



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **24508-18** | Service: **DRT** | Call **KHSL-TV** | Channel:  
ID: | Sign:  
**18 (UHF)** | File **0000089802**  
Number:  
FRN: **0024763286** | Eligibility **Eligible** | Date **07/16**  
Status: | Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

| Applicant                                 | Address   | Phone             | Email              | Applicant Type            |
|---|---|-------------------|--------------------|---------------------------|
| <b>CALIFORNIA TV LICENSE COMPANY, LLC</b> | John M. Burgett<br>1776 K Street, NW<br>Washington, DC 20006<br>United States | +1 (202) 719-4239 | jburgett@wiley.law | Limited Liability Company |

## 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>Sam Hariton</b><br><i>Widely</i> | Sam Hariton<br>4031 University Dr<br>Suite 100<br>Fairfax, VA 22030<br>United States | +1 (339) 222-8107 | sam.hariton@widely.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   | KHSL-TV DRT is planning to purchase a like-for-like transmitter and a like-for-like transmission line, and to reuse the existing antenna. The equipment will remain on the existing tower. |

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

| Section   | Question   | Response               |
|---|--|------------------------|
| <b>Existing Transmitter Description</b>           | Type of change   | Purchase<br>New        |
|   | Use  | Primary<br>(Main)      |
|   | Ownership  | Owned                  |
|   | 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  | DT-<br>Gateway-<br>UHF |
|   | Year   | 2014                   |
|   | Type   | Solid State            |
|   | Solid State Cooling  | Air Cooled             |
|   | Solid State Power Capacity                                 | 235 W                  |

**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                                     | UAXTE-1-P2R23   |
|                 | Transmitter Type                          | Solid State   |
|                 | Solid State Cooling                       | Air Cooled  |
|                 | Solid State Power capacity                | 235 W   |
|                 | Justification for New Transmitter         | Re-tuning the existing main transmitter is not an option because the transmitter model is no longer in production and is not supported by the manufacturer. |

**Primary  
Transmitter**

**Other Transmitter Costs**

| Section                 | Question  | Response |
|-------------------------|---|----------|
| Other Transmitter Costs | Does the transmitter installation require a Transmitter Building Site Survey /Installation? | No       |
| Electrical Service      | Service Entrance (3 phases 800A 208V)   | No       |
|                         | Switchgear (industrial 800 amp)   | No       |
|                         | Transformer (480V)  | No       |

|  |   |    |
|--|---|----|
|  | Rigid Conduit and Wiring  | No |
|  | Other Electrical Service  | No |
| <b>HVAC Service</b>  | Does the replacement transmitter require HVAC Service?  | No |
| <b>Transmitter Building Addition/Modification or Leasehold Improvement</b> | Does the Transmitter Building require an addition, modification, other leasehold improvement? | No |

**Primary Transmitter**      **Other Transmitter Cost Not Listed**  
Information not provided.

**Antennas**

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

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

| Section                                   | Question   | Response           |
|---|--|--------------------|
| Existing Antenna<br>Description           | Type of change   | Retune<br>Existing |
|   | Antenna Use  | Primary<br>(Main)  |
|   | Ownership  | Owned              |
|   | Is the existing antenna shared with another station or stations? | No                 |
|   | Is the existing antenna directional?                             | Yes                |
|   | Is antenna in operating condition?                               | No                 |
|   | Is antenna located on or in close proximity to an antenna farm?  | Yes                |
| Existing Antenna<br>Manufacturer and Type | Mounting   | Side Mount         |
|   | Antenna position in stack  | Not in Stack       |
|   | Polarization   | Horizontal         |
|   | Type   | Other              |
|   | Other Antenna Type   | PRTV               |
|   | ERP: (Effective Radiated Power)<br>.....                         | 4.3 kW             |
|   | Manufacturer   | Kathrein<br>Scala  |
|   | Model  | 2X2K723147         |
|   | Year   | 2014               |

**Primary  
Antenna**

**Adjustment to Existing Antenna**

| Section                        | Question                                      | Response |
|--------------------------------|---|----------|
| Sweep Test of Existing Antenna | Do you need a sweep test of existing antenna? |          |

**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                                    |          |

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

| Name                     | Description              |
|--------------------------|--------------------------|
| Estimated Retuning Costs | Estimated Retuning Costs |

**Transmission Line**

| Section                               | Question  | Response |
|---------------------------------------|---|----------|
| Transmission Line<br>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)  |
|  | Ownership  | Owned           |
|  | 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   | Flexible Foam   |
|  | Diameter   | 7/8 inches      |
|  | Number of parallel runs  | 1               |
|  | Length   | 70 feet per run |

