

Federal Communications Commission

## (REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility ID:	70423	Service: DCA	Call Sign:	WUBX-CD	Channel: 24 (UHF)
File	000002	7573	Sigit.		
Number:					
FRN: <b>00</b> '	14037857	Date	06/10		
		Submitted:	/2021		

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

#### Applicant Information

on	Applicant	Address	Phone	Email	Applicant Type
	<b>L4 MEDIA GROUP, LLC</b> Doing Business As: L4 MEDIA GROUP, LLC	PO Box 60606 Suite 2450 Chicago, IL 60606 United States	+1 (612) 202-4980	ssaldana@sktytrading. com	Limited Liability Company

#### Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

# Preparer Contact Name and Information

Contact Information	Applicant	Address	Phone	Email
	<b>Tim Wolak</b> Director Banded IT Solutions	2425 Bentshire Dr Jacksonville, FL 32246 United States	+1 (312) 213- 7895	twolak@bandeditsolutions. com

Broadcaster	Question	Response
Information and Transition Plan	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	Current transmission system consists of a single transmitter feeding a flexible transmission line which connects to an antenna on the tower. Work includes tower study/rehabilitation to support new antenna, mounting antenna and retuning transmitter.

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

# Primary Existing Transmitter Information

Transmitter	Section	Question	Response
	Existing Transmitter Description	Type of change	Retune Existing
		Use	Primary (Main)
		Ownership	Owned
		Owner	N/A
		Is this transmitter currently shared with another station?	No
		Is this transmitter currently in operating condition?	Yes
	Existing Transmitter	Manufacturer	Elettronika
	Manufacturer and Type	Model	TXUD2000

Year	2015
Туре	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	2.0 kW

#### Primary Transmitter Section

Section	Question	Response
New IOT Tubes	Number of Tubes (including accessories) needed	N/A
New Mask Filter	Power	3 kW
	Other Power	N/A
New Exciter	Is a new exciter needed?	No

# Primary Other Transmitter Costs

•		••	•••	-		,		
T	r	a	n	S	m	۱i	tt	e

ter	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 Other Transmitter Cost Not Listed

Transmitter Information not provided.

Antennas Section		Question	Response
Antenna Rela	ated Expenses	Do you have antenna related expenses?	Yes

Primary	Existing Antenna Information			
Antenna	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	Class	Class A	
	Manufacturer and Type	Mounting	Side Mount	
		Antenna position in stack	Not in Stack	
		Polarization	Horizontal	
		Туре	Other	
		Number of Stations Supported	N/A	
		Number of Panels	N/A	
		Design power capacity in use	N/A	
		Lower Limit	N/A	
		Upper Limit	N/A	
		Other Antenna Type	UHF-TV LOG- PERIODIC ANTENNA	

ERP: (Effective Radiated Power)	6.5 kW
Manufacturer	
Model	CL-1469B
Year	2015

Primary	New Antenna Costs			
Antenna	Section	Question	Response	
	New Antenna Description	Use	Primary (Main)	
		Description of Use	N/A	
		Change Type	Purchase New	
		Is this a request for upgraded equipment?	No	
		Ownership	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	
	New Antenna	Class	Class A	
	Manufacturer and Types	Mounting	Side Mount	
		Antenna position in stack	Not in Stack	
		Polarization	Horizontal	
		Туре	Broadband Panel	
		Number of Stations Supported	1	
		Number of Panels/Bays	1	
		Lower Limit	470.00 MHz	
		Upper Limit	860.00 MHz	
		Design power capacity in use	100.0 %	
		Other Antenna Type	N/A	
		ERP: (Effective Radiated Power)	5.52 kW	
		Manufacturer		
			1	

Model	TUA-C1-01 /01M-T
Year	2017
Justification for New Antenna	Applicant is proposing to replace the current antenna with one that has a similar pattern and will work or the repack channel.

# Primary Other Antenna Costs

Antenna

Section	Question	Response
Combiner for Shared 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	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No

Sweep	Test
-------	------

# Primary Other Antenna Cost Not Listed

Antenna Information not provided.

