

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Channel: 33 (UHF) 21729 Service: DTV Call WPXL-TV Facility Sign:

0000028611

Number:

ID:

File

FRN: 0001808468 Date 04/30

> Submitted: /2020

#### **Applicant** Information

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

Applicant	Address	Phone	Email	Applicant Type
ION MEDIA NEW ORLEANS LICENSE, INC. Doing Business As: ION MEDIA NEW ORLEANS LICENSE, INC.	Bianca Frye 601 Clearwater Park Road West Palm Beach, FL 33401 United States	+1 (561) 682- 4110	BiancaFrye@ionmedia.com	Corporation

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### **Preparer Contact** Information

#### **Preparer Contact Name and Information**

Applicant	Address	Phone	Email
The Prenarer is same as the reimbursement contact			

# 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	Relocate from ASR #1020780 to ASR#1028290. Replace non-retunable transmitter and RF components for post repack channel 33. Utilized existing broadband antenna and transmission line at new location.

# **Transmitters**

rs	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	
Manufacturer and Type	Model	Millennium
	Year	2004
	Туре	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	THU9-20 EVO
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	31 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)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	No
	Size	N/A

	Length	N/A
	Other Electrical Service	Yes
	Description	Additional Electrical Work Needed for Transmitter Installation
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Cooling Only
	Size	5 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

# Primary Transmitter

## **Other Transmitter Cost Not Listed**

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

#### **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	Leased
	Owner	American Tower
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Top Mount
	Antenna position in stack	Тор
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	2
	Number of Panels	10
	Design power capacity in use	50.0 %
	Lower Limit	500.00 MHz
	Upper Limit	698.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1000.0 kW

Manufacturer	
Model	TUD-C5SP- 10/50U-2-B
Year	2004

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

Facility ID	Call Sign
13938	WUPL

# 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	Leased
	Owner	American Tower
	Is antenna shared?	Yes
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Types	Mounting	Top Mount
	Antenna position in stack	Тор
	Polarization	Horizontal
	Туре	Broadband Slot
	Number of Stations Supported	2
	Number of Panels/Bays	10
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Design power capacity in use	50.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	575.0 kW
	Manufacturer	
	Model	TUD-C5SP-10 /50U-2-B

Year	2017
Justification for New Antenna	Final design of equip isn't complete, ION included estimates based on current understanding of design. 2 repack stations share equip, ION responsible for 50% of the costs assoc with shared equip. See AT and Shared Equipment Exhibit for more information.

# Primary Antenna

#### **Other Antenna Costs**

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Туре	New
	Number of channels supported	2
	Frequencies of channels supported	RF channel
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	No
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband

	Feed Line Size	7 3/16 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

# Enter a list of RF channel numbers.

RF Channel Number	
33	
17	

# Primary Antenna

# **Other Antenna Cost Not Listed**

Transmission <sup>Seffien</sup>	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

#### **Existing Transmission Line**

# **Primary**

Transmission Line Question Response **Existing Transmission** Type of change Purchase **Line Description** New Use Primary (Main) Description of Use N/A Ownership Leased Owner American Tower N/A Site Is the existing transmission line shared with Yes another station or stations? Is Transmission Line in operating condition? Yes **Existing Transmission** Manufacturer Line Manufacturer and Rigid Type **Type** 7 3/16 Diameter inches Other Diameter N/A Segment Length Broadband Other Segment Length N/A Number of parallel runs 1 1085 feet Length

per run

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

Facility ID	Call Sign
13938	WUPL

# Primary Transmission Line

## **New Transmission Line**

New Transmission Line	
Costs	

Question	Response
Use	Primary (Main)
Description of Use	N/A
Change Type	Purchase New
Is this a request for upgraded equipment?	No
Туре	Rigid
Diameter	7 3/16 inches
Other Diameter	N/A
Segment Length	Broadband
Other Segment Length	N/A
Number of parallel runs	1
Length	1085 feet per run

Justification for New Transmission Line	Final design isn't complete, ION included estimates based on current design. 2 repack stations share equip, ION responsible for 50% of the costs assoc with shared equip. See Shared Equipment Exhibit and Transmission Line Exhibit for more information.

