



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **191793** | Service: **DCA** | Call **KPOM-CD** | Channel:  
ID: | Sign:  
**27 (UHF)** | File **0000028605**  
Number:  
FRN: **0034804062** | Date **03/21**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>COACHELLA COMMUNICATIONS, LLC</b>	5670 WILSHIRE BLVD. SUITE 1620 LOS ANGELES, CA 90036 United States	+1 (323) 904-4090	form399@LOOP.COM	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
The Preparer is same as the reimbursement contact.			

## Broadcaster Information and Transition Plan

Question	Response
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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	The plan is for KPOM is to replace the existing channel 45 system with a new channel 27 antenna and new transmitter.

## 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 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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	Innovator LX 3000U
	Year	2003
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	3.0 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	TMU9-5
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3.0 kW
	Justification for New Transmitter	The existing transmitter is obsolete. The manufacturer is out of business, and there is no manufacturer support to retune the 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	Yes

	Size	2 inches
	Length	20.0 feet
	Other Electrical Service	Yes
	Description	The new main transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	10 tons
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary Transmitter**      **Other Transmitter Cost Not Listed**  
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 Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	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) .....	10.5 kW

Manufacturer	
Model	ALP4L1- HSN-45
Year	2014



**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Types</b>	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	14.4 kW
	Manufacturer	
	Model	AL4M-27-E

Year	2018
Justification for New Antenna	The existing antenna is single channel and not capable of broadcasting on the new channel. Buying the upgraded antenna is less expensive than buying an antenna comparable to the existing antenna.

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A

<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

**Primary  
Transmission Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Flexible Foam
	Diameter	Other
	Other Diameter	2 1/4 inches
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	180 feet per run

**Primary**  
**Transmission Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	1 5/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	125 feet per run
	Justification for New Transmission Line	The new antenna will be installed at the new site while the existing antenna remains at the old site. The size transmission line is the closest available size to the existing line, which is no longer available. See exhibit details.

Primary Transmission Line	Other Transmission Line Expenses Not Listed
Information not provided.	

**Tower  
Equipment  
And  
Rigging  
Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

**Primary  
Tower**

**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?	Yes
	One or more FM, AM or TV radio broadcaster(s)	No
	Others Types of Users	Yes
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1018937
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	33° 57' 41.8" N-
	Longitude (NAD83)	117° 16' 50.3" W-
	Overall Structure Height	123.03 feet
	Support Structure Height	122.05 feet
	Ground Elevation Above Mean Sea Level (AMSL)	3083.95 feet
	Structure Type	LTOWER - Lattice Tower



	Tower Owner	SpectraSite Communications, LLC. through American Towers, LLC.
	Date Constructed	06/01/1997

### Other Types of Users

#### Users

KRMV-LD

K272FQ

### Primary Tower

### Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for documented tower
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

Information not provided.

## Primary Tower

### Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	No
	ASR Number	
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	34° 02' 12.95" N-
	Longitude (NAD83)	116° 58' 10.0" W-
	Overall Structure Height	61.90 feet
	Support Structure Height	60.70 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1469.70 feet
	Structure Type	LTOWER - Lattice Tower
	Tower Owner	InSight Towers
	Date Constructed	01/01/2000

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

Facility ID	Call Sign	Service
60144	KLRD	FM
67354	KQIE	FM
25809	KRQB	FM

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	N/A
<b>Helicopter Services Required</b>	Are helicopter services required?	No

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Information not provided.

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	2000
	Explanation	KPOM does not have sufficient resource capacity and expertise in house to handle all of the Project Management related tasks necessary to facility on-time completion of the station's build by the Construction Deadline.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A

	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	8

	Justification	RF Project management of tower and transmitter installs
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**Outside Other Professional Services Expenses Not Listed**  
**Professional Services Costs** Services not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
<b>Permit and Filing Costs</b>	Local Zoning	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
Vehicle Rentals	Required for equipment delivery.



Cost  
Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter TMU9-5	\$207,420.00	\$205,500.00		\$34,900.00	
10 Ton system	\$38,900.00	\$37,000.00	N/A	N/A	N/A
Other Electrical Service: The new main transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.	<i>\$20,000.00</i>	\$20,000.00	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$520.00	\$500.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 3.0 kW	<i>\$148,000.00</i>	\$148,000.00	N/A	\$34,900.00	N/A
Sub-total	\$207,420.00	\$205,500.00	N/A	\$34,900.00	N/A
Total for all systems	\$969,510.00	\$937,235.50	N/A	\$86,790.82	N/A

