



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **35862** | Service: **DTV** | Call **KVOS-TV** | Channel: **14 (UHF)** |
ID: | Sign:
File **0000027892**
Number:
FRN: **0027496082** | Date **12/22**
Submitted: **/2017**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|-----------------------------|----------------------------------|---------------------------------|
| OTA BROADCASTING (SEA), LLC Doing Business As: OTA BROADCASTING (SEA), LLC | 11710 PLAZA AMERICA DRIVE SUITE 2000 RESTON, VA 20190 United States | +1 (703) 865- 4442 | tolpegin@otabroadcasting. 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 |
|-----------------------------------|---|-------------------|-------------------|
| David Sanderford Marsand, Inc. | David Sanderford 1957 Reynolds Dr Azle, TX 76020 United States | +1 (817) 783-5566 | david@marsand.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 | | See attached Transition Plan Narrative. |

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 | QXD1 |
| | Year | 2009 |
| | Type | Inductive Output Tube |
| | IOT Power Type | Single |
| | Power Capacity | 33 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? | Yes |
| | Manufacturer | |
| | Model | THU9-10 EVO |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 15.5 kW |
| | Justification for New Transmitter | Existing transmitter is no longer supported by the manufacturer. |

**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 | No |
| | Size | N/A |
| | Length | N/A |
| | Other Electrical Service | No |
| | | |

| | | |
|--|---|-----|
| | Description | N/A |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Type | 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 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 | 5 |

Primary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|---------------------------------|--|
| Electrical and Room Prep | Electrical distribution to new transmitter and removal of abandoned equipment to make space for the new equipment. |

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 | Full Power |
| | Mounting | Top 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) | 580.0 kW |
| | | |

| | |
|--------------|----------------------|
| Manufacturer | |
| Model | TFU-31JTH- R O4SP |
| Year | 2009 |

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? | No |
| New Antenna Manufacturer and Types | Class | Full Power |
| | 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) | 362.0 kW |
| | Manufacturer | |
| | | |

| | |
|-------------------------------|---|
| Model | TFU-20JTH /VP-R 04SP |
| Year | 2018 |
| Justification for New Antenna | Existing antenna is fixed on CH35 and is not retunable. Comparable antenna would be horizontally polarized only. Station requests upgraded, elliptically polarized antenna. |

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? | Yes |
| | Broadband or Single Channel? | Single Channel |
| | | |

| | | |
|---------------------------------|---|---------------------------|
| | Feed Line Size | 6 1/8 inches inches |
| 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.

**Interim
Antenna**

New Antenna Costs

| Section | Question | Response |
|--|--|-------------------|
| New Antenna Description | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | 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 Type | Class | Full Power |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Type | Broadband Slot |
| | Number of Stations Supported | 1 |
| | Number of Panels/Bays | 12 |
| | Lower Limit | 470.00 MHz |
| | Upper Limit | 602.00 MHz |
| | Design power capacity in use | 100.0 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 100.0 kW |
| | Manufacturer | |
| | Model | TLP-BB- 12B |
| | Year | 2018 |

| | | |
|--|-------------------------------|--|
| | Justification for New Antenna | Provide interim service on pre-auction channel when top mount antenna is replaced with post-auction channel antenna. |
|--|-------------------------------|--|

**Interim
Antenna**

Other Antenna Costs

| Section | Question | Response |
|---------------------------------|---|----------|
| 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 an antenna? | No |
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | Yes |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

**Interim
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 | Utilize Existing |
| | 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 | Dielectric |
| | Type | Rigid |
| | Diameter | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 500 feet per run |

Primary

Other Transmission Line Expenses Not Listed

Transmission Line

Information not provided.

