



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **29547** | Service: **DCA** | Call **WSBS-CD** | Channel: **19 (UHF)** |  
ID:  
File **0000028488**  
Number:  
FRN: **0014275069** | Date **06/28**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>WSBS LICENSING, INC.</b>	Spanish Broadcasting System, Inc. 7007 NW 77TH AVE. MIAMI, FL 33166 United States	+1 (305) 441-6901	licensemanagement@sbscorporate.com	Corporation

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Sara L. Hinkle , Esq .</b> <i>Lerman Senter PLLC</i>	Sara L. Hinkle 2001 L St NW Suite 400 Washington, DC 20036 United States	+1 (202) 416-1082	shinkle@lermansenter.com

**Broadcaster  
Information  
and  
Transition  
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	WSBS-CD will be re-tuning its main transmitter and replacing the mask filter. An auxiliary transmitter will need to be replaced and a new antenna and line will be required to meet repack assignments and timelines.

**Transmitters**

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

**Primary  
Transmitter****Existing Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	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 and Type	Manufacturer	Harris
	Model	UAX2500AT

Year	2010
Type	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	2.5 kW

**Primary  
Transmitter**

**Retuning Transmitter Costs**

Section	Question	Response
<b>New IOT Tubes</b>	Number of Tubes (including accessories) needed	N/A
<b>New Mask Filter</b>	Power	3 kW
	Other Power	N/A
<b>New Exciter</b>	Is a new exciter needed?	Yes
	Exciter Type	Dual exciter with changeover

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	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

<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	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**

Name		Description
<b>Installation</b>		Installation and tuning charges to install new exciters and re-tune transmitter to CH 19

**Auxiliary  
Transmitter****Add Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Back-Up Transmitter
	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	SSTVU- 5000
	Year	1996
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	5 kW

**Auxiliary  
Transmitter****New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	UAXTE- 2R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.2 kW
	Justification for New Transmitter	Current Auxiliary transmitter will not tune to new CH 19 assignment.

**Auxiliary  
Transmitter****Other Transmitter Costs**

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No

	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	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

**Auxiliary  
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?	Yes
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) .....	15.0 kW

Manufacturer	
Model	ALP16L4- CDP50
Year	2007

---

Primary  
Antenna

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?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Class A
	Mounting	Top 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) .....	7.98 kW
	Manufacturer	

Model	TFU-10GTH TFU
Year	2018
Justification for New Antenna	Current Antenna is not capable of broadcasting on channel 19.

## 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?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	3 1/8 inches inches
<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 Air
	Diameter	4 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	800 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	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1000 feet per run
	Justification for New Transmission Line	Current line need for continued operation on existing channel. New Line will allow for testing and turn-up of Ch19 according to repack timelines.

**Primary**  
**Transmission Line**

**Other Transmission Line Expenses Not Listed**

Name	Description
<b>Building Penetration</b>	Costs for building penetration and re-sealing.





**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 Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	Candelabra
	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?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1224225
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	25° 59' 10.0" N-
	Longitude (NAD83)	080° 11' 36.3" W-
	Overall Structure Height	1019.02 feet
	Support Structure Height	942.90 feet
	Ground Elevation Above Mean Sea Level (AMSL)	11.15 feet

	Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
	Tower Owner	American Towers, LLC.
	Date Constructed	10/12/2001

**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
51349	WBEC-TV	DTV
48608	WPXM-TV	DTV
11965	WBGG-FM	FM
63154	WTVJ	DTV
4366	WURH-CD	DTV
60536	WAMI-DT	DTV
67193	WMIB	FM
51978	WMIA-FM	FM
51979	WZTU	FM
41381	WHYI-FM	FM
64971	WSCV	DTV
29567	WSFS	FM

**Primary  
Tower**

**Tower Modification Costs**

Section	Question	Response
---------	----------	----------

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

**Primary Tower**

**Tower Rigging Costs**

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

**Primary Tower**

**Other Tower Expenses Not Listed**

Name	Description
<b>Ground and Building Drawing Package</b>	Generation of permitting drawing package.
<b>Tower Modification Project Manager</b>	Tower Modification Project Management.
<b>Tower Permit Drawing Package</b>	Generation of permitting drawing package.

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	100
	Explanation	Project management fee for pre-construction services (including initial antenna placement and RF compatibility review, zoning and permitting requirements review; leasing application services) to support the transition of (1) broadcasters.
<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	No

	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Transition Coordination	Coordination and transition planning with all parties onsite and management of the timelines and schedules occurring during the repack.
Site Meetings	Coordination and transition planning with all parties onsite and management of the timelines and schedules occurring during the repack.

## 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	No
	FCC License to Cover Application	No
	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?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	Does this relocation require MVPD Notification of a Channel Change?	No



**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
Professional Labor	Labor to re-plumb existing RF switch and dummy load to accommodate new line and transmitter.

## 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
<b>Primary Transmitter UAX2500AT</b>	<b>\$176,705.00</b>	<b>\$79,400.00</b>		<b>\$0.00</b>	
Installation	<i>\$20,000.00</i>	\$20,000.00	Installation, configuration, and re-tuning of existing transmitter.	N/A	N/A
Dual exciter system with change over	\$47,350.00	\$45,000.00	N/A	N/A	N/A
3 kW mask filter	\$4,155.00	\$4,400.00	Due to physical location within rack additional hardware needed for correct installation.	N/A	N/A
UHF and VHF - minor banding issues	\$105,200.00	\$10,000.00	N/A	N/A	N/A
<b>Auxiliary Transmitter UAXTE-2R37</b>	<b>\$126,000.00</b>	<b>\$86,000.00</b>		<b>\$0.00</b>	

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$86,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$302,705.00	\$165,400.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,333,229.00	\$1,018,304.00	N/A	\$13,496.49	N/A

## Components

Information not provided.