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

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

Primary	Existing Tower			
Tower Se	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?	Unknown	
		Is tower compliant with Rev G?	Unknown	
	Existing Tower Structure	Do you have a tower registration number?	Yes	
Registration Coordinates ( <u>NAD83</u> ( North American Datum of 1983))	Registration	ASR Number	1007971	
	North American Datum of	Latitude (NAD83)	36° 03' 55.1" N-	
	1983))	Longitude (NAD83)	078° 53' 24.0" W-	

Overall Structure Height	320.86 feet
Support Structure Height	299.87 feet
Ground Elevation Above Mean Sea Level (AMSL)	391.07 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Pinnacle Towers LLC
Date Constructed	03/01/1985

## Other Types of Users

Users

Cellular

## Primary Tower Section Qu

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for undocumented /poorly documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

## Primary Tower Section

ver	Section	Question	Response
	Tower Rigging Costs	Complex Tower	N/A

## Other Tower Expenses Not Listed Primary Tower

Information not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	200
		Explanation	Applicant has no internal resources capable of overseeing, identifying, purchasing, installing and commissioning this repack project. It will rely solely on outside services to manage all work required.
	Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
		Prepare engineering section of Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare engineering section of Form FCC License to Cover Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare request for Special Temporary Authority	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 Services	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	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

# Outside Other Professional Services Expenses Not Listed

Professional	Services Costs	Description	
	MSW reports	MSW technical services to prepare FCC post-repack reports.	
	Progress Reporting	Prepare and file 10 required progress reports on FCC Form 2100, Schedule 387 on a quarterly basis with the FCC.	
	Fletcher, Heald and Hildreth	FCC Attorney fees for repack, planning and filling	

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

# Other Expenses Not Listed

**Expenses** Information not provided.

## Transmitters

### Cost Information

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 TXUD2000	\$109,355.00	\$19,340.00		\$19,340.00	
UHF and VHF - minor banding issues	\$105,200.00	\$15,000.00	N/A	\$15,000.00	N/A
3 kW mask filter	\$4,155.00	\$4,340.00	THE INITIAL ESTIMATE WAS OUTDATED	\$4,340.00	THE INITIAL ESTIMATE WAS OUT DATED
Sub-total	\$109,355.00	\$19,340.00	N/A	\$19,340.00	N/A
Total for all systems	\$603,830.00	\$420,100.75	N/A	\$117,641.37	N/A

Actual Information Description	File Name	
UHF and VHF - minor banding issues	Component Description: Amount:	transmitter retune service \$15,000.00

3 kW mask filter		
	<b>Component Description:</b>	DELTA DTV
		FILTER Part #
		1604-8-2N UHF 8
		cavities, Power
		2.7 KW RMS full
		service mask
		filter
	Amount:	\$4,340.00

#### Antennas

### Cost Information

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 TUA-C1-01 /01M-T	\$34,290.00	\$30,700.00		\$4,500.00	
Sweep test of existing antenna	\$6,730.00	\$4,500.00	N/A	\$4,500.00	N/A
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$25,000.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, Class A broadband panel (cost per panel)	\$1,260.00	\$1,200.00	N/A	N/A	N/A
Sub-total	\$34,290.00	\$30,700.00	N/A	\$4,500.00	N/A
Total for all systems	\$603,830.00	\$420,100.75	N/A	\$117,641.37	N/A

Actual Information	
Description	File Name

Sweep test of existing antenna	Component Description: Amount:	SWEEP TEST \$4,500.00
UHF - Lower Power Side Mount, Class A One Station antenna basic	Information not provided.	
UHF - Lower Power Side Mount, Class A broadband panel (cost per panel)	Information not provided.	

# Cost Transmission Line

**Information** Information not provided.

#### Tower Equipment and Rigging Costs

#### Cost Information

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 Justification
Primary Tower TOWER	\$268,500.00	\$238,000.00		\$5,700.00	
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,000.00	N/A	\$5,700.00	N/A
Short Tower (less than 500')	\$84,200.00	\$63,000.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Sub-total	\$268,500.00	\$238,000.00	N/A	\$5,700.00	N/A
Total for all systems	\$603,830.00	\$420,100.75	N/A	\$117,641.37	N/A

Actual Information	
Description	File Name

Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	Component Description: Amount:	PERMIT APPLICATION AND CONSTRUCTION DOCS \$5,700.00
	Component Description: Amount:	ATC application fee \$4,920.00
	Component Description: Amount:	Structural engineering, prorated portion \$1,500.00
Short Tower (less than 500')	Information not provided.	
Minor tower reinforcement /modifications	Information not provided.	

