



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **67190** | Service: **DTV** | Call **WVSN** | Channel: **23 (UHF)** |
ID: | Sign:
File **0000026619**
Number:
FRN: **0006610976** | Date **03/27**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|--|-------------------|--------------------|----------------|
| LA CADENA DEL MILAGRO, INC. Doing Business As: LA CADENA DEL MILAGRO, INC. | Esteban Paredes P.O. BOX 949 CAMUY, PR 00627 United States | +1 (787) 262-5400 | montero@fhhlaw.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 |
|--|---------|-------|-------|
| 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. | Yes |
| Briefly describe transition plan | The main transmitter and the main antenna will be replaced according to the schedule of equipment delivery and tower modifications necessary. |

Transmitters

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

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

| Section | Question | Response |
|---|--|---|
| Existing Transmitter Description | Type of change | Purchase New |
| | Use | Auxiliary (Backup) |
| | Description of Use | Backup used when Main transmitter fail or needs repair /maintenance |
| | 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 | Affinity |
| | Year | 2000 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 0.5 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? | Yes |
| | Manufacturer | |
| | Model | EC702HP- BB |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 1 kW |
| | Justification for New Transmitter | To be used when the main transmitter fails or needs maintenance. |

**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 | Yes |
| | Size | 1 inches |
| | Length | 30.0 feet |
| | Other Electrical Service | Yes |

| | | |
|--|---|--|
| | Description | Panel breaker, ground system, connecting cables. |
| 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 | N/A |

Auxiliary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|----------------------|----------------------------------|
| Shipping and Crating | Shipping and crating to San Juan |
| Installation of LPTV | Installation of EC702 HP |
| Transmitter | System, WWSN EC702HP |

**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 | Ultimate TDU2 5K00 |
| | Year | 2004 |
| | Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power Capacity | 5 kW |

**Primary
Transmitter**

New Transmitter Costs

| Section | Question | Response |
|-----------------|---|---|
| New Transmitter | Use | Primary (Main) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | Manufacturer | |
| | Model | Parallax |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 5 kW |
| | Justification for New Transmitter | Existing transmitter manufacturer no longer on the market. We are requesting a replacement transmitter with the same "headroom" transmitter capacity as the existing 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 | 30.0 feet |
| | Other Electrical Service | Yes |
| | Description | Additional panel breaker, safety switches for liquid pumps, electrical conduits and cables, ground system, etc. |
| 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? | Yes |
| | Size | 400.0 square feet |
| 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**

| Name | Description |
|--------------------------|-------------------------------|
| Transmitter Installation | Installation of Parlux U4 D23 |

| | |
|---|--------------------------------|
| Transmitter Proof of Performance | Performance of Parallax U4 D23 |
| Shipping and Crating | Shipping of Parallax U4 D23 |

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 | 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) | 46.0 kW |
| | | |

| | |
|--------------|-------------|
| Manufacturer | |
| Model | JA/MS-AW-12 |
| Year | 2008 |

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 | Side 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) | 27.4 kW |
| | Manufacturer | |
| | Model | PSILPD12AW- 23-EP |
| | | |

| | |
|-------------------------------|--|
| Year | 2017 |
| Justification for New Antenna | Existing antenna can't be frequency change. Upgrading to an elliptically polarized antenna to improve coverage due to the new reduced ERP. |

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? | Yes |
| 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 |

**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? | No |
| | 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 | 1 |
| | Lower Limit | 470.00 MHz |
| | Upper Limit | 806.00 MHz |
| | Design power capacity in use | 60.0 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 10.0 kW |
| | Manufacturer | |
| | Model | PSILP8A W23 |
| | Year | 2018 |

| | | |
|--|-------------------------------|---|
| | Justification for New Antenna | This antenna will be used during new main antenna installation and could be used later with the new assigned frequency for backup purposes. |
|--|-------------------------------|---|

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? | Yes |
| 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 |

Interim Antenna

Other Antenna Cost Not Listed

| Name | Description |
|----------------------------|--|
| Connectors Adapters | To be used to couple the antenna and transmission line |

| Transmission Line | Section | Question | Response |
|-------------------|------------------------------------|---|----------|
| | Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