Cost  
Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna TFU-10GTH TFU	\$146,434.00	\$145,904.00		\$0.00	
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power, Top Mount, Class A, basic slot antenna, 8 kW input, directional,, elliptically or circularly polarized	<i>\$132,104.00</i>	\$132,104.00	\$17,000 additional cost for V- Pol antenna.	N/A	N/A
Sub-total	\$146,434.00	\$145,904.00	N/A	\$0.00	N/A
Total for all systems	\$1,333,229.00	\$1,018,304.00	N/A	\$13,496.49	N/A

Components

Information not provided.

Cost  
Information

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$63,000.00	\$60,000.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$59,000.00	\$56,000.00	N/A	N/A	N/A
Building Penetration	<i>\$4,000.00</i>	\$4,000.00	Cost for boring through concrete building, flashing, and sealing.	N/A	N/A
Sub-total	\$63,000.00	\$60,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,333,229.00	\$1,018,304.00	N/A	\$13,496.49	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 Justification
<b>Primary Tower</b>	<b>\$625,300.00</b>	<b>\$460,000.00</b>		<b>\$13,496.49</b>	
<b>GTOWER</b>					
Tower Permit Drawing Package	<i>\$5,000.00</i>	\$5,000.00	The generation of a permitting drawing package for one (1) broadcasters /customers.	N/A	N/A
Tower Modification Project Manager	<i>\$10,000.00</i>	\$10,000.00	Project management fee for pre-construction services (including initial antenna placement and RF compatibility review, zoning and permitting requirements review; leasing application services) to support the transition of (1) broadcasters. 100Hrs @ \$100HR	N/A	N/A
Ground and Building Drawing Package	<i>\$5,000.00</i>	\$5,000.00	The generation of a permitting drawing package for one (1) broadcasters /customers.	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$30,000.00	N/A	N/A	N/A

Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$10,000.00	N/A	\$8,746.49	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	\$4,750.00	N/A
<b>Sub-total</b>	\$625,300.00	\$460,000.00	N/A	\$13,496.49	N/A
<b>Total for all systems</b>	\$1,333,229.00	\$1,018,304.00	N/A	\$13,496.49	N/A

## Components

Actual Information	
Description	File Name
Tower Permit Drawing Package	Information not provided.
Tower Modification Project Manager	Information not provided.
Ground and Building Drawing Package	Information not provided.
Minor tower reinforcement /modifications	Information not provided.

<p>Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study</p>	<p><b>Component Description:</b> WSBS-CD - American Tower, tower mapping cost. Invoice # 460201548, PO # 515.</p> <p><b>Amount:</b> \$8,746.49</p>
<p>Complex Tower (includes, for example, those with candelabras and/or stacked antennas)</p>	<p><b>Component Description:</b> WSBS-CD - American Tower, structural engineering for candelabra tower. Invoice # 460201552, PO # 516.</p> <p><b>Amount:</b> \$4,750.00</p>



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	\$156,240.00	\$148,000.00		\$0.00	
Site Meetings	<i>\$3,000.00</i>	\$3,000.00	Coordination and transition planning with all parties onsite and management of the timelines and schedules occurring during the repack.	N/A	N/A
Transition Coordination	<i>\$3,000.00</i>	\$3,000.00	Coordination and transition planning with all parties onsite and management of the timelines and schedules occurring during the repack.	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), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$15,800.00	\$14,250.00	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	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
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
<b>Sub-total</b>	\$156,240.00	\$148,000.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,333,229.00	\$1,018,304.00	N/A	\$13,496.49	N/A

## Components

Information not provided.

## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$39,550.00</b>	<b>\$39,000.00</b>		<b>\$0.00</b>	
Professional Labor	<i>\$10,000.00</i>	\$10,000.00	Labor to re-plumb existing RF switch and dummy load to accommodate new line and transmitter. Labor to assist in installation and removal of heavy broadcast equipment.	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$5,000.00</i>	\$5,000.00	Fork-Lift Rental and operator for equipment delivery.	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$5,000.00</i>	\$5,000.00	Disposal of old ch 50 antenna, line, and transmitter.	N/A	N/A

Non-zoning permits	<b>\$5,000.00</b>	\$5,000.00	Permits for local municipality for road closures need for tower rigging.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Local Zoning	<b>\$3,000.00</b>	\$3,000.00	Obtain local permits (costs associated with preparation, filing, and fees)	N/A	N/A
<b>Sub-total</b>	<b>\$39,550.00</b>	<b>\$39,000.00</b>	N/A	\$0.00	N/A
<b>Total for all systems</b>	<b>\$1,333,229.00</b>	<b>\$1,018,304.00</b>	N/A	<b>\$13,496.49</b>	N/A

## Components

Information not provided.

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$1,333,229.00	\$1,018,304.00
			\$13,496.49

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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>Joseph A. Garcia</b>  <i>Senior Executive Vice President</i></p> <p>06/28/2018</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	<p>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).</p>	
		<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>Joseph A. Garcia</b>  <i>Senior Executive Vice President</i></p> <p>06/28/2018</p>

## Attachments