

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility 52425 Service: DCA Call KSJF-CD Channel: 34 (UHF)

Sign:

0000025228

Number:

ID:

File

FRN: **0021646880** Date **12/18** 

Submitted: /2018

# Applicant Information

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

| Applicant                                   | Address  | Phone                | Email                   | Applicant<br>Type               |
|---|--|----------------------|-------------------------|---------------------------------|
| KTV MEDIA, LLC Doing Business As: KTV MEDIA | Larry Morton<br>17200 Chenal<br>Parkway<br>Suite 300 -<br>267<br>Little Rock,<br>AR 72223<br>United States | +1 (501)<br>476-1507 | EQUITYLEM@GMAIL.<br>COM | Limited<br>Liability<br>Company |

# 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                         |
|--|---|-----------------------|-------------------------------|
| Lindsey McGough Lori E. Withrow, P.L. L.C. | Lindsey McGough<br>12410 Cantrell Rd.<br>Suite 100<br>LIttle Rock, AR<br>72223<br>United States | +1 (501) 227-<br>2000 | Imcgough@allenwithrow.<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   | This application is to convert Channel 50 to Channel 19. We will use the existing antenna and retune the transmitter and filter. The change that was assigned to us by the FCC resulted in a loss of population and coverage area. See attached explanation. |

### **Transmitters**

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

# Primary Transmitter

# **Existing Transmitter Information**

| Section                          | Question   | Response          |
|----------------------------------|--|-------------------|
| Existing Transmitter Description | Type of change   | Purchase<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               |
| Existing Transmitter             | Manufacturer   |                   |
| Manufacturer and Type            | Model  | TRN-5X-4D-<br>U-C |
|                                  | Year   | 2015              |
|                                  | Туре   | Solid State       |
|                                  | Solid State Cooling  | Air Cooled        |
|                                  | Solid State Power Capacity                                 | .50 kW            |

# Primary Transmitter

### **New Transmitter Costs**

| Section         | Question                                  | Response  |
|-----------------|---|---|
| New Transmitter | Use                                       | Primary<br>(Main)   |
|                 | Change Type                               | Purchase<br>New   |
|                 | Is this a request for upgraded equipment? | No  |
|                 | Manufacturer                              |   |
|                 | Model                                     | TRN-5X-4D-<br>U-C   |
|                 | Transmitter Type                          | Solid State   |
|                 | Solid State Cooling                       | Air Cooled  |
|                 | Solid State Power capacity                | .5 kW   |
|                 | Justification for New Transmitter         | See KSJF-CD Project Description, items 2 and 3. It is cheaper to buy a used transmitter on frequency than to retune the existing transmitter. |

# Primary Transmitter

### **Other Transmitter Costs**

| Section            | Question                              | Response |
|--------------------|---------------------------------------|----------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | No       |
|                    | Switchgear (industrial 800 amp)       | No       |
|                    | Transformer (480V)                    | No       |
|                    | Power                                 | N/A      |
|                    |                                       | '        |

|   | Rigid Conduit and Wiring   | No  |
|---|--|-----|
|   | Size   | N/A |
|   | Length   | N/A |
|   | Other Electrical Service   | No  |
|   | Description  | N/A |
| HVAC Service  | Does the replacement transmitter require HVAC Service?                                       | No  |
|   | Туре   | N/A |
|   | Size   | N/A |
|   | Other Size   | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other 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  |
|---------------------|--|
| On-site engineering | It costs to set up the new transmitter and to hook it into the antenna system. |

