

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 16930 Service: DCA Call KLEG-CD Channel: 28 (UHF)

ID: Sign:

ID: File

0000028712

Number:

FRN: **0024646523** Date **10/08**

Submitted: /2021

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|--|--------------------------|--------------------------|---------------------------------|
| DV BROADCASTING, LLC Doing Business As: DV BROADCASTING, LLC | Deepak Viswanath 1200 COMMERCE DRIVE SUITE 120-A PLANO, TX 75093 United States | +1 (212) 786- 2365 | deepakv@dallas44. com | Limited Liability 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 |
|--|---------|-------|-------|
| The Preparer is same as the reimbursement contact. | | | |

Broadcaster Information and Transition Plan

| Question | Response |
|--|---------------------------------------|
| Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information. | No |
| Briefly describe transition plan | See attached transition plan summary. |

Transmitters

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

Primary Transmitter

Existing Transmitter Information

| Section | Question | Response |
|----------------------------------|--|-------------------|
| Existing Transmitter Description | Type of change | Purchase New |
| | Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this transmitter currently shared with another station? | No |
| | Is this transmitter currently in operating condition? | Yes |
| Existing Transmitter | Manufacturer | |
| Manufacturer and Type | Model | n/a |
| | Year | 2000 |
| | Туре | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 1.5 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 | EC703HP- BB |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 2.5 kW |
| | Justification for New Transmitter | See narrative. |

Primary Transmitter

Other Transmitter Costs

| Question | Response |
|--|---|
| Service Entrance (3 phases 800A 208V) | Yes |
| Switchgear (industrial 800 amp) | Yes |
| Transformer (480V) | No |
| Power | N/A |
| Rigid Conduit and Wiring | Yes |
| Size | 2 inches |
| Length | 75.0 feet |
| Other Electrical Service | No |
| Description | N/A |
| Does the replacement transmitter require HVAC Service? | No |
| | Switchgear (industrial 800 amp) Transformer (480V) Power Rigid Conduit and Wiring Size Length Other Electrical Service Description Does the replacement transmitter require |

| | 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

Transmitter Information not provided.

Antennas

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

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? | No |
| | 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 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) | 15.0 kW |

| Manufacturer | |
|--------------|----------|
| Model | PSILP8OI |
| Year | 2011 |

New Antenna Costs

| Section | Question | Response |
|-------------------------|--|--------------------|
| New Antenna Description | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | Yes |
| | Ownership | Owned |
| | Owner | N/A |
| | Is antenna shared? | No |
| | Is antenna directional? | No |
| | 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 | Elliptical |
| | Туре | 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) | 15.0 kW |
| | Manufacturer | |
| | | |

| Model | PSILP8OI- 28 |
|-------------------------------|---|
| Year | 2017 |
| Justification for New Antenna | Existing coaxial slot antenna is not designed to operate on repacked channel. |

Other Antenna Costs

| 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 | Do you require the sweep testing of transmission line and antenna? | Yes |

Other Antenna Cost Not Listed

Information not provided.

| Transmission ^{Seffien} | Question | Response |
|------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

Primary Transmission Line

Existing Transmission Line

| on Line Section | Question | Response |
|--|--|--|
| Existing Transmission Line Description | Type of change | Purchase New Primary (Main) N/A Owned N/A N/A No Yes Flexible Foam |
| | Use | 1 |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing transmission line shared with another station or stations? | N/A N/A No Yes Flexible |
| | Is Transmission Line in operating condition? | Yes |
| Existing Transmission | Manufacturer | New Primary (Main) N/A Owned N/A N/A No Yes Flexible Foam Other 2 1/4 inches N/A N/A 1 55 feet per |
| Line Manufacturer and Type | Туре | |
| | Diameter | Other |
| | Other Diameter | |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 55 feet per run |

Primary New Transmission Line

| Primary | |
|-------------------|--|
| Transmission Line | |

| Section | Question | Response |
|--------------------------------|---|---|
| New Transmission Line Costs | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Туре | Flexible Foam |
| | Diameter | 1 5/8 inches |
| | Other Diameter | N/A |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 100 feet per run |
| | Justification for New Transmission Line | New site requires additional line. It is less expensive and higher reliability to buy new versus move existing and acquire additional amount. |