**Primary** **New Transmission Line**  
**Transmission Line**

| Section                            | Question   | Response  |
|------------------------------------|--|---|
| <b>New Transmission Line Costs</b> | Use  | Primary (Main)  |
|                                    | Change Type  | Purchase New  |
|                                    | Is this a request for upgraded equipment?  | No  |
|                                    | Type   | Flexible Foam   |
|                                    | Diameter   | 7/8 inches  |
|                                    | Number of parallel runs  | 1   |
|                                    | Length   | 70 feet per run   |
|                                    | Justification for New Transmission Line  | The new main transmission line is required because 7 /16 DIN connectors for the existing transmission line are no longer available. |
| <b>Interior RF Systems</b>         | Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators? | No  |

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

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? | No       |

**Outside  
Professional Services Costs**

| Section                                    | Question  | Response   |
|--|---|--|
| Outside Project Management Services        | Do you require outside project management services?                     | Yes  |
|  | Number of Hours   | 254  |
|  | Explanation   | KHSL-TV DRT does not have sufficient resource capacity and expertise in house to handle all of the reimbursement activities necessary to facilitate on-time completion of the station's build. KHSL-TV DRT will hire an outside firm to support KHSL-TV DRT. |
| Outside RF consulting Engineering Services | Perform engineering study for displacement application                  | 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   |
|   | Prepare Form 601   | No  |
| <b>Attorney and Other Outside Consulting Services</b> | Prepare and file Form FCC Construction Permit Application  | Yes |
|   | For Auxiliary Facility                                     | No  |
|   | For Main Facility  | Yes |
|   | Prepare and file Form FCC License to Cover Application     | Yes |
|   | For Auxiliary Facility                                     | No  |
|   | For Main Facility  | Yes |
|   | Prepare request for Special Temporary Authority            | Yes |
|   | Quantity   | 1   |
|   | Negotiation of Lease and other Matter for Shared Locations | No  |
|   | Prepare or Review FCC Form 399 for Reimbursement           | No  |
|   | Form 399 assistance or other program management costs      | No  |
| <b>RF Field Engineering Services</b>                  | Comprehensive coverage verification via field study        | No  |
|   | RF exposure measurements                                   | No  |
|   | Additional Field Engineering Service                       | No  |

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

If minor, not considered.

**Other Expenses**

| Section                                   | Question   | Response |
|---|--|----------|
| <b>AM Pattern Disturbance</b>             | Is an Impact Study needed?   | No       |
|   | Is Remediation needed?   | No       |
| <b>Permit and Filing Costs</b>            | FCC Construction Permit Major Change   | No       |
|   | FCC Construction Permit Minor Change   | No       |
|   | FCC License to Cover Application   | No       |
|   | FCC Special Temporary Authority Application  | Yes      |
| <b>Other Miscellaneous Expenses</b>       | Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?        | No       |
|   | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | No       |
|   | Does this relocation require Equipment Storage?  | No       |
| <b>Point to Point Microwave (STL/ICR)</b> | Frequency Coordination for Unidirection System   | No       |
|   | Frequency Coordination for Bi-Direction System   | No       |
|   | New Point to Point Microwave System  | No       |

**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<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual<br>Cost | Actual Cost<br>Justification |
|--|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary<br>Transmitter<br>UAXTE-1-P2R23                              | \$24,300.00                    | \$24,300.00       |                                    | \$0.00         |                              |
| UHF - Air<br>Cooled Solid<br>State<br>Transmitter 160<br>- 300 Watts | \$24,300.00                    | \$24,300.00       | N/A                                | N/A            | N/A                          |
| Sub-total  | \$24,300.00                    | \$24,300.00       | N/A                                | \$0.00         | N/A                          |
| Total for all<br>systems   | \$65,844.50                    | \$80,957.50       | N/A                                | \$5,044.75     | N/A                          |

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<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification                                 | Actual<br>Cost | Actual Cost<br>Justification |
|----------------------------------|--------------------------------|-------------------|--|----------------|------------------------------|
| Primary<br>Antenna<br>2X2K723147 | \$600.00                       | \$600.00          |  | \$0.00         |                              |
| Estimated<br>Retuning Costs      | <i>\$600.00</i>                | \$600.00          | Estimated<br>cost per<br>station<br>engineer,<br>pending<br>quotes | N/A            | N/A                          |
| Sub-total                        | \$600.00                       | \$600.00          | N/A  | \$0.00         | N/A                          |
| Total for all<br>systems         | \$65,844.50                    | \$80,957.50       | N/A  | \$5,044.75     | N/A                          |

Components

Information not provided.