#### **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   | Retune<br>Existing |
|                              | Antenna Use  | Primary<br>(Main)  |
|                              | Description of Use   | N/A                |
|                              | Ownership  | Owned              |
|                              | Owner  | N/A                |
|                              | 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  | Class A            |
| Manufacturer and Type        | Mounting   | Side Mount         |
|                              | Antenna position in stack  | Not in Stack       |
|                              | Polarization   | Horizontal         |
|                              | Туре   | Slotted<br>Coaxial |
|                              | Number of Stations Supported                                     | N/A                |
|                              | Number of Panels   | N/A                |
|                              | Design power capacity in use                                     | N/A                |
|                              | Lower Limit  | N/A                |

| Upper Limit                     | N/A                 |
|---------------------------------|---------------------|
| Other Antenna Type              | N/A                 |
| ERP: (Effective Radiated Power) | 2.0 kW              |
| Manufacturer                    | Antenna<br>Concepts |
| Model                           | ANTACS16A           |
| Year                            | 2004                |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 14387       | KQRY-LD   |

#### Primary Antenna

# **Adjustment to Existing Antenna**

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

#### Primary Antenna

#### **Other Antenna Costs**

| Section                        | Question                                     | Response |
|--------------------------------|--|----------|
| Combiner for Shared<br>Antenna | Do you need a Combiner for a Shared Antenna? | No       |
|                                | Туре   |          |
|                                | Number of channels supported                 | N/A      |
|                                | Frequencies of channels supported            | N/A      |
|                                | Frequency                                    |          |

## Primary Antenna

**Other Antenna Cost Not Listed** 

Information not provided.

| Transmission Seffien               | Question  | Response |
|------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | No       |

Tower
Equipment
And
Rigging
Costs

| Section                                     | Question  | Response |
|---|---|----------|
| Tower Equipment or<br>Rigging Costs Changes | Do you have tower equipment or rigging costs changes? | No       |

### Outside Professional

| Section  | Question   | Response   |
|--|--|--|
| Services Costs<br>Outside Project<br>Management Services | Do you require outside project management services?                          | Yes  |
|  | Number of Hours  | 50   |
|  | Explanation  | To plan and oversee the transition from Channel 50 to Channel 19 |
| Outside RF consulting<br>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                              | No   |
|  | Quantity   | N/A  |

|                                       | 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  | 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                                 | 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<br>Services      | Comprehensive coverage verification via field study  | Yes |
|                                       | RF exposure measurements   | No  |
|                                       | Additional Field Engineering Service   | Yes |
|                                       | Number of Days   | 2   |
|                                       |  |     |

| Justification | Confirm       |
|---------------|---------------|
|               | proper        |
|               | installation. |
|               | (One day      |
|               | for 2         |
|               | people)       |
|               |               |

#### Outside Professional

# Other Professional Services Expenses Not Listed

| I Şervices Costs | Description  |
|------------------|--|
| Tower Climber    | Climber to check and test the antenna after channel change |

# 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<br>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   | No       |
|                                 | BLM or NFS Coordination  | No       |
|                                 | FCC Construction Permit Minor Change   | Yes      |
|                                 | FCC License to Cover Application   | Yes      |
|                                 | FCC Special Temporary Authority Application  | No       |
| Other Miscellaneous<br>Expenses | 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? | Yes      |
|                                 | Does this relocation require Equipment Storage?  | No       |
|                                 | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?     | Yes      |
|                                 | Does this relocation require MVPD  Notification of a Channel Change?   | Yes      |

# Other Expenses

# Other Expenses Not Listed

| Name                   | Description  |
|------------------------|--|
| Travel                 | Third party consultants travel reimbursement   |
| Combiner               | The current antenna will be shared with KQRY-LD  |
| Construction Financing | Construction interest costs to build the project.  |
| Contingency            | 5% Contingency factor for unexpected items and cost increases over the course of the construction project. |
| Sales Taxes            | Not included in the item costs   |