Other Transmission Line Expenses Not Listed

Primary
Transmission of 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

Existing Tower

| Section | Question | Response |
|------------------------------------|---|----------------------------|
| Existing | Type of change | Move Equipment |
| Tower Description | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Leased |
| | Is this tower consider Complex? | No |
| | Is this tower currently shared with any other stations? | No |
| | One or more FM, AM or TV radio broadcaster(s) | N/A |
| | Others Types of Users | N/A |
| | Is tower documented for structural analysis? | No |
| | Is tower compliant with Rev G? | Unknown |
| Existing | Do you have a tower registration number? | Yes |
| Tower Structure Registration | ASR Number | 1064625 |
| Coordinates (| Latitude (NAD83) | 32° 46′ 48.0″ N- |
| NAD83 (North | Longitude (NAD83) | 096° 48' 14.0" W- |
| American Datum of | Overall Structure Height | 941.59 feet |
| 1983)) | Support Structure Height | 921.90 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 426.50 feet |
| | Structure Type | BPIPE - Building with Pipe |

| Tower Owner | TELECOMMUINICATION PROPERTIES INC |
|------------------|-----------------------------------|
| Date Constructed | 03/01/1985 |

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.

Outside Professional

| Section | Question | Response |
|--|--|---|
| I Services Costs Outside Project Management Services | Do you require outside project management services? | No |
| | Number of Hours | N/A |
| | Explanation | N/A |
| Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | Yes |
| | Prepare engineering section of Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare engineering section of Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | Yes Yes 2 |
| | Quantity | 2 |
| | Do you have Distributed Transmission System engineering services? | Yes Yes No Yes Yes |
| | Critical Facility | N/A |
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting | Prepare and file Form FCC Construction Permit Application | No N/A N/A Yes Yes No Yes Yes Ano Yes Yes No Yes Yes No Yes Yes Ano Yes Yes |
| Services | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |

| | Prepare request for Special Temporary Authority | Yes |
|----------------------------------|--|-----|
| | Quantity | 2 |
| | 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 | Yes |
| 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 Professional

Other Professional Services Expenses Not Listed

| I Services Costs | Description |
|------------------------|---|
| Coverage Verification | Comprehensive Coverage Verification - Antenna Pattern Verification via unmanned aerial vehicle (UAV). |
| Engineering evaluation | Engineering Scope of work definition and evaluation of results. |

Other Expenses

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

Other Expenses Not Listed

Expenses Information not provided.

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 EC703HP-BB | \$180,550.00 | \$188,150.00 | | \$105,241.76 | |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$126,000.00 | \$135,000.00 | N/A | \$105,241.76 | N/A |
| Service entrance 3 phase/800 amp/208 volt | \$14,400.00 | \$14,050.00 | N/A | N/A | N/A |
| Switchgear - industrial 800 amp | \$38,200.00 | \$37,150.00 | N/A | N/A | N/A |
| 2" Rigid Conduit and Wiring (Cost per foot) | \$1,950.00 | \$1,950.00 | N/A | N/A | N/A |
| Sub-total | \$180,550.00 | \$188,150.00 | N/A | \$105,241.76 | N/A |
| Total for all systems | \$628,042.00 | \$620,717.00 | N/A | \$204,359.98 | N/A |

Components

| Actual Information | | |
|---------------------------|-----------|--|
| Description | File Name | |

| UHF - Air Cooled Solid State | | |
|---|---------------------------|----------------------|
| Transmitter 1 - 2.5 kW | Component Description: | This is a request |
| | | for PARTIAL PAY. |
| | | The submission |
| | | includes an |
| | | explanatory cover |
| | | letter, the original |
| | | proposal & the |
| | | invoice plus |
| | | photos showing |
| | | the transmitter |
| | | installation. |
| | Amount: | \$103,076.76 |
| | Component Description: | Transmitter |
| | | storage and |
| | | disposal |
| | Amount: | \$2,165.00 |
| | Component Description: | Transmitter plus |
| | | auxiliary and |
| | | encoding |
| | | solutions. |
| | Amount: | \$131,160.00 |
| Service entrance 3 phase /800 amp/208 volt | Information not provided. | |
| Switchgear - industrial 800 amp | Information not provided. | |
| 2" Rigid Conduit and Wiring (Cost per foot) | Information not provided. | |