Interim

New Transmission Line

Transmission Line

| Section | Question | Response |
|-----------------------------|---|--|
| New Transmission Line Costs | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Type | Flexible Air |
| | Diameter | 3 inches |
| | Segment Length | N/A |
| | Other Segment Length | |
| | Number of parallel runs | 1 |
| | Length | 500 feet per run |
| | Justification for New Transmission Line | Provide interim service for current channel while re-assigned facility is built out. |

Interim

Other Transmission Line Expenses Not Listed

Transmission Line

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**

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? | Terrain Constrained |
| | 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? | Yes |
| | Is tower compliant with Rev G? | Yes |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1251758 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 48° 40' 49.4" N- |
| | Longitude (NAD83) | 122° 50' 26.4" W- |
| | Overall Structure Height | 498.68 feet |
| | Support Structure Height | 498.68 feet |
| | | |

| | |
|--|--|
| Ground Elevation Above Mean Sea Level (AMSL) | 2270.31 feet |
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | Marsha Coulthurst ET AL.DBA Mt. Constitution Sites Inc |
| Date Constructed | 07/14/2006 |

**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 |
|-------------|-----------|---------|
| 14506 | KWPZ | FM |

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 | Terrain constrained |
| Helicopter Services Required | Are helicopter services required? | No |

**Primary
Tower**

Other Tower Expenses Not Listed

| Name | Description |
|-----------------------------|---|
| Interim Installation | Install interim antenna and transmission line |

**Outside
Professional Services Costs**

| Section | Question | Response |
|---|--|---|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 300 |
| | Explanation | The ownership group has multiple transmitter sites (14 TV) and operates with minimal staff. It does not have personnel available for any of these tasks, nor is the staff trained to provide any of these services. |
| 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 |
| | | |

| | | |
|---|--|-----|
| | Quantity | 1 |
| | 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 | Yes |
| | Quantity | 1 |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | No |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | Negotiation of Lease and other Matter for Shared Locations | No |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | No |
| RF Field Engineering Services | Comprehensive coverage verification via field study | No |
| | RF exposure measurements | No |
| | 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 |
|-------------|---|
| Site Survey | Site visit to determine final layout and required equipment needed. |

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 | No |
| | 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 | 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 | Other Expenses Not Listed 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 THU9-10 EVO | \$971,171.00 | \$695,417.00 | | \$0.00 | |
| Channel 14 -- Additional field engineering time, 5 days | <i>\$8,500.00</i> | \$8,500.00 | Confirm and /or develop plan to mitigate CH14 into Land Mobile interference issues. | \$0.00 | N/A |
| RF Consulting Engineer | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |
| UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW | \$684,000.00 | \$418,006.00 | Combined cost for transmitter and installation. | N/A | N/A |

| | | | | | |
|----------------------------------|--------------------|----------------|---|------------|-----|
| Channel 14 Mask Filter | \$189,500.00 | \$180,000.00 | A standard reflective CH14 mask filter is included in the transmitter costs, however a constant impedance filter (CIF) is anticipated for this site due to the high humidity and frequency drift and will require additional costs. | N/A | N/A |
| Electrical and Room Prep | \$83,911.00 | \$83,911.00 | Add distribution of electrical to new transmitter. Incorporates removal of some abandoned station equipment. Difficult access to this site. | N/A | N/A |
| Sub-total | \$971,171.00 | \$695,417.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,983,811.00 | \$1,254,629.50 | N/A | \$3,456.90 | N/A |

Components

Actual Information
Description

File Name

| | |
|--|--|
| Channel 14 -- Additional field engineering time, 5 days | <p>Component Description:</p> <p>Please see line 4 of the invoice - RF consulting engineer, initial CH14 interference survey.</p> <p>Amount:</p> <p>\$281.25</p> |
| RF Consulting Engineer | Information not provided. |
| UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW | Information not provided. |
| Channel 14 Mask Filter | Information not provided. |
| Electrical and Room Prep | 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 |
|--|-----------------------------|---------------------|------------------------------|---------------|---------------------------|
| Interim Antenna TLP-BB-12B | \$101,390.00 | \$11,400.00 | | \$0.00 | |
| UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized | \$89,400.00 | \$0.00 | N/A | N/A | N/A |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| Primary Antenna TFU-20JTH/VP-R 04SP | \$308,530.00 | \$293,100.00 | | \$0.00 | |