# **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<br>Cost | Estimated<br>Cost<br>Justification  | Actual<br>Cost | Actual Cost<br>Justification |
|--|-----------------------------|-------------------|---|----------------|------------------------------|
| Primary<br>Transmitter<br>TRN-5X-4D-U-<br>C                | \$17,500.00                 | \$17,500.00       |   | \$17,287.50    |                              |
| UHF - Air<br>Cooled Solid<br>State<br>Transmitter .5<br>kW | \$15,000.00                 | \$15,000.00       | N/A   | \$14,787.50    | N/A                          |
| On-site engineering  | \$2,500.00                  | \$2,500.00        | We are requesting that this price be increased by \$500 because the original proposal did not reflect the cost of installing a full service filter. | \$2,500.00     | N/A                          |
| Sub-total  | \$17,500.00                 | \$17,500.00       | N/A   | \$17,287.50    | N/A                          |
| Total for all systems                                      | \$206,208.49                | \$108,763.49      | N/A   | \$62,489.70    | N/A                          |

### Components

| <b>Actual Information</b> |           |  |
|---------------------------|-----------|--|
| Description               | File Name |  |

| UHF - Air Cooled Solid  |                         |                      |
|-------------------------|-------------------------|----------------------|
| State Transmitter .5 kW | Component Description:  | Per FCC              |
|                         |                         | instructions, the    |
|                         |                         | cost of the          |
|                         |                         | transmitter          |
|                         |                         | includes the Mask    |
|                         |                         | Filter. See the      |
|                         |                         | attached KSJF-       |
|                         |                         | CD Construction      |
|                         |                         | Permit requiring a   |
|                         |                         | full service mask    |
|                         |                         | filter. This amount  |
|                         |                         | was included in      |
|                         |                         | our estimate. We     |
|                         |                         | negotiated a         |
|                         |                         | discount off of list |
|                         |                         | price.               |
|                         | Amount:                 | \$2,520.00           |
|                         | Common and Booming in a | Durch and and        |
|                         | Component Description:  | Purchased and        |
|                         |                         | received the         |
|                         | Amazunti                | Transmitter          |
|                         | Amount:                 | \$12,267.50          |
| On-site engineering     |                         |                      |
|                         | Component Description:  | Engineering to       |
|                         |                         | install the          |
|                         |                         | transmitter.         |
|                         |                         | Balance of the       |
|                         |                         | invoice is paid in   |
|                         |                         | travel expenses.     |
|                         | Amount:                 | \$2,500.00           |

# **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>ANTACS16A   | \$33,030.00                    | \$5,000.00        |                                    | \$5,000.00     |                              |
| UHF - Lower<br>Power Side<br>Mount, Class<br>A One<br>Station<br>antenna<br>basic | \$26,300.00                    | \$0.00            | N/A                                | N/A            | N/A                          |
| Sweep test of existing antenna  | \$6,730.00                     | \$5,000.00        | N/A                                | \$5,000.00     | N/A                          |
| Sub-total   | \$33,030.00                    | \$5,000.00        | N/A                                | \$5,000.00     | N/A                          |
| Total for all systems   | \$206,208.49                   | \$108,763.49      | N/A                                | \$62,489.70    | N/A                          |

### Components

| Actual Information Description  | File Name                 |
|---|---------------------------|
| UHF - Lower Power Side<br>Mount, Class A One Station<br>antenna basic | Information not provided. |

| Sweep test of existing antenna | Component Description  | See letter          |
|--------------------------------|------------------------|---------------------|
|                                | Component Description: |                     |
|                                |                        | attached to         |
|                                |                        | invoice.            |
|                                |                        | Engineering costs   |
|                                |                        | for the antenna     |
|                                |                        | sweeps (Typo        |
|                                |                        | corrected - no      |
|                                |                        | change in dollars). |
|                                |                        | Balance of invoice  |
|                                |                        | in Travel           |
|                                |                        | expenses.           |
|                                | Amount:                | \$5,000.00          |