# Other Transmission Line Expenses Not Listed

# Primary Transmiss

sior	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	Type of change	Move Equipment
Description	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	Candelabra
	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?	Unknown
	Is tower compliant with Rev G?	No
Existing Tower	Do you have a tower registration number?	No
Structure Registration	ASR Number	
Coordinates (NAD83 (	Latitude (NAD83)	29° 55′ 13.1″ N-
North American Datum of 1983))	Longitude (NAD83)	090° 01' 28.5" W-
	Overall Structure Height	1033.78 feet
	Support Structure Height	936.67 feet
	Ground Elevation Above Mean Sea Level (AMSL)	0.00 feet
		1

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	SpectraSite Communications, LLC. through American Towers, LLC.
Date Constructed	04/01/1987

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

Call Sign	Service
WQUE-FM	FM
WHNO	DTV
WWNO	FM
WYLD-FM	FM
WUPL	DTV
WKBU	FM
WBSN-FM	FM
WEZB	FM
WLMG	FM
	WQUE-FM WHNO WWNO WYLD-FM WUPL WKBU WBSN-FM WEZB

#### Primary Tower

# **Tower Rigging Costs**

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

# Primary Tower

# Other Tower Expenses Not Listed

# Primary Tower

## **Add 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?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1028290
Coordinates (NAD83 ( North American Datum of	Latitude (NAD83)	29° 58' 58.0" N-
1983))	Longitude (NAD83)	089° 56' 58.0" W-
	Overall Structure Height	1049.20 feet
	Support Structure Height	986.86 feet
	Ground Elevation Above Mean Sea Level (AMSL)	0.00 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

Tower Owner	H.C. Jeffries Tower Company, Inc.
Date Constructed	11/01/1980

#### 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

# Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	180
	Explanation	Required by tower landlord
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No

	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	Yes
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	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
RF Field Engineering Services	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 Expenses Not Listed
Professional Services ©qstsided.

# 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	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	Yes
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD  Notification of a Channel Change?	Yes

Other Expenses Not Listed

**Expenses** Information not provided.

## **Transmitters**

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 THU9-20 EVO	\$1,072,178.11	\$895,432.42		\$890,199.76	
RF Interconnect	\$17,839.26	\$17,839.26	Please see attached Rohde and Schwarz Quote #190797.1 plus sales tax	\$17,839.26	N/A
Other Electrical Service: Additional Electrical Work Needed for Transmitter Installation	\$22,288.85	\$22,288.85	Additional electric work needed for transmitter. Please see attached Deubler Electric Quotes.	\$22,288.85	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$45,500.00	Please see attached Deubler Electric Quote WPXL New Orleans	\$45,500.00	N/A

UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$760,119.31	See attached Rohde & Schwarz Quote #SQ162255. 1. Inclusive of taxes (9.45%) = \$65,629.31	\$755,706.65	N/A
5 Ton system	\$20,250.00	\$21,685.00	Please see attached JC Services quote #334- 1 and WDG quote #DP19-101 for HVAC services.	\$20,865.00	N/A
Removal of Existing Equipment	\$28,000.00	\$28,000.00	Please see Skyline Quote #98921302	\$28,000.00	N/A
Sub-total	\$1,072,178.11	\$895,432.42	N/A	\$890,199.76	N/A
Total for all systems	\$2,795,083.11	\$2,049,763.42	N/A	\$898,442.75	N/A

# Components

Actual Information Description	File Name	
Description	i lie Ivallie	
RF Interconnect		
	<b>Component Description:</b>	Cost of equipment
		for RF
		interconnect.
		Supporting
		documentation is
		attached.
	Amount:	\$17,839.26

Other Electrical Service: Additional Electrical Work Needed for Transmitter Installation

Component Description: Cost of additional

electric work to install transmitter.

Supporting

documentation is attached. This invoice has been

paid.

