



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **191793** | Service: **DCA** | Call **KPOM-CD** | Channel:
ID: | Sign:
27 (UHF) | File **0000028605**
Number:
FRN: **0034804062** | Date **12/19**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--------------------------------------|--|----------------------|------------------|---------------------------|
| COACHELLA COMMUNICATIONS, LLC | 5670 WILSHIRE BLVD. SUITE 1620 LOS ANGELES, CA 90036 United States | +1 (323) 904-4090 | form399@LOOP.COM | Limited Liability Company |

Reimbursement Contact Information

Reimbursement Contact Name and Information

| Applicant | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] | | | |

Preparer Contact Information

Preparer Contact Name and Information

| Applicant | Address | Phone | Email |
|--|---------|-------|-------|
| The Preparer is same as the reimbursement contact. | | | |

Broadcaster Information and Transition Plan

| Question | Response |
|----------|----------|
|----------|----------|

| | |
|--|--|
| Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information. | No |
| Briefly describe transition plan | The plan is for KPOM is to replace the existing channel 45 system with a new channel 27 antenna and new transmitter. |

Transmitters

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

**Primary
Transmitter**

Existing Transmitter Information

| Section | Question | Response |
|---|--|-----------------------|
| 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 and Type | Manufacturer | |
| | Model | Innovator LX 3000U |
| | Year | 2003 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 3.0 kW |

**Primary
Transmitter**

New Transmitter Costs

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

**Primary
Transmitter**

Other Transmitter Costs

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

| | | |
|--|---|--|
| | Size | 2 inches |
| | Length | 20.0 feet |
| | Other Electrical Service | Yes |
| | Description | The new main transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors. |
| HVAC Service | Does the replacement transmitter require HVAC Service? | Yes |
| | Type | Cooling Only |
| | Size | 10 tons |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leasehold 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**
Information not provided.

Antennas

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

**Primary
Antenna**

Existing Antenna Information

| Section | Question | Response |
|---|--|--------------------|
| Existing Antenna Description | Type of change | Purchase New |
| | Antenna Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing antenna shared with another station or stations? | No |
| | Is the existing antenna directional? | Yes |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna Manufacturer and Type | Class | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels | N/A |
| | Design power capacity in use | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 10.5 kW |
| | | |

| | |
|--------------|-------------------|
| Manufacturer | |
| Model | ALP4L1- HSN-45 |
| Year | 2014 |

**Primary
Antenna**

New Antenna Costs

| Section | Question | Response |
|---|--|----------------|
| 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 Manufacturer and Types | Class | Class A |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Type | |
| | 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) | 0.36 kW |
| | Manufacturer | |
| | Model | TLP-4J SP |
| | | |

| | |
|-------------------------------|--|
| Year | 2017 |
| Justification for New Antenna | The existing antenna is single channel and not capable of broadcasting on the new channel. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|---|----------|
| Combiner for Shared Antenna | 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 |
| 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 |

**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 |
|---|--|------------------|
| Existing Transmission Line Description | 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 |
| Existing Transmission Line Manufacturer and Type | Manufacturer | |
| | Type | Flexible Foam |
| | Diameter | Other |
| | Other Diameter | 2 1/4 inches |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 180 feet per run |

Primary
Transmission Line

New Transmission Line

| Section | Question | Response |
|------------------------------------|---|---|
| New Transmission Line Costs | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Type | Flexible Foam |
| | Diameter | Other |
| | Other Diameter | 3 1/8 inches |
| | Segment Length | N/A |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 140 feet per run |
| | Justification for New Transmission Line | The new antenna will be installed at the new site while the existing antenna remains at the old site. The size transmission line is the closest available size to the existing line, which is no longer available. See exhibit details. |

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

**Tower
Equipment
And
Rigging
Costs**

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

**Primary
Tower**

Add Tower

| Section | Question | Response |
|---|---|------------------------|
| Existing Tower Description | Type of change | Modify Existing |
| | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Leased |
| | Is this tower consider Complex? | No |
| | Is this tower currently shared with any other stations? | Yes |
| | One or more FM, AM or TV radio broadcaster(s) | No |
| | Others Types of Users | Yes |
| | Is tower documented for structural analysis? | Yes |
| | Is tower compliant with Rev G? | Yes |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1018937 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 33° 57' 41.8" N- |
| | Longitude (NAD83) | 117° 16' 50.3" W- |
| | Overall Structure Height | 123.03 feet |
| | Support Structure Height | 122.05 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 3083.95 feet |
| | Structure Type | LTOWER - Lattice Tower |
| | | |