# Cost Transmission Line

**Information** Information not provided.

# Cost Tower Equipment and Rigging Costs

**Information** 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<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification  | Actual<br>Cost | Actual Cost<br>Justification |
|--|--------------------------------|-------------------|---|----------------|------------------------------|
| Outside<br>Professional<br>Services  | \$125,290.00                   | \$55,750.00       |   | \$27,000.00    |                              |
| Tower Climber  | \$2,000.00                     | \$2,000.00        | Climber to realign the STL on the tower and to check and test the antenna after channel change. | \$1,750.00     | N/A                          |
| Additional Field<br>Engineering<br>Service, 2 Days                         | \$2,000.00                     | \$2,000.00        | Confirm proper installation (1 day for two people)  | N/A            | N/A                          |
| Comprehensive<br>coverage<br>verification via<br>field study, if<br>needed | \$84,200.00                    | \$20,000.00       | N/A   | N/A            | N/A                          |

| Attorney Fees - Negotiation of lease and other matters for shared locations            | \$4,210.00 | \$4,000.00 | If required | N/A        | N/A |
|--|------------|------------|-------------|------------|-----|
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application    | \$2,365.00 | \$2,000.00 | N/A         | \$2,000.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$4,250.00 | N/A         | \$4,250.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application      | \$1,580.00 | \$1,500.00 | N/A         | \$1,500.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application   | \$3,155.00 | \$3,000.00 | N/A         | \$3,000.00 | N/A |
| Perform engineering study for new channel assignment and antenna development           | \$7,360.00 | \$7,000.00 | N/A         | \$7,000.00 | N/A |

| Address<br>transition<br>timing and<br>coordination<br>issues w/ other<br>stations and<br>wireless | \$2,630.00   | \$2,500.00   | N/A | N/A         | N/A |
|--|--------------|--------------|-----|-------------|-----|
| Project<br>management of<br>the transition   | \$7,900.00   | \$5,000.00   | N/A | \$5,000.00  | N/A |
| Prepare and or review reimbursement form   | \$2,630.00   | \$2,500.00   | N/A | \$2,500.00  | N/A |
| Sub-total  | \$125,290.00 | \$55,750.00  | N/A | \$27,000.00 | N/A |
| Total for all systems  | \$206,208.49 | \$108,763.49 | N/A | \$62,489.70 | N/A |

# Components

| Actual Information Description  | File Name                       |  |
|---|---------------------------------|--|
| Tower Climber   | Component Description:  Amount: | Tower work for installing our transmitter and connecting to the existing antenna. \$1,750.00 |
| Additional Field Engineering<br>Service, 2 Days                             | Information not provided.       |  |
| Comprehensive coverage verification via field study, if needed              | Information not provided.       |  |
| Attorney Fees - Negotiation of lease and other matters for shared locations | Information not provided.       |  |

| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Component Description:   | Legal fees for                    |
|--|--|-----------------------------------|
| License to Cover Application   |  | filing the                        |
|  |  | application. FCC                  |
|  |  | Fees (\$335)<br>recorded          |
|  |  | separately                        |
|  | Amount:  | \$2,000.00                        |
|  |  |                                   |
| Attorney Fees - Prepare and File FCC Form 2100 (main),                             |  |                                   |
| Construction Permit  | Component Description:   | Payment of Legal                  |
| Application  |  | fees for the                      |
|  |  | Construction Permit               |
|  | Amount:  | \$4,250.00                        |
|  | Allount.   | ψ <del>τ</del> ,∠υυ.υυ            |
| Prepare engineering section  |  |                                   |
| of FCC Form 2100 (main),   | Component Description:   | Engineering fees                  |
| License to Cover Application   |  | for filing the KSJF               |
|  |  | License.                          |
|  | Amount:  | \$1,500.00                        |
| Prepare engineering section  |  |                                   |
| of FCC Form 2100 (main),   | Common and December in the second  | Daywa ant far                     |
| Construction Permit  | Component Description:   | Payment for                       |
| Application  |  | preparation of the<br>Engineering |
|  |  | portion of Form                   |
|  |  | 2100.                             |
|  | Amount:  | \$3,000.00                        |
|  |  |                                   |
|  | Component Description:   | Payment for                       |
|  | ,  | preparation of the                |
|  |  | Engineering                       |
|  |  | portion of Form                   |
|  |  | 2100.                             |
|  | The state of the s |                                   |