## Components

Actual Information									
Description	File Name								
10 Ton system	Information not provided.								
Other Electrical Service: The new main transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.	Information not provided.								
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.								
UHF - Air Cooled Solid State Transmitter 3.0 kW	<table><tr><td><b>Component Description:</b></td><td>Shipping costs for a CH 27 mask filter with tuning, returned Supplied Mask filter to CH 27</td></tr><tr><td><b>Amount:</b></td><td>\$150.00</td></tr><tr><td><b>Component Description:</b></td><td>25% Downpayment</td></tr><tr><td><b>Amount:</b></td><td>\$34,750.00</td></tr></table>	<b>Component Description:</b>	Shipping costs for a CH 27 mask filter with tuning, returned Supplied Mask filter to CH 27	<b>Amount:</b>	\$150.00	<b>Component Description:</b>	25% Downpayment	<b>Amount:</b>	\$34,750.00
<b>Component Description:</b>	Shipping costs for a CH 27 mask filter with tuning, returned Supplied Mask filter to CH 27								
<b>Amount:</b>	\$150.00								
<b>Component Description:</b>	25% Downpayment								
<b>Amount:</b>	\$34,750.00								

Cost  
Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna AL4M-27-E	\$33,030.00	\$31,400.00		\$7,217.97	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, Class A One Station antenna -- basic	\$26,300.00	\$25,000.00	N/A	\$7,217.97	N/A
Sub-total	\$33,030.00	\$31,400.00	N/A	\$7,217.97	N/A
Total for all systems	\$969,510.00	\$937,235.50	N/A	\$86,790.82	N/A

Components

Actual Information	
Description	File Name
Sweep test of existing antenna	Information not provided.

UHF - Lower Power Side Mount, Class A One Station antenna -- basic	<b>Component Description:</b>	Disregard This Submission
		<b>Amount:</b> N/A
	<b>Component Description:</b>	AL4M-27-E Antenna \$6591.75 plus 9.5% (\$626.22) Los Angeles / CA Sales Tax.
		<b>Amount:</b> \$7,217.97
	<b>Component Description:</b>	Antenna & Dehydrator 50% deposit
		<b>Amount:</b> N/A

Cost  
Information

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$4,125.00	\$7,690.50		\$6,853.60	
Flexible Air Transmission Line - dielectric, 1 5 /8"	\$4,125.00	\$7,690.50	The transmission line itself costs less than the pre- determined cost estimate, but the dehydrator and associated hardware adds additional cost. Also the transmission line connector from AAT was an unanticipated cost.	\$6,853.60	The Transmission Line Connector was an unanticipated expense that was purchased during construction.
Sub-total	\$4,125.00	\$7,690.50	N/A	\$6,853.60	N/A
Total for all systems	\$969,510.00	\$937,235.50	N/A	\$86,790.82	N/A

Components

Actual Information Description	File Name
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Flexible Air Transmission  
Line - dielectric, 1 5/8"

**Component Description:**

Transmission Line  
Connector.

**Amount:**

\$836.90

**Component Description:**

Transmission line  
with associated  
hardware &  
dehydrator  
\$6258.99 plus  
9.5% (594.61) Los  
Angeles / CA  
sales tax.

**Amount:**

\$6,853.60

Cost  
Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower LTOWER	\$96,800.00	\$92,000.00		\$1,500.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	\$1,500.00	N/A
Short Tower (less than 500')	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Primary Tower LTOWER	\$84,200.00	\$80,000.00		\$0.00	
Short Tower (less than 500')	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Sub-total	\$181,000.00	\$172,000.00	N/A	\$1,500.00	N/A
Total for all systems	\$969,510.00	\$937,235.50	N/A	\$86,790.82	N/A

Components

Actual Information	
Description	File Name

Structural engineering tower load study for well documented tower	<b>Component Description:</b>		Structural
	<b>Amount:</b>		Analysis
			\$750.00
	<b>Component Description:</b>		Structural
	<b>Amount:</b>		Analysis
			\$750.00
Short Tower (less than 500')	Information not provided.		
Short Tower (less than 500')	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	\$466,440.00	\$443,750.00		\$24,478.20	
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	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	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,750.00	See: S&F FCC Repack Consulting Engineering Proposal. pdf
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,266.45	N/A
Additional Field Engineering Service, 8 Days	<b>\$16,000.00</b>	\$16,000.00	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
Project management of the transition	\$316,000.00	\$300,000.00	N/A	\$20,511.75	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
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$950.00	See: S&F FCC Repack Consulting Engineering Proposal. pdf
<b>Sub-total</b>	\$466,440.00	\$443,750.00	N/A	\$24,478.20	N/A
<b>Total for all systems</b>	\$969,510.00	\$937,235.50	N/A	\$86,790.82	N/A

## Components

Actual Information	
Description	File Name
RF Exposure Measurements	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	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), Construction Permit Application	<p><b>Component Description:</b></p> <p>Preparation of engineering portion of initial FCC Application for Construction Permit for repack facility on Channel 27 for KPOM-CD in Ontario, California. See: S&amp;F FCC Repack Consulting Engineering Proposal.pdf</p> <p><b>Amount:</b></p> <p>\$1,750.00</p>

