52 | N/A |
| <b>Total for all systems</b>   | \$552,310.96       | \$505,568.96 | N/A  | \$45,122.52 | N/A |

## Components

| Actual Information<br>Description | File Name  |
|-----------------------------------|--|
| Other Legal Services              | <b>Component Description:</b> GSB 710996<br>v190605pmv1<br><b>Amount:</b> \$46.50  |
|                                   | <b>Component Description:</b> WMAE GSB inv<br>#667584 DTV<br>Repack legal<br>services<br>UL20180823jgv1<br><b>Amount:</b> \$150.00 |
|                                   | <b>Component Description:</b> GSB 664826<br>v190516pmv1<br><b>Amount:</b> \$90.00  |
|                                   | <b>Component Description:</b> GSB 667584<br>v190516pmv1<br><b>Amount:</b> \$150.00   |
|                                   | <b>Component Description:</b> WMAE GSB inv<br>#664826 DTV<br>Repack legal<br>services<br>UL20180823jgv1<br><b>Amount:</b> \$90.00  |
|                                   | <b>Component Description:</b> WMAE GSB inv<br>#662020 DTV<br>Repack legal<br>services<br>UL20180823jgv1<br><b>Amount:</b> \$600.00 |

**Component Description:** WMAE GSB inv  
#670598 DTV  
Repack legal  
services  
UL20180823jgv1  
**Amount:** \$120.00

**Component Description:** GSB 662020  
v190515pmv1  
**Amount:** \$600.00

**Component Description:** GSB 670598  
v190516pmv1  
**Amount:** \$120.00

**Component Description:** GMP 31016  
v190926jgv2  
**Amount:** \$35.00

**Component Description:** GSB 710370  
v190605pmv1  
**Amount:** \$46.50

**Component Description:** GMP 31400  
v191113jgv1  
**Amount:** \$85.50

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Project management of the transition

**Component Description:** KGA 139-333  
v191011jgv1  
**Amount:** \$300.00

**Component Description:** KGA 139-318  
v190715jgv1  
**Amount:** \$300.00

**Component Description:** WMAE KGA inv  
#139-296 2018Q1  
387  
UL20180810jgv1  
**Amount:** \$150.00

**Component Description:** KGA 139-306  
v190716jgv1  
**Amount:** \$300.00

**Component Description:** WMAE KGA inv  
#139-290 2017Q4  
387  
UL20180809jgv1  
**Amount:** \$150.00

**Component Description:** KGA 193-303  
v190716jgv1  
**Amount:** \$300.00

**Component Description:** KGA 139-303  
v190703jgv1  
**Amount:** \$300.00

**Component Description:** WMAE KGA inv  
#139-287 2017Q3  
387  
UL20180810jgv1  
**Amount:** \$300.00

|   |  |
|---|--|
| <p>Prepare and or review reimbursement form</p>   | <p><b>Component Description:</b> WMAE KGA inv #139-284 Prepare and or review 399 UL20180813jgv1</p> <p><b>Amount:</b> \$2,500.00</p>   |
| <p>Address transition timing and coordination issues w/ other stations and wireless</p>       | <p>Information not provided.</p>   |
| <p>Perform engineering study for new channel assignment and antenna development</p>           | <p><b>Component Description:</b> WMAE KGA inv #139-283 New channel assignment UL20180809jgv1</p> <p><b>Amount:</b> \$2,750.00</p>  |
| <p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>   | <p><b>Component Description:</b> WMAE KGA inv #139-283 CP App UL20180809jgv1</p> <p><b>Amount:</b> \$2,000.00</p>  |
| <p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>      | <p>Information not provided.</p>   |
| <p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p> | <p><b>Component Description:</b> WMAE GSB inv #662020 DTV Repack legal services CP App UL20180823jgv1</p> <p><b>Amount:</b> \$49.50</p><br><p><b>Component Description:</b> GSB 662020 v190515pmv1</p> <p><b>Amount:</b> \$49.50</p> |