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

Other Types of Users

| Users |
|---------|
| K272FQ |
| KRMV-LD |

Primary Tower

Tower Modification Costs

| Section | Question | Response |
|----------------------|--|-----------------------------------|
| Engineering Study | Please what type of engineering study is required, if any: | Study needed for documented tower |
| Tower Reinforcements | Please select whether tower reinforcements are needed: | No reinforcements needed |

Primary Tower

Tower Rigging Costs

| Section | Question | Response |
|------------------------------|-----------------------------------|----------|
| Tower Rigging Costs | Complex Tower | N/A |
| Helicopter Services Required | Are helicopter services required? | No |

Primary Tower

Other Tower Expenses Not Listed

Information not provided.

Primary Tower

Existing Tower

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

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

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

**Primary
Tower**

Tower Rigging Costs

| Section | Question | Response |
|---|-----------------------------------|----------|
| 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 Services Costs**

| Section | Question | Response |
|---|--|--|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 2000 |
| | Explanation | KPOM does not have sufficient resource capacity and expertise in house to handle all of the Project Management related tasks necessary to facility on-time completion of the station's build by the Construction Deadline. |
| 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 |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | No |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | Negotiation of Lease and other Matter for Shared Locations | Yes |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | Yes |
| | Number of Days | 8 |

| | | |
|--|---------------|---|
| | Justification | RF Project management of tower and transmitter installs |
|--|---------------|---|

Outside Other Professional Services Expenses Not Listed
Professional Services Costs Services provided.

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 | Yes |
| | BLM or NFS Coordination | No |
| | FCC Construction Permit Minor Change | Yes |
| | FCC License to Cover Application | Yes |
| | FCC Special Temporary Authority Application | No |
| Other Miscellaneous 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**

Other Expenses Not Listed

| Name | Description |
|-----------------|----------------------------------|
| Vehicle Rentals | Required for equipment delivery. |

Cost
Information

Transmitters

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Transmitter TMU9-5 | \$207,420.00 | \$205,500.00 | | \$34,900.00 | |
| 10 Ton system | \$38,900.00 | \$37,000.00 | N/A | N/A | N/A |
| 2" Rigid Conduit and Wiring (Cost per foot) | \$520.00 | \$500.00 | N/A | N/A | N/A |
| Other Electrical Service: The new main transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors. | \$20,000.00 | \$20,000.00 | N/A | N/A | N/A |
| UHF - Air Cooled Solid State Transmitter 3.0 kW | \$148,000.00 | \$148,000.00 | N/A | \$34,900.00 | N/A |
| Sub-total | \$207,420.00 | \$205,500.00 | N/A | \$34,900.00 | N/A |
| Total for all systems | \$973,225.00 | \$937,385.00 | N/A | \$78,189.85 | N/A |

Components

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

Cost
Information

Antennas

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|----------------|------------------------------|-------------|---------------------------|
| Primary Antenna TLP-4J SP | \$33,030.00 | \$31,400.00 | | \$3,476.10 | |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | \$26,300.00 | \$25,000.00 | N/A | \$3,476.10 | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| Sub-total | \$33,030.00 | \$31,400.00 | N/A | \$3,476.10 | N/A |
| Total for all systems | \$973,225.00 | \$937,385.00 | N/A | \$78,189.85 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| UHF - Lower Power Side Mount, Class A One Station antenna -- basic | <div>Component Description: Antenna & Dehydrator 50% deposit</div> <div>Amount: N/A</div> <div>Component Description: Antenna & Dehydrator</div> <div>Amount: \$3,476.10</div> |
| Sweep test of existing antenna | 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 | \$7,840.00 | \$7,840.00 | | \$6,432.15 | |
| Flexible Foam Transmission Line - 3 1/8" 1 parallel runs 140 feet | <i>\$7,840.00</i> | \$7,840.00 | N/A | \$6,432.15 | N/A |
| Sub-total | \$7,840.00 | \$7,840.00 | N/A | \$6,432.15 | N/A |
| Total for all systems | \$973,225.00 | \$937,385.00 | N/A | \$78,189.85 | N/A |

Components

| Actual Information | |
|---|---|
| Description | File Name |
| Flexible Foam Transmission Line - 3 1/8" 1 parallel runs 140 feet | Component Description: KPOM-310-New Primary Transmission Line |
| | Amount: \$3,129.49 |
| | Component Description: KPOM-310-New Primary Transmission Line |
| | Amount: \$3,302.66 |