Cost Information

Antennas

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|------------------------------------|--------------|------------------------------|
| Primary Antenna PSILP8OI-28 | \$33,030.00 | \$32,000.00 | | \$17,795.72 | |
| 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 | \$25,600.00 | N/A | \$17,795.72 | N/A |
| Sub-total | \$33,030.00 | \$32,000.00 | N/A | \$17,795.72 | N/A |
| Total for all systems | \$628,042.00 | \$620,717.00 | N/A | \$204,359.98 | 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

Component Description: Cover letter with

quotes and paid

invoice.

Amount: \$17,795.72

Component Description: REVISED -

Complete balance due

before shipping.

Amount: \$17,795.72

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 | \$2,400.00 | \$2,300.00 | | \$0.00 | |
| Flexible Foam Transmission Line - dielectric, 1 5 /8" | \$2,400.00 | \$2,300.00 | N/A | N/A | N/A |
| Sub-total | \$2,400.00 | \$2,300.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$628,042.00 | \$620,717.00 | N/A | \$204,359.98 | N/A |

Components

Information not provided.

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 BPIPE | \$210,500.00 | \$200,000.00 | | \$24,996.00 | |
| Tall Tower (greater than 500') | \$210,500.00 | \$200,000.00 | N/A | \$24,996.00 | N/A |
| Sub-total | \$210,500.00 | \$200,000.00 | N/A | \$24,996.00 | N/A |
| Total for all systems | \$628,042.00 | \$620,717.00 | N/A | \$204,359.98 | N/A |

Components

| Actual Information | | |
|---------------------------|-----------|--|
| Description | File Name | |

| Tall Tower | (greater | than | 500" | ١ |
|--------------|----------|-------|------|---|
| I all I OWEI | (greater | ulali | 500 | , |

Component Description: Estimate and

Invoice attached

in ONE document.

Accept delivery of antenna and transport to 72nd floor; Remove existing antenna and bring to lobby and transport off-

site.

Amount: \$1,749.98

Component Description: Site work &

installation of tower & antenna

Amount: \$15,746.03

Component Description: Accept delivery of

transmitter &
move to 72nd
floor; Remove old
antenna and
transport off-site.
Estimate &

invoice attached in ONE document.

Amount: \$7,499.99

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 | \$174,872.00 | \$172,182.00 | | \$55,991.50 | |
| Engineering evaluation | \$10,500.00 | \$10,500.00 | Engineering assistance to define scope of work, detailed tasks, and evaluation of results. | \$5,400.00 | N/A |
| Coverage Verification | \$43,732.00 | \$43,732.00 | Comprehensive Coverage Verification - Antenna Pattern Verification via unmanned aerial vehicle (UAV). Per attached QComm quote and invoice | \$43,732.00 | 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 request for Special Temporary Authorization | \$4,100.00 | \$3,000.00 | N/A | N/A | N/A |
|--|------------|------------|-----|------------|--|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | N/A | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$1,837.50 | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | \$2,625.00 | Additional engineering work was required to research, negotiate and enter into an interference agreement with another repack station in the market |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$2,001.00 | N/A |

| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$84,200.00 | Coverage verification | N/A | N/A |
|--|--------------|--------------|--------------------------|--------------|-----|
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$7,360.00 | \$7,000.00 | N/A | \$396.00 | N/A |
| Sub-total | \$174,872.00 | \$172,182.00 | N/A | \$55,991.50 | N/A |
| Total for all systems | \$628,042.00 | \$620,717.00 | N/A | \$204,359.98 | N/A |