### **Outside Professional Services**

### Cost Information

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	\$164,800.00	\$110,553.75		\$81,594.37	
Fletcher, Heald and Hildreth	\$5,000.00	\$5,000.00	N/A	\$3,257.07	N/A
Progress Reporting	\$20,000.00	\$20,000.00	Prepare and file 10 required progress reports on FCC Form 2100, Schedule 387 on a quarterly basis with the FCC.	\$1,192.50	N/A
MSW reports	\$1,650.00	\$1,650.00	N/A	\$861.25	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$30,000.00	See attached QUOTE 598, WUBX L4, 030120 REPACK FIELD TESTING	\$30,000.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	\$582.30	N/A

Prepare and File FCC Form					
2100 (main),					
Construction					
Permit					
Application					
Prepare	\$1,580.00	\$1,500.00	N/A	N/A	N/A
engineering					
section of FCC					
Form 2100					
(main), License					
to Cover					
Application					
Perform	\$7,360.00	\$9,473.75	Due to	\$9,473.75	Conduc
engineering			tower		Study for
study for new			loading and		Alternati
channel			congestion		Antenn
assignment			concerns		also, due
and antenna			we had to		tower
development			consider		congesti
			alternative		and load
			antennas		concerr
			and		Conduc
			mounting		Study
			heights which		Prepare a File FC
			necessitated		CP
			additional		Modificat
			studies.		of
			Studies.		Construc
					Permit fc
					2100 fc
					change
					antenn
					height c
					tower fo
					WUBX-0
Prepare and or	\$2,630.00	\$2,500.00	N/A	N/A	N/A
review					
reimbursement					

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,180.00	ACTUAL SERVICES EXCEEDED ESTIMATE	\$3,180.00	The original estimate was based on the FCC menu, and missed the actual labor required to complete the task by \$180
Project management of the transition	\$31,600.00	\$30,000.00	N/A	\$30,000.00	N/A
Sub-total	\$164,800.00	\$110,553.75	N/A	\$81,594.37	N/A
Total for all systems	\$603,830.00	\$420,100.75	N/A	\$117,641.37	N/A

Actual Information Description	File Name	
Fletcher, Heald and Hildreth	Component Description: Amount:	FCC Attorney Fees \$100.00
	Component Description: Amount:	FCC Attorney Fees \$333.33
	Component Description: Amount:	FCC Attorney Fees \$214.58
	Component Description: Amount:	FCC Attorney Fees \$120.83
	Component Description: Amount:	FCC Attorney Fees \$250.00

Component Description:	FCC Attorney Fees
Amount:	\$125.00
Component Description: Amount:	corrected which stations were invoiced and corrected requested amounts. \$116.45
Component Description: Amount:	corrected which stations were invoiced and corrected requested amounts. \$66.67
Component Description:	FCC Attorney Fees
Amount:	\$92.71
Component Description:	FCC Attorney Fees
Amount:	\$208.33
Component Description:	FCC Attorney Fees
Amount:	\$712.50
Component Description:	FCC Attorney Fees
Amount:	\$406.25
Component Description:	FCC Attorney Fees
Amount:	\$68.75
Component Description:	FCC Attorney Fees
Amount:	\$62.50

	Component Description: Amount:	FCC Attorney Fees \$395.83
	Component Description: Amount:	FCC Attorney Fees \$20.83
	Component Description: Amount:	FCC Attorney Fees \$51.04
	Component Description: Amount:	FCC Attorney Fees \$329.17
	Component Description: Amount:	FCC Attorney Fees \$204.17
	Component Description: Amount:	FCC Attorney Fees \$187.50
	Component Description: Amount:	FCC Attorney Fees \$62.50
	Component Description: Amount:	FCC Attorney Fees \$393.75
Progress Reporting	Component Description:	Prepare FCC Form
		387 Repack Progress Report Filing. WUBX-CD
	Amount:	\$1,192.50

MSW reports		
	Component Description:	Technical services to prepare and file forms 399,387 and temporary authority
	Amount:	application. \$861.25
Comprehensive coverage verification via field study, if needed	Component Description: Amount:	FIELD TESTING \$30,000.00
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Component Description: Amount:	Attorney fees \$582.30
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description:	WUBX-CD Durham NC Prepare initial budgets, equipment list, and determine equipment replacements for new repack channel; Prepare FCC Form 2100 Schedule 399 Budget and Narrative for filing i initial CP Filing Window. 11.5 hour \$3,047.50
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		

Component Description:	Conduct Study for Alternative Antenna; Prepare and File FCC Modification of Construction Permit form 2100; Prepare TPO & Tech Summary Calculations for WUBX-CD Durham, NC \$1,192.50
Component Description:	Conduct Study, Prepare and File FCC CP Modification of Construction Permit form 2100 for change in antenna height on tower for WUBX-CD \$1,258.75
Component Description:	WUBX-CD Durham, NC Develop azimuth antenna pattern and determine antenna required for FCC Form 2100 Construction Permit Application for initial Repack Channel CP filing. 6.75 hours \$1.00
Component Description: Amount:	- Analyze potential early transition for WUBX-CD \$662.50