Cost
Information

Tower Equipment and Rigging Costs

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|----------------|------------------------------|-------------|---------------------------|
| Primary Tower LTOWER | \$96,800.00 | \$92,000.00 | | \$1,500.00 | |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$12,000.00 | N/A | \$1,500.00 | N/A |
| Short Tower (less than 500') | \$84,200.00 | \$80,000.00 | N/A | N/A | N/A |
| Primary Tower LTOWER | \$84,200.00 | \$80,000.00 | | \$0.00 | |
| Short Tower (less than 500') | \$84,200.00 | \$80,000.00 | N/A | N/A | N/A |
| Sub-total | \$181,000.00 | \$172,000.00 | N/A | \$1,500.00 | N/A |
| Total for all systems | \$973,225.00 | \$937,385.00 | N/A | \$78,189.85 | N/A |

Components

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

| | | | |
|---|-------------------------------|--|------------|
| Structural engineering tower load study for well documented tower | Component Description: | | Structural |
| | Amount: | | Analysis |
| | | | \$750.00 |
| | | | |
| | Component Description: | | Structural |
| | Amount: | | Analysis |
| | | | \$750.00 |
| | | | |
| Short Tower (less than 500') | Information not provided. | | |
| Short Tower (less than 500') | Information not provided. | | |

Cost Information

Outside Professional Services

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|---------------------|------------------------------|--------------------|--|
| Outside Professional Services | \$466,440.00 | \$443,750.00 | | \$20,040.55 | |
| Project management of the transition | \$316,000.00 | \$300,000.00 | N/A | \$16,074.10 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$950.00 | See: S&F FCC Repack Consulting Engineering Proposal. pdf |
| Additional Field Engineering Service, 8 Days | <i>\$16,000.00</i> | \$16,000.00 | 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 |
| 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 engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$1,750.00 | See: S&F FCC Repack Consulting Engineering Proposal. pdf |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$1,266.45 | N/A |
| Sub-total | \$466,440.00 | \$443,750.00 | N/A | \$20,040.55 | N/A |
| Total for all systems | \$973,225.00 | \$937,385.00 | N/A | \$78,189.85 | N/A |

Components

| Actual Information | Description | File Name |
|--------------------------------------|-------------------------------|--|
| Project management of the transition | Component Description: | Project Management |
| | Amount: | \$1,450.85 |
| | Component Description: | Project Management / Planning |
| | Amount: | \$75.00 |
| | Component Description: | Technical , Consultation and Planning Services. Attended a Conference at Rohde and Schwartz on 3/6 /2017 concerning the 399 re-pack documentation. |
| | Amount: | \$75.00 |
| | Component Description: | Project Management |
| | Amount: | \$1,780.90 |
| | Component Description: | Technical , Consultation and Planning Services. Three conference calls |
| | Amount: | \$75.00 |
| | Component Description: | Technical, Consultation and Planning Services. |
| | Amount: | \$54.60 |

| | |
|-------------------------------|--|
| Component Description: | Technical, Consultation and Planning Services. |
| Amount: | \$54.60 |

| | |
|-------------------------------|----------------------------|
| Component Description: | Project Management Fees |
| Amount: | \$684.20 |

| | |
|-------------------------------|-----------------------|
| Component Description: | Project Management |
| Amount: | \$1,582.05 |

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|-------------------------------|----------------------------|
| Component Description: | Project Management Fees |
| Amount: | \$760.70 |

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| Component Description: | Project Management |
| Amount: | \$1,539.80 |

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| Component Description: | Technical, Consultation and Planning Services. |
| Amount: | \$136.50 |

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| Component Description: | Project Management Fees |
| Amount: | \$557.75 |

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| Component Description: | Technical , Consultation and Planning Services. Technical , Consultation and Planning Services with Sam Hariton (Widelity). Discussed outstanding issues on the FCC 399 form. |
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| Amount: | \$75.00 |
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| Component Description: | Technical, Consultation and Planning Services. |
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| Amount: | \$54.60 |
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| Component Description: | Project Management |
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| Amount: | \$1,947.45 |
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| Component Description: | Re-pack consulting and updating |
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| Amount: | \$75.00 |
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| Component Description: | Project Management |
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| Amount: | \$1,334.05 |
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| Component Description: | Technical , Consultation and Planning Services. Review and answering technical questions through a telephone conference call for the follow up report for the Re-pack. |
| Amount: | \$75.00 |