| for new channel assignment and antenna development                              | Component Description:          | Channel 24 Repack Study and antenna   |  |
|---|---------------------------------|---|--|
|   | Amount:                         | development.<br>\$7,000.00  |  |
|   | Component Description:  Amount: | Perform engineering study for new channel assignment and antenna development \$7,000.00 |  |
|   | , and and                       | Ψ1,000.00   |  |
| Address transition timing and coordination issues w/other stations and wireless | Information not provided.       |   |  |
| Project management of the transition  |                                 |   |  |
|   | Component Description:          | Project Management Fees are \$5,000. \$534.88 was paid                                  |  |
|   |                                 | for Travel expenses. See  |  |
|   |                                 | attached KSJF Site Management Memo.   |  |
|   | Amount:                         | \$5,000.00  |  |
| Prepare and or review   |                                 |   |  |
| reimbursement form  | Component Description:          | Preparation and review of the Form 399. Paid receipts                                   |  |
|   |                                 | were in previous submissions.   |  |
|   | Amount:                         | \$2,500.00  |  |

# **Cost Information**

### **Other Expenses**

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

| Description               | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification   | Actual<br>Cost | Actual Cost<br>Justification |
|---------------------------|--------------------------------|-------------------|--|----------------|------------------------------|
| Other<br>Expenses         | \$30,388.49                    | \$30,513.49       |  | \$13,202.20    |                              |
| Sales Taxes               | \$2,340.00                     | \$2,340.00        | Estimate of<br>sales taxes<br>owed for<br>equipment and<br>services. See<br>Sales Tax<br>Memo.                     | N/A            | N/A                          |
| Contingency               | \$2,877.45                     | \$2,877.45        | Allowance for items left out of the projections and cost increases during construction - 3%. See Contingency memo. | N/A            | N/A                          |
| Construction<br>Financing | \$433.33                       | \$433.33          | Interest costs for financing the construction. See Construction Loan and Fees memo.                                | N/A            | N/A                          |
| Combiner                  | \$4,242.71                     | \$4,242.71        | To save construction costs, we are sharing the KQRY antenna.   | \$4,242.71     | N/A                          |

| Travel   | \$1,500.00  | \$1,500.00 | Travel reimbursement for third party consultants travel. See Travel Memo.  | \$1,185.37 | N/A   |
|--|-------------|------------|--|------------|---|
| MVPD<br>Notification of<br>Channel<br>Change                           | \$2,000.00  | \$2,000.00 | Cost to notify all MVPD providers of Channel Changes   | N/A        | N/A   |
| Develop and<br>air<br>announcement<br>of upcoming<br>channel<br>change | \$1,000.00  | \$1,000.00 | Payment to third-party to prepare the proper notification of the channel change.   | N/A        | N/A   |
| Equipment Delivery and Handling Charges                                | \$1,000.00  | \$1,000.00 | Shipping costs<br>not included in<br>individual<br>items.  | N/A        | N/A   |
| FCC Filing Fees - Form 2100 minor change CP application                | \$1,110.00  | \$4,785.00 | Because we will have to file for a different channel to correct the interference our assigned channel receives we will be required to file Major Modification. See attached KSJF-CD Fee Waiver letter. | \$0.00     | THERE WAS NESTIMATE FOR THIS BECAUSE OF EXPECTING TO HAVE TO FILE MAJOR MODIFICATION BECAUSE OF EXISTING INTERFERENCE AND COVERAGE REDUCTION See attached KSJF Robertschus Letter-2 and KSJF 399 ADDITIONAL COST LETTER |
| DTV Medical<br>Facility<br>Notification                                | \$11,550.00 | \$8,000.00 | N/A  | \$7,439.12 | N/A   |