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<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual<br>Cost | Actual Cost<br>Justification |
|---|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary<br>Transmission<br>Line                             | \$770.00                       | \$770.00          |                                    | \$0.00         |                              |
| Flexible Foam<br>Transmission<br>Line - dielectric,<br>7/8" | \$770.00                       | \$770.00          | N/A                                | N/A            | N/A                          |
| Sub-total   | \$770.00                       | \$770.00          | N/A                                | \$0.00         | N/A                          |
| Total for all<br>systems                                    | \$65,844.50                    | \$80,957.50       | N/A                                | \$5,044.75     | N/A                          |

Components

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  | \$39,869.50                 | \$54,982.50    |                              | \$5,044.75  |                           |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application    | \$1,577.50                  | \$1,577.50     | N/A                          | N/A         | N/A                       |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$3,025.00                  | \$3,025.00     | N/A                          | N/A         | N/A                       |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application      | \$1,052.50                  | \$1,052.50     | N/A                          | N/A         | N/A                       |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application   | \$2,102.50                  | \$2,102.50     | N/A                          | N/A         | N/A                       |

|  |             |             |   |            |     |
|--|-------------|-------------|---|------------|-----|
| Prepare request for Special Temporary Authorization                          | \$1,280.00  | \$1,280.00  | N/A   | N/A        | N/A |
| Project management of the transition   | \$26,797.00 | \$41,910.00 | Please see KHSL-TV LPTV strategic support quote | \$5,044.75 | N/A |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$2,235.00  | \$2,235.00  | N/A   | N/A        | N/A |
| Perform engineering study for displacement application                       | \$1,800.00  | \$1,800.00  | N/A   | N/A        | N/A |
| <b>Sub-total</b>   | \$39,869.50 | \$54,982.50 | N/A   | \$5,044.75 | N/A |
| <b>Total for all systems</b>   | \$65,844.50 | \$80,957.50 | N/A   | \$5,044.75 | N/A |

## Components

| Actual Information   |                           |
|--|---------------------------|
| Description  | File Name                 |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application     | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application      | Information not provided. |

|  |                           |
|--|---------------------------|
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Prepare request for Special Temporary Authorization                                  | Information not provided. |

|  |   |                                  |
|--|---|----------------------------------|
| Project management of the transition   | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$26.50    |
|  | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$156.25   |
|  | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$1,793.55 |
|  | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$253.75   |
|  | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$1,404.15 |
|  | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$1,136.05 |
|  | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$65.00    |
|  | <b>Component Description:</b><br><b>Amount:</b> | Project Management<br>\$209.50   |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | Information not provided.                       |                                  |

|   |                           |
|---|---------------------------|
| Perform engineering study<br>for displacement application | 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<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual<br>Cost | Actual Cost<br>Justification |
|---|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Other Expenses  | \$305.00                       | \$305.00          |                                    | \$0.00         |                              |
| FCC Filing Fees<br>- Special<br>Temporary<br>Authorization<br>request | \$305.00                       | \$305.00          | N/A                                | N/A            | N/A                          |
| Sub-total   | \$305.00                       | \$305.00          | N/A                                | \$0.00         | N/A                          |
| Total for all<br>systems  | \$65,844.50                    | \$80,957.50       | N/A                                | \$5,044.75     | N/A                          |

Components

Information not provided.

|                         |                              |                                    |                       |
|-------------------------|------------------------------|------------------------------------|-----------------------|
| <b>Cost Information</b> | <b>Grand Total</b>           |                                    |                       |
|                         |                              | <b>Predetermined Cost Estimate</b> | <b>Estimated Cost</b> |
|                         |                              |                                    | <b>Actual Cost</b>    |
|                         | <b>Total for all systems</b> | \$65,844.50                        | \$80,957.50           |
|                         |                              |                                    | \$5,044.75            |

|                             |  |                 |
|-----------------------------|--|-----------------|
| <b>Reimbursement Status</b> | <b>Question</b>  | <b>Response</b> |
|                             | 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 |
|---------------|--|--|----------|
|               | Submission of Actual Cost Documentation Statements | WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).  |          |
|               |  | <ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol> |          |



4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

|  |  |
|--|--|
| <p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p> |  |
| <p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>  | <p><b>Robert S. Prather , Jr. .</b><br/> <i>CEO, Allen Media Broadcasting, LLC</i></p> <p>07/16/2020</p> |

| Certification | Section   | Question   | Response |
|---------------|---|--|----------|
|               | Submission of Final Allocation or Accounting Information 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.   |          |
|               |   | <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. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol> |          |

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.

**Robert S. Prather , Jr. .**  
*CEO, Allen Media Broadcasting, LLC*

07/16/2020

## Attachments