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| Component Description: | Technical, Consultation and Planning Services. |
| Amount: | \$54.60 |

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| Component Description: | Project Management |
| Amount: | \$1,612.35 |

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| Component Description: | Project Management |
| Amount: | \$1,147.35 |

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| Component Description: | Project Management |
| Amount: | \$1,301.65 |

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| Perform engineering study for new channel assignment and antenna development | <div> <div> Component Description: </div> <div> Interference study of repack Channel 27 for KPOM-CD in Ontario, California. See: S&F FCC Repack Consulting Engineering Proposal.pdf </div> </div> <div> Amount: </div> <div> \$950.00 </div> <div> Component Description: </div> <div> Re-submission of invoice for interference study of repack. </div> <div> Amount: </div> <div> \$950.00 </div> |
| Additional Field Engineering Service, 8 Days | Information not provided. |
| RF Exposure Measurements | Information not provided. |
| Comprehensive coverage verification via field study, if needed | Information not provided. |
| Attorney Fees - Negotiation of lease and other matters for shared locations | Information not provided. |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |

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| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | <p>Component Description: Preparation of engineering portion of initial FCC Application for Construction Permit for repack facility on Channel 27 for KPOM-CD in Ontario, California. See: S&F FCC Repack Consulting Engineering Proposal.pdf</p> <p>Amount: \$1,750.00</p> |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. |
| Prepare and or review reimbursement form | <p>Component Description: Budget Review and Form Prep</p> <p>Amount: \$713.35</p> <p>Component Description: Budget Review</p> <p>Amount: \$110.25</p> <p>Component Description: Budget review and form prep</p> <p>Amount: \$442.85</p> |

Cost Information

Other Expenses

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|--------------------|------------------------------|--------------------|---------------------------|
| Other Expenses | \$77,495.00 | \$76,895.00 | | \$11,841.05 | |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | N/A | \$8,655.00 | N/A |
| Vehicle Rentals | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| MVPD Notification of Channel Change | <i>\$2,000.00</i> | \$2,000.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$15,000.00</i> | \$15,000.00 | N/A | N/A | N/A |
| Equipment Storage | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$15,000.00</i> | \$15,000.00 | N/A | \$3,186.05 | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| Non-zoning permits | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |

| | | | | | |
|--|-------------------|--------------|-----|-------------|-----|
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 minor change CP application | \$1,110.00 | \$1,070.00 | N/A | N/A | N/A |
| Local Zoning | \$5,000.00 | \$5,000.00 | N/A | \$0.00 | N/A |
| Sub-total | \$77,495.00 | \$76,895.00 | N/A | \$11,841.05 | N/A |
| Total for all systems | \$973,225.00 | \$937,385.00 | N/A | \$78,189.85 | N/A |

Components

| Actual Information | |
|---|--|
| Description | File Name |
| DTV Medical Facility Notification | <p>Component Description: DTV Notification Service</p> <p>Amount: \$8,655.00</p> |
| Vehicle Rentals | Information not provided. |
| MVPD Notification of Channel Change | Information not provided. |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Equipment Storage | Information not provided. |
| Equipment Delivery and Handling Charges | <p>Component Description: KPOM-610-Equipment Delivery and Handling</p> <p>Amount: \$3,186.05</p> |

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| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. |
| Non-zoning permits | Information not provided. |
| FCC Filing Fees - Form 2100 license to cover application | Information not provided. |
| FCC Filing Fees - Form 2100 minor change CP application | Information not provided. |
| Local Zoning | Information not provided. |

| Cost Information | Grand Total | | | |
|------------------|-----------------------|-----------------------------|----------------|-------------|
| | | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
| | Total for all systems | \$973,225.00 | \$937,385.00 | \$78,189.85 |

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

| Certification | Section | Question | Response |
|---------------|---|---|----------|
| | Submission of Estimated Expenses Statements | <p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p> | |
| | | <ol style="list-style-type: none"> 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 above-named applicant for the Authorization(s) specified above.

Christine Meng
Form 399
Certifier

12/19/2018

| Certification | Section | Question | Response |
|---------------|--|--|----------|
| | Submission of Actual Cost Documentation Statements | WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733). | |
| | | <ol style="list-style-type: none"> 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. 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.

| | |
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| <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>Christine Meng <i>Form 399</i> <i>Certifier</i></p> <p>12/19/2018</p> |

Attachments