| | | | | | |
|--|----------------|----------------|-----|------------|-----|
| UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized | \$289,500.00 | \$275,000.00 | N/A | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) | \$12,300.00 | \$11,700.00 | N/A | N/A | N/A |
| Sub-total | \$409,920.00 | \$304,500.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,983,811.00 | \$1,254,629.50 | N/A | \$3,456.90 | 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 |
|--|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Interim Transmission Line | \$29,500.00 | \$28,000.00 | | \$0.00 | |
| Flexible Air Transmission Line - dielectric, 3" | \$29,500.00 | \$28,000.00 | N/A | N/A | N/A |
| Primary Transmission Line | \$0.00 | \$0.00 | | \$0.00 | |
| Sub-total | \$29,500.00 | \$28,000.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,983,811.00 | \$1,254,629.50 | N/A | \$3,456.90 | 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 TOWER | \$433,600.00 | \$99,700.00 | | \$0.00 | |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$12,000.00 | N/A | \$0.00 | N/A |
| Interim Installation | \$0.00 | \$0.00 | Included in quote for tower rigging work. | N/A | N/A |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas) | \$421,000.00 | \$87,700.00 | N/A | N/A | N/A |
| Sub-total | \$433,600.00 | \$99,700.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,983,811.00 | \$1,254,629.50 | N/A | \$3,456.90 | N/A |

Components

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

| | |
|--|---|
| <p>Structural engineering tower load study for well documented tower</p> | <p>Component Description:</p> <p>Please see line 4 of the invoice - Structural engineering tower load study for well documented tower. re-run for antenna spec change.</p> <p>Amount:</p> <p>\$1,680.00</p> |
| <p>Interim Installation</p> | <p>Information not provided.</p> |
| <p>Complex Tower (includes, for example, those with candelabras and/or stacked antennas)</p> | <p>Information not provided.</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 | \$85,480.00 | \$81,250.00 | | \$3,456.90 | |
| Site Survey | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$3,680.00 | \$3,500.00 | 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 | \$619.20 | N/A |
| Project management of the transition | \$47,400.00 | \$45,000.00 | N/A | N/A | N/A |

| | | | | | |
|--|-----------------------|-----------------------|------------|-------------------|---|
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$812.70 | The original estimate was only for the consulting engineer and did not include attorney's fees. |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$0.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$2,025.00 | 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 request for Special Temporary Authorization | \$2,050.00 | \$1,500.00 | N/A | N/A | N/A |
| Sub-total | \$85,480.00 | \$81,250.00 | N/A | \$3,456.90 | N/A |
| Total for all systems | \$1,983,811.00 | \$1,254,629.50 | N/A | \$3,456.90 | N/A |

Components

| Actual Information | |
|--|---|
| Description | File Name |
| Site Survey | Information not provided. |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | 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 | <div> <div> Component Description: </div> <div> Please refer to lines 3,4 and 5 of the attached invoice \$688. Less the 10% discount received the amount due is \$619.20. Please note the hours and rates are provided at the bottom of the invoice. </div> </div> <div> Amount: </div> <div> \$619.20 </div> |
| Project management of the transition | Information not provided. |

| | | | | | | | | | |
|---|---|-------------------------------|--|----------------|------------|-------------------------------|--|----------------|------------|
| <p>Prepare and or review reimbursement form</p> | <table> <tr> <td data-bbox="702 174 1018 210">Component Description:</td><td data-bbox="1147 174 1374 645">Please refer to lines 1,2,6 and 7 of the attached invoice \$903. Less the 10% discount received the amount due is \$812.70. Please note the hours and rates are provided at the bottom of the invoice.</td></tr> <tr> <td data-bbox="702 658 815 689">Amount:</td><td data-bbox="1147 658 1246 689">\$812.70</td></tr> <tr> <td data-bbox="702 792 1018 828">Component Description:</td><td data-bbox="1147 792 1350 1025">Please see line 2 of the invoice - Prepare and or review reimbursement form.</td></tr> <tr> <td data-bbox="702 1039 815 1070">Amount:</td><td data-bbox="1147 1039 1267 1070">\$2,500.00</td></tr> </table> | Component Description: | Please refer to lines 1,2,6 and 7 of the attached invoice \$903. Less the 10% discount received the amount due is \$812.70. Please note the hours and rates are provided at the bottom of the invoice. | Amount: | \$812.70 | Component Description: | Please see line 2 of the invoice - Prepare and or review reimbursement form. | Amount: | \$2,500.00 |
| Component Description: | Please refer to lines 1,2,6 and 7 of the attached invoice \$903. Less the 10% discount received the amount due is \$812.70. Please note the hours and rates are provided at the bottom of the invoice. | | | | | | | | |
| Amount: | \$812.70 | | | | | | | | |
| Component Description: | Please see line 2 of the invoice - Prepare and or review reimbursement form. | | | | | | | | |
| Amount: | \$2,500.00 | | | | | | | | |
| <p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p> | <table> <tr> <td data-bbox="702 1205 1018 1240">Component Description:</td><td data-bbox="1147 1205 1374 1482">Please see line 1 of the invoice - Prepare engineering section of FCC form 2100, construction permit application</td></tr> <tr> <td data-bbox="702 1496 815 1527">Amount:</td><td data-bbox="1147 1496 1267 1527">\$2,250.00</td></tr> </table> | Component Description: | Please see line 1 of the invoice - Prepare engineering section of FCC form 2100, construction permit application | Amount: | \$2,250.00 | | | | |
| Component Description: | Please see line 1 of the invoice - Prepare engineering section of FCC form 2100, construction permit application | | | | | | | | |
| Amount: | \$2,250.00 | | | | | | | | |