Prepare and or review reimbursement form	<b>Component Description:</b> Budget review and form prep <b>Amount:</b> \$442.85
	<b>Component Description:</b> Budget Review and Form Prep <b>Amount:</b> \$713.35
	<b>Component Description:</b> Budget Review <b>Amount:</b> \$110.25
Additional Field Engineering Service, 8 Days	Information not provided.
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Project management of the transition	<b>Component Description:</b> Project Management <b>Amount:</b> \$1,582.05
	<b>Component Description:</b> Project Management <b>Amount:</b> \$1,612.35
	<b>Component Description:</b> Technical , Consultation and Planning Services. Technical , Consultation and Planning Services with Sam Hariton (Widelity). Discussed outstanding issues on the FCC 399 form. <b>Amount:</b> \$75.00

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$1,780.90

<b>Component Description:</b>	Technical , Consultation and Planning Services. Three conference calls
<b>Amount:</b>	\$75.00

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$866.25

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$3,571.40

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$1,450.85

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$1,539.80

<b>Component Description:</b>	Technical, Consultation and Planning Services.
<b>Amount:</b>	\$136.50

<b>Component Description:</b>	Technical , Consultation and Planning Services. Attended a Conference at Rohde and Schwartz on 3/6 /2017 concerning the 399 re-pack documentation.
<b>Amount:</b>	\$75.00

<b>Component Description:</b>	Technical, Consultation and Planning Services.
<b>Amount:</b>	\$54.60

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$1,334.05

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$1,947.45

<b>Component Description:</b>	Technical, Consultation and Planning Services.
<b>Amount:</b>	\$54.60

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$1,301.65

<b>Component Description:</b>	Project Management Fees
<b>Amount:</b>	\$684.20

<b>Component Description:</b>	Technical, Consultation and Planning Services.
<b>Amount:</b>	\$54.60

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$1,147.35

<b>Component Description:</b>	Technical, Consultation and Planning Services.
<b>Amount:</b>	\$54.60

<b>Component Description:</b>	Project Management / Planning
<b>Amount:</b>	\$75.00

<b>Component Description:</b>	Project Management Fees
<b>Amount:</b>	\$760.70

<b>Component Description:</b>	Re-pack consulting and updating
<b>Amount:</b>	\$75.00

<b>Component Description:</b>	Project Management Fees
<b>Amount:</b>	\$557.75

	<p><b>Component Description:</b></p> <p>Technical , Consultation and Planning Services. Review and answering technical questions through a telephone conference call for the follow up report for the Re-pack.</p> <p><b>Amount:</b></p> <p>\$75.00</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Perform engineering study for new channel assignment and antenna development	<p><b>Component Description:</b></p> <p>Interference study of repack Channel 27 for KPOM-CD in Ontario, California. See: S&amp;F FCC Repack Consulting Engineering Proposal.pdf</p> <p><b>Amount:</b></p> <p>\$950.00</p> <p><b>Component Description:</b></p> <p>Re-submission of invoice for interference study of repack.</p> <p><b>Amount:</b></p> <p>\$950.00</p>



## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$77,495.00</b>	<b>\$76,895.00</b>		<b>\$11,841.05</b>	
Vehicle Rentals	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$15,000.00</i>	\$15,000.00	N/A	\$3,186.05	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Local Zoning	<i>\$5,000.00</i>	\$5,000.00	N/A	\$0.00	N/A

FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$8,655.00	Disregard COMB KPOM DTVNotification INV-001930. pdf
<b>Sub-total</b>	\$77,495.00	\$76,895.00	N/A	\$11,841.05	N/A
<b>Total for all systems</b>	\$969,510.00	\$937,235.50	N/A	\$86,790.82	N/A

## Components

Actual Information	
Description	File Name
Vehicle Rentals	Information not provided.
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	Information not provided.

Equipment Delivery and Handling Charges	<b>Component Description:</b>		Freight charges for delivery of transmission line and antenna.
	<b>Amount:</b>		\$3,186.05
	<b>Component Description:</b>		Disregard this Submission
	<b>Amount:</b>		N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.		
Non-zoning permits	Information not provided.		
Local Zoning	Information not provided.		
FCC Filing Fees - Form 2100 license to cover application	Information not provided.		
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.		
DTV Medical Facility Notification	<b>Component Description:</b>		DTV Medical Facility Notification. This is the correct submission with attached estimate. Disregard the other one.
	<b>Amount:</b>		\$8,655.00
	<b>Component Description:</b>		DTV Notification Service
	<b>Amount:</b>		\$8,655.00

Cost Information	Grand Total		
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$969,510.00	\$937,235.50	\$86,790.82

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

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> <li>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.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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.

<p>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.</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>Andy Wilcoxson</b>  <i>General Manager</i></p> <p>03/21/2019</p>

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>Andy Wilcoxson</b>  <i>General Manager</i></p> <p>03/21/2019</p>

## Attachments