|   |   |                               |   |                |                   |
|---|---|-------------------------------|---|----------------|-------------------|
| <p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p> | <p>Information not provided.</p>  |                               |   |                |                   |
| <p>Additional Field Engineering Service, 13 Days</p>                                      | <table> <tr> <td data-bbox="686 369 1013 403"><b>Component Description:</b></td> <td data-bbox="1013 369 1428 604"> <p>KGA inv #139-285<br/>On site survey split evenly between WMAB WMAE WMAW<br/>UL20180814jgv1</p> </td> </tr> <tr> <td data-bbox="686 604 1013 638"><b>Amount:</b></td> <td data-bbox="1013 604 1428 638"> <p>\$4,405.68</p> </td> </tr> </table> | <b>Component Description:</b> | <p>KGA inv #139-285<br/>On site survey split evenly between WMAB WMAE WMAW<br/>UL20180814jgv1</p> | <b>Amount:</b> | <p>\$4,405.68</p> |
| <b>Component Description:</b>   | <p>KGA inv #139-285<br/>On site survey split evenly between WMAB WMAE WMAW<br/>UL20180814jgv1</p>   |                               |   |                |                   |
| <b>Amount:</b>  | <p>\$4,405.68</p>   |                               |   |                |                   |

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Other Engineering Services

**Component Description:** KGA 139-321  
v190909jgv1  
**Amount:** \$4,953.14

**Component Description:** KGA 139-324  
v190909jgv1  
**Amount:** \$4,953.14

**Component Description:** KGA 139-312  
v190605pmv1  
**Amount:** \$425.00

**Component Description:** KGA 139-338  
v191112jgv1  
**Amount:** \$4,953.14

**Component Description:** KGA 139-338  
v191210jgv1  
**Amount:** \$4,953.14

**Component Description:** KGA 139-315  
v190625jgv1  
**Amount:** \$4,953.14

**Component Description:** KGA 139-331  
v191009jgv1  
**Amount:** \$4,953.14

**Component Description:** KGA 139-327  
v190909jgv1  
**Amount:** \$4,953.14

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**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>\$33,550.00</b>          | <b>\$33,000.00</b>  |                              | <b>\$0.00</b>      |                           |
| MVPD Notification of Channel Change                                      | <i>\$2,000.00</i>           | \$2,000.00          | N/A                          | N/A                | N/A                       |
| Equipment Storage  | <i>\$5,000.00</i>           | \$5,000.00          | N/A                          | N/A                | N/A                       |
| DTV Medical Facility Notification  | \$11,550.00                 | \$11,000.00         | N/A                          | N/A                | N/A                       |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$5,000.00</i>           | \$5,000.00          | 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                       |
| Develop and air announcement of upcoming channel change                  | <i>\$0.00</i>               | \$0.00              | N/A                          | N/A                | N/A                       |
| <b>Sub-total</b>   | <b>\$33,550.00</b>          | <b>\$33,000.00</b>  | N/A                          | <b>\$0.00</b>      | N/A                       |
| <b>Total for all systems</b>   | <b>\$552,310.96</b>         | <b>\$505,568.96</b> | N/A                          | <b>\$45,122.52</b> | N/A                       |

**Components**

Information not provided.

**Cost Information** **Grand Total**

|                              | <b>Predetermined Cost Estimate</b> | <b>Estimated Cost</b> | <b>Actual Cost</b> |
|------------------------------|------------------------------------|-----------------------|--------------------|
| <b>Total for all systems</b> | \$552,310.96                       | \$505,568.96          | \$45,122.52        |

**Reimbursement Status**

| <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 |
|---------------|--|--|----------|
|               | <p><b>Submission of Actual Cost Documentation Statements</b></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"> <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>Jeffrey C Gehman</b><br/><i>Engineering Associate</i></p> <p>12/10/2019</p> |

**Attachments**