| | | | | | | | | | |
|--|---|-------------------------------|---|----------------|------------|-------------------------------|---|----------------|------------|
| Perform engineering study for new channel assignment and antenna development | <table> <tr> <td data-bbox="703 174 1018 210">Component Description:</td><td data-bbox="1145 174 1374 286">Please refer to line 1 of the invoice for details</td></tr> <tr> <td data-bbox="703 297 818 333">Amount:</td><td data-bbox="1145 297 1270 333">\$1,317.56</td></tr> <tr> <td data-bbox="703 434 1018 470">Component Description:</td><td data-bbox="1145 434 1374 748">Please refer to line one of the invoice - KVOS-DT Perform engineering study for new channel assignment and antenna development</td></tr> <tr> <td data-bbox="703 759 818 795">Amount:</td><td data-bbox="1145 759 1270 795">\$2,025.00</td></tr> </table> | Component Description: | Please refer to line 1 of the invoice for details | Amount: | \$1,317.56 | Component Description: | Please refer to line one of the invoice - KVOS-DT Perform engineering study for new channel assignment and antenna development | Amount: | \$2,025.00 |
| Component Description: | Please refer to line 1 of the invoice for details | | | | | | | | |
| Amount: | \$1,317.56 | | | | | | | | |
| Component Description: | Please refer to line one of the invoice - KVOS-DT Perform engineering study for new channel assignment and antenna development | | | | | | | | |
| Amount: | \$2,025.00 | | | | | | | | |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. | | | | | | | | |
| Prepare request for Special Temporary Authorization | 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 |
|--|-----------------------------|--------------------|---|---------------|---------------------------|
| Other Expenses | \$54,140.00 | \$45,762.50 | | \$0.00 | |
| DTV Medical Facility Notification | \$11,550.00 | \$3,227.50 | 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 |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |
| Non-zoning permits | <i>\$1,500.00</i> | \$1,500.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$12,500.00</i> | \$12,500.00 | See Transition Plan Narrative. | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$24,000.00</i> | \$24,000.00 | Freight for main and interim antenna & transmission line. | N/A | N/A |

| | | | | | |
|---|-------------------|----------------|-----|------------|-----|
| Equipment Storage | \$1,500.00 | \$1,500.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$250.00 | \$250.00 | N/A | N/A | N/A |
| MVPD Notification of Channel Change | \$1,200.00 | \$1,200.00 | N/A | N/A | N/A |
| Sub-total | \$54,140.00 | \$45,762.50 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,983,811.00 | \$1,254,629.50 | N/A | \$3,456.90 | N/A |

Components

Information not provided.

| | | | |
|-----------------------------|------------------------------|--|-----------------------|
| Cost Information | Grand Total | | |
| | | Predetermined Cost Estimate | Estimated Cost |
| | | | Actual Cost |
| | Total for all systems | \$1,983,811.00 | \$1,254,629.50 |
| | | | \$3,456.90 |

| | | |
|-----------------------------|--|-----------------|
| 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.

| | |
|---|--|
| <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>Charles Hultman <i>VP Finance</i></p> <p>12/22/2017</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"> 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.

| | |
|--|--|
| <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>Charles Hultman <i>VP Finance</i></p> <p>12/22/2017</p> |

Attachments