**Amount:** \$15,641.27

Component Description: Cost of additional

electric work inside

transmitter building.
Supporting

documentation is attached. This invoice has been

paid.

**Amount:** \$5,350.95

Component Description: Cost to install

50KW heat exchanger.
Supporting

documentation is attached. This invoice has been

paid.

**Amount:** \$1,296.63

Transformer 3 phase/480v - 300 KVA

Component Description: 25% "Progress bill

#2" for electrical installation of transmitter.
Supporting

documentation is attached. Invoice has been paid

**Amount:** \$11,375.00

Component Description: 25% "Final

Progress bill" for

electrical installation of transmitter. Supporting

documentation is

attached.

**Amount:** \$11,375.00

Component Description: 50% "Progress bill

#1" for electrical installation of transmitter.
Supporting

documentation is attached. Invoice has been paid

**Amount:** \$22,750.00

UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW

**Component Description:** 3rd milestone

> payment (35%) for Rohde & Schwarz

transmitter. Supporting documentation attached. This invoice has been

paid.

\$266,041.76 Amount:

35% "Payment **Component Description:** 

> upon proof of performance" for transmitter and accessories. Supporting

documentation is

attached.

Amount: \$260,534.60

**Component Description:** \$1,000 deposit

payment for Rohde

& Schwarz transmitter. Supporting documentation attached. This invoice has been

paid.

Amount: \$1,094.50

**Component Description:** 2nd Milestone

> Payment (30%) for Rohde & Schwarz

transmitter. Supporting documentation attached.

\$228,035.79 Amount:

5 Ton system

Component Description: 65% "balance upon

completion" for HVAC duct installation. Supporting documentation is

attached. Invoice has been paid.

**Amount:** \$12,300.25

Component Description: Cost of

engineering design

for HVAC installation. Supporting

documentation is attached. Invoice has been paid. \$1,500.00

**Amount:** \$1,500.00

Component Description: 35% " deposit upon

approval" for HVAC duct installation. Supporting

documentation is attached. Invoice has been paid.

**Amount:** \$7,064.75

Component Description: 65% "balance upon

completion" for HVAC duct installation. Supporting

documentation is attached. Invoice has been paid.

**Amount:** \$12,300.25

Removal of Existing Equipment		
	Component Description:	Cost to remove old
		transmitter
		equipment.
		Explanation of
		variance and
		supporting
		documentation are

Amount:

attached.

\$28,000.00

#### **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
Primary Antenna TUD-C5SP- 10/50U-2-B	\$432,780.00	\$419,000.00		\$0.00	
Elbow complex, broadband, at antenna input, per 7 3/16. feedline (if needed)	\$16,850.00	\$10,000.00	N/A	N/A	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$80,000.00	See Shared Equipment Exhibit for more information.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$4,000.00	N/A	N/A	N/A
UHF - High Power Top Mount Two Station antenna horizontally polarized	\$325,000.00	\$325,000.00	See Shared Equipment Exhibit for more information.	N/A	N/A
Sub-total	\$432,780.00	\$419,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,795,083.11	\$2,049,763.42	N/A	\$898,442.75	N/A

## Components

#### **Transmission Line**

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

Description Primary Transmission Line	Predetermined Cost Estimate \$365,305.00	Estimated Cost \$218,966.00	Estimated Cost Justification	Actual Cost \$0.00	Actual Cost Justification
Sweep existing transmission line	\$4,000.00	\$4,000.00	N/A	N/A	N/A
Rigid Transmission Line - copper, 7 3 /16" broadband	\$361,305.00	\$214,966.00	Final design of equipment isn't complete. ION included estimates based on current understanding of design which includes using existing line for the interim antenna while post repack operations are constructed.	N/A	N/A
Sub-total	\$365,305.00	\$218,966.00	N/A	\$0.00	N/A
Total for all systems	\$2,795,083.11	\$2,049,763.42	N/A	\$898,442.75	N/A