| FCC Filing<br>Fees - Form<br>2100 license | \$335.00     | \$335.00     | The FCC price increased to \$335. | \$335.00    | The cost is<br>\$10.00 more du<br>to an increase |
|---|--------------|--------------|-----------------------------------|-------------|--|
| to cover<br>application                   |              |              |                                   |             | the FCC fees                                     |
| Local Zoning                              | \$2,000.00   | \$2,000.00   | If required                       | N/A         | N/A  |
| Sub-total                                 | \$30,388.49  | \$30,513.49  | N/A                               | \$13,202.20 | N/A  |
| Total for all systems                     | \$206,208.49 | \$108,763.49 | N/A                               | \$62,489.70 | N/A  |
|   |              |              |                                   |             |  |

## Components

| Actual Information Description | File Name                 |  |
|--------------------------------|---------------------------|--|
| Sales Taxes                    | Information not provided. |  |
| Contingency                    | Information not provided. |  |
| Construction Financing         | Information not provided. |  |
| Combiner                       |                           |  |
|                                | Component Description:    | Combiner to allow us to share the antenna with KQRY-LD |
|                                | Amount:                   | \$4,242.71   |

| Travel  |                           |   |
|---|---------------------------|---|
|   | Component Description:    | Travel expense for Site management. \$5,000 was charged to Site Management. See attached KSJF Site Management |
|   |                           | Memo.   |
|   | Amount:                   | \$534.88  |
|   | Component Description:    | Travel for antenna  |
|   |                           | sweeps.   |
|   | Amount:                   | \$278.54  |
|   | Component Description:    | Travel for the transmitter installation. Balance of the invoice is in engineering fees                        |
|   |                           | to install the  |
|   | Amount:                   | transmitter.<br>\$371.95  |
| MVPD Notification of Channel Change                     | Information not provided. |   |
| Develop and air announcement of upcoming channel change | Information not provided. |   |
| Equipment Delivery and Handling Charges                 | Information not provided. |   |

| FCC Filing Fees - Form<br>2100 minor change CP |                           |                     |
|--|---------------------------|---------------------|
| application                                    | Component Description:    | Because the         |
| - [ ]  |                           | Auction Taskforce   |
|  |                           | gave us incorrect   |
|  |                           | advice we had to    |
|  |                           | file in the window  |
|  |                           | that required us to |
|  |                           | pay a Major Mod     |
|  |                           | fee. This was an    |
|  |                           | unexpected          |
|  |                           | expense we had to   |
|  |                           | pay the FCC. See    |
|  |                           | Attached Waiver     |
|  |                           | Letter.             |
|  | Amount:                   | \$4,785.00          |
| DTV Medical Facility                           |                           |                     |
| Notification                                   | Component Description:    | Payment for         |
|  |                           | Medical Letters     |
|  |                           | Notification        |
|  | Amount:                   | \$7,439.12          |
| FCC Filing Fees - Form                         |                           |                     |
| 2100 license to cover                          | Component Description:    | FCC Filing fee for  |
| application                                    |                           | KSJF license. This  |
|  |                           | is \$10 more than   |
|  |                           | budgeted due to     |
|  |                           | an FCC fee          |
|  |                           | increase.           |
|  | Amount:                   | \$335.00            |
|  |                           |                     |
| Local Zoning                                   | Information not provided. |                     |

# Cost Information

### **Grand Total**

|                       | Predetermined<br>Cost Estimate | Estimated Cost | Actual Cost |
|-----------------------|--------------------------------|----------------|-------------|
| Total for all systems | \$206,208.49                   | \$108,763.49   | \$62,489.70 |

| Reimbursem | entestiatus  | Response |
|------------|--|----------|
|            | The facility has ceased operating on its pre-<br>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       |

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. LARRY MORTON MANAGER

12/18/2018

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. LARRY MORTON MANAGER

12/18/2018

#### **Attachments**