Components

| Actual Information Description | File Name | |
|--------------------------------|---------------------------------|---|
| Engineering evaluation | | |
| | Component Description: | Engineering assistance for coverage verification scope, detailed task definition, and results evaluation. |
| | Amount: | \$5,400.00 |
| | Component Description: | Final quote and invoice regarding changes to scope of work and remaining results analysis for KLEG. |
| | Amount: | \$5,100.00 |
| Coverage Verification | | |
| | Component Description: Amount: | CV - QComm - INV 341049 \$43,732.00 |
| | Amount. | ψ 1 3,7 32.00 |

| 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 request for Special Temporary Authorization | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Information not provided. | |
| Perform engineering study for new channel assignment and antenna | Component Description: | Engineering services for repack |
| development | | construction permit application |
| development | Amount: | • |
| development | Amount: Component Description: | application |

Address transition timing and coordination issues w/ other stations and wireless

Component Description: COVER LETTER

INCLUDED.

Engineering repack

services for interference agreement

between 2 stations

Amount: \$1,575.00

Component Description: Engineering portion

of interference agreement re transition to new

channel

Amount: \$1,050.00

| Prepare and or review reimbursement form | Component Description: | See cover letter - This is the amount of the invoice attributable to the preparation and revision of the FCC Form 399 |
|--|---|---|
| | Amount: | \$954.00 |
| | Component Description: | Services related to preparing Form 399 |
| | Amount: | \$525.00 |
| | Component Description: | Legal services for Forms 399 & 1876. Reimbursement is NOT sought for the 10/23/2017 entry for \$180.00 |
| | Amount: | \$324.00 |
| | Component Description: | Services related to obtaining reimbursement through preparation of FCC Form 399 |
| | Amount: | \$522.00 |
| | | |
| Comprehensive coverage verification via field study, if needed | Information not provided. | |
| verification via field study, | Information not provided. Component Description: | See cover letter - This is the amount of the invoice related to this line |

Cost Information

Other Expenses

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|------------------------------------|-------------|------------------------------|
| Other Expenses | \$26,690.00 | \$26,085.00 | | \$335.00 | |
| MVPD Notification of Channel Change | \$2,500.00 | \$2,500.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$2,500.00 | \$2,500.00 | N/A | N/A | N/A |
| Equipment Storage | \$1,000.00 | \$1,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | \$5,000.00 | \$5,000.00 | N/A | \$0.00 | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$2,000.00 | \$2,000.00 | N/A | N/A | N/A |
| Local Zoning | \$500.00 | \$500.00 | N/A | N/A | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |

| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | \$335.00 | FCC Fee increased from \$325 to \$335 when licensee filed the application |
|--|--------------|--------------|-----|--------------|---|
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | 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 |
| Sub-total | \$26,690.00 | \$26,085.00 | N/A | \$335.00 | N/A |
| Total for all systems | \$628,042.00 | \$620,717.00 | N/A | \$204,359.98 | N/A |

Components

| Actual Information Description | File Name | |
|--|---------------------------------|--|
| 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 | Component Description: Amount: | Accept delivery & install new transmitter & remove & dispose of old transmitter \$4,746.23 |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. | |

| Local Zoning | Information not provided. | |
|---|---------------------------------|---|
| FCC Filing Fees - Special Temporary Authorization request | Information not provided. | |
| FCC Filing Fees - Form 2100 license to cover application | Component Description: Amount: | FCC Form 159 to show payment of License Application Fee of \$335.00 \$335.00 |
| DTV Medical Facility Notification | Information not provided. | |
| FCC Filing Fees - Form 2100 minor change CP application | Information not provided. | |

Cost Information

Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|-----------------------|--------------------------------|----------------|--------------|
| Total for all systems | \$628,042.00 | \$620,717.00 | \$204,359.98 |

| Reimbursem | entestiatus | 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. | Yes |

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. DEEPAK VISWANATH MEMBER

10/08/2021

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.

- 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 abovenamed 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 any amount.

- 3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
- 4. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 6. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. DEEPAK VISWANATH MEMBER

10/08/2021

Attachments