## Components

# **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 Primary Tower TOWER	Predetermined Cost Estimate \$210,500.00	Estimated Cost \$0.00	Estimated Cost Justification	Actual Cost \$0.00	Actual Cost Justification
Tall Tower (greater than 500')	\$210,500.00	\$0.00	Any required tower work is being paid for by tower landlord.	N/A	N/A
Primary Tower GTOWER	\$421,000.00	\$250,000.00		\$0.00	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$250,000.00	See AT Exhibits for more information.	N/A	N/A
Sub-total	\$631,500.00	\$250,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,795,083.11	\$2,049,763.42	N/A	\$898,442.75	N/A

# Components

## **Outside Professional Services**

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

	Predetermined	Estimated	Estimated Cost		Actual Cost
Outside Professional Services	\$179,130.00	\$161,280.00	Justification	\$4,742.99	Justification
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	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
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
Project management of the transition	\$28,440.00	\$18,530.00	See AT Exhibits for more information.	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	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	\$4,742.99	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A

Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Sub-total	\$179,130.00	\$161,280.00	N/A	\$4,742.99	N/A
Total for all systems	\$2,795,083.11	\$2,049,763.42	N/A	\$898,442.75	N/A

### Components

Actual Information Description	File Name
Comprehensive coverage verification via field study, if needed	Information not provided.
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	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.
Project management of the transition	Information not provided.
RF Exposure Measurements	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	Component Description:  Amount:	Invoice for WPXL's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached. \$4,742.99
	Component Description:  Amount:	Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation. \$4,837.97
Prepare request for Special Temporary Authorization	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100	Information not provided.	

Perform engineering study for new channel assignment and antenna development	Information not provided.
Address transition timing and coordination issues w/ other stations and wireless	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
Other Expenses	\$114,190.00	\$105,085.00		\$3,500.00	
MVPD Notification of Channel Change	\$1,000.00	\$1,000.00	N/A	\$1,000.00	N/A
Develop and air announcement of upcoming channel change	\$0.00	\$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	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$15,000.00	\$15,000.00	N/A	N/A	N/A
BLM or NFS Coordination	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Local Zoning	\$25,000.00	\$25,000.00	N/A	N/A	N/A

ECC Ellina	<b>#40F 00</b>	<b>#400 00</b>	NI/A	NI/A	NI/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	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
DTV Medical Facility Notification	\$11,550.00	\$2,500.00	N/A	\$2,500.00	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
Sub-total	\$114,190.00	\$105,085.00	N/A	\$3,500.00	N/A
Total for all systems	\$2,795,083.11	\$2,049,763.42	N/A	\$898,442.75	N/A

## Components

Actual Information Description	File Name	
MVPD Notification of Channel Change	Component Description:  Amount:	Cost of MVPD notifications for channel change. Supporting documentation is attached. This invoice has been paid. \$1,000.00
Develop and air announcement of upcoming channel change	Information not provided.	
Equipment Storage	Information not provided.	

Equipment Delivery and Handling Charges	Information not provided.	
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
BLM or NFS Coordination	Information not provided.	
Non-zoning permits	Information not provided.	
Local Zoning	Information not provided.	
FCC Filing Fees - Special Temporary Authorization request	Information not provided.	
FCC Filing Fees - Form 2100 license to cover application	Information not provided.	
DTV Medical Facility Notification	Component Description:  Amount:	Cost of medical notifications for channel change Supporting documentation i attached. This invoice has bee paid. \$2,500.00
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.	

# Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,795,083.11	\$2,049,763.42	\$898,442.75

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

Section Question Response

## Submission of Estimated Expenses Statements

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.

- 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 abovenamed applicant for the Authorization(s) specified above.

#### Mario Vasquez

Vice President -Finance, Operations

04/30/2020

Section Question Response

# Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).

- 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 certifies that the statements in this form and attached documentation are true, complete, and correct.
- 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 abovenamed applicant for the Authorization(s) specified above. Mario
Vasquez
Vice
President Finance,
Operations

04/30/2020

#### **Attachments**