	Component Description:	WUBX-CD Durham, NC Conduct TVStudy analysis of initial channel assignment and analyze interference issues with new repack channel assignment. 17.25 hours \$6,360.00
Prepare and or review reimbursement form	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:	WUBX-CD Durham, NC Prepare technical portions of FCC Form 2100 Construction Permit Application and Engineering Exhibits required to be filed with initial repack Construction Permit Application - filing window. 12.0 hours \$3,180.00
Project management of the transition	Component Description: Amount:	Project Management services, research and coordination w /rf engineering, equipment vendors and site owners \$1,500.00

Component Description: Amount:	Project Management services, planning and coordination \$1,500.00
Component Description: Amount:	PROJECT MANAGEMENT SERVICES \$3,750.00
Component Description: Amount:	PROJECT MANAGEMENT \$2,250.00
Component Description: Amount:	PROJECT MANAGEMENT SERVICES \$3,000.00
Component Description:	Project management, lease modification and installation planning
Amount:	\$750.00
Component Description: Amount:	PROJECT MANAGEMENT SERVICES \$3,000.00
Component Description: Amount:	PROJECT MANAGEMENT \$3,750.00
Component Description: Amount:	PROJECT MANAGEMENT \$3,000.00

Component Description: Amount:	Project Management services, research and coordination w /rf engineering, equipment vendors and site owners \$1,500.00
Component Description:	Project Management services, research and coordination w /rf engineering, equipment vendors and site owners \$2,250.00
Component Description:	REPACK PROJECT MANAGEMENT SERVICES. RESEARCH AND COORDINATION W /RF ENGINEERING, ATTORNEY, EQUIPMENT VENDORS AND SITE OWNER \$1,500.00
Component Description:	Project Management services, research and coordination w /rf engineering, equipment vendors and site owners
Amount:	\$2,250.00

### **Other Expenses**

### Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$26,885.00	\$21,507.00		\$6,507.00	
Develop and air announcement of upcoming channel change	\$2,500.00	\$2,500.00	It is required that the applicant give notification to viewers of the repack channel change. Applicant has limited internal resources to create and produce such notifications and will most likely have to obtain the services from an outside vendor.	N/A	N/A
Equipment Storage	\$2,500.00	\$2,500.00	Applicant may receive antenna and transmitter parts prior to set installation dates. There is no on-site storage available and applicant may be forced to use outside temporary storage facilities.	N/A	N/A

Equipment Delivery and Handling Charges	\$5,000.00	\$5,000.00	It is possible other unknown expenses may arise that are not identified on this budget submission. The amount proposed is less than 3% of the total project cost to cover such	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$1,000.00	\$1,000.00	contingencies. Applicant will be required to dispose of the current pre- repack antenna and parts that were replaced for transmitter retuning. The exact costs are not known at this time.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$6,172.00	The original estimate was outdated	\$6,172.00	The initi estimate was outdate
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	FCC APPARENTLY INCREASED THE PRICE	\$335.00	N/A

Sub-total	\$26,885.00	\$21,507.00	to perform the tower work required. It is felt this estimate should cover the associated costs for any required permits.	\$6,507.00	N/A
permits			unknown what the city or county may levy on applicant in terms of a building permit		
Non-zoning	\$2,000.00	\$2,000.00	unknown what the local zoning authority or city /county may levy on applicant to perform the tower work required. It is felt this estimate should cover the associated costs for any required permits.	N/A	N/A

## Components

Actual Information	
Description	File Name

Develop and air announcement of upcoming channel change	Information not provided.	
Equipment Storage	Information not provided.	
Equipment Delivery and Handling Charges	Information not provided.	
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
DTV Medical Facility Notification	Component Description: Amount:	DTV Notification Service: Notification of Medical Facilities Transmitter Medical Facility Notification per proposal \$6,172.00
FCC Filing Fees - Form 2100 license to cover application	Component Description: Amount:	license fee \$335.00
Local Zoning	Information not provided.	
Non-zoning permits	Information not provided.	

Cost	Grand Total				
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost	
	Total for all systems	\$603,830.00	\$420,100.75	\$117,641.37	

Reimbursem	envestiatus	Response
	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 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.	
		<ol> <li>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>The above-named</li> </ol>	
		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).
- 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 above- named applicant for the Authorization(s)	Tim Wolak Director
specified above.	06/10/202

\_\_\_\_

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 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).	
		<ol> <li>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> </ol>	
		2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.	
		3. 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.

<ul> <li>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</li> <li>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</li> </ul>	
payments herein requested. I declare, under penalty of perjury, that I am an authorized representative of the above-	<b>Tim Wolak</b> Director
named applicant for the Authorization(s) specified above.	06/10/2021

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> <li>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>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>	
	Submission of Final Allocation or Accounting	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.         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.         2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay

6	5. 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.	
5	5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.	
4	I. 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.	
	<ul> <li>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.</li> </ul>	