Interim Transmission Line

New Transmission Line

| Section | Question | Response |
|-----------------------------|---|--|
| New Transmission Line Costs | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Type | Flexible Foam |
| | Diameter | 1 5/8 inches |
| | Segment Length | N/A |
| | Other Segment Length | |
| | Number of parallel runs | 1 |
| | Length | 250 feet per run |
| | Justification for New Transmission Line | Line to feed the interim antenna during main antenna installation. |

Interim Transmission Line

Other Transmission Line Expenses Not Listed

| Name | Description |
|---------------------|--|
| Connectors Adapters | Used to interconnect antenna, line and transmitter |

**Tower
Equipment
And
Rigging
Costs**

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

**Outside
Professional Services Costs**

| Section | Question | Response |
|---|--|---|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 160 |
| | Explanation | It is a religious station with limited operating costs and do not have personnel with the expertise and qualifications to manage a complicated project like this. |
| 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 | 2 |
| | 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 | 2 |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | No |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | Negotiation of Lease and other Matter for Shared Locations | No |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | No |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | Yes |
| | Number of Days | 10 |
| | | |

| | | |
|--|---------------|---|
| | Justification | Transmitter related RF components connections, test coordination with Arecibo Observatory and other local entities. |
|--|---------------|---|

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**
If provided, please provide details of other professional 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 | No |
| | Non-zoning permits | No |
| | BLM or NFS Coordination | No |
| | FCC Construction Permit Minor Change | Yes |
| | FCC License to Cover Application | Yes |
| | FCC Special Temporary Authority Application | Yes |
| Other Miscellaneous Expenses | Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)? | Yes |
| | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | Yes |
| | Does this relocation require Equipment Storage? | Yes |
| | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | Yes |
| | Does this relocation require MVPD Notification of a Channel Change? | Yes |

**Other
Expenses**

Other Expenses Not Listed

| Name | Description |
|-------------------|---|
| Station Personnel | Extra time incurred by station personnel and travel expenses. |

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 Parallax | \$340,876.00 | \$327,346.00 | | \$138,146.00 | |
| Shipping and Crating | \$5,728.50 | \$5,728.50 | N/A | \$5,728.50 | N/A |
| Transmitter Proof of Performance | \$6,550.00 | \$6,550.00 | N/A | \$6,550.00 | N/A |
| Transmitter Installation | \$9,317.50 | \$9,317.50 | N/A | \$9,317.50 | N/A |
| Other -- Building Addition Size: 400.0 | \$40,000.00 | \$40,000.00 | \$100 per foot | \$0.00 | N/A |
| Other Electrical Service: Additional panel breaker, safety switches for liquid pumps, electrical conduits and cables, ground system, etc. | \$5,000.00 | \$5,000.00 | N/A | N/A | N/A |
| 2" Rigid Conduit and Wiring (Cost per foot) | \$780.00 | \$750.00 | N/A | N/A | N/A |

| | | | | | |
|--|---------------------|---------------------|--|---------------------|-----|
| UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW | \$273,500.00 | \$260,000.00 | N/A | \$116,550.00 | N/A |
| Auxiliary Transmitter EC702HP-BB | \$170,927.50 | \$84,927.50 | | \$43,027.50 | |
| Transmitter | \$33,583.00 | \$33,583.00 | N/A | \$33,583.00 | N/A |
| Installation of LPTV | \$6,774.50 | \$6,774.50 | N/A | \$6,774.50 | N/A |
| Shipping and Crating | \$2,670.00 | \$2,670.00 | N/A | \$2,670.00 | N/A |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$126,000.00 | \$40,000.00 | Amount adjusted according to an e-mail received : 2017-07-25 14:23:52 EDT by Geoffrey Mendenhall | N/A | N/A |
| 1" Rigid Conduit and Wiring | \$400.00 | \$400.00 | N/A | N/A | N/A |
| Other Electrical Service: Panel breaker, ground system, connecting cables. | \$1,500.00 | \$1,500.00 | N/A | N/A | N/A |
| Sub-total | \$511,803.50 | \$412,273.50 | N/A | \$181,173.50 | N/A |
| Total for all systems | \$837,383.50 | \$728,758.50 | N/A | \$193,584.50 | N/A |

Components

| Actual Information | |
|--|---|
| Description | File Name |
| Shipping and Crating | <p>Component Description: First 50 % Payment of Shipping and Crating TV transmitter</p> <p>Amount: \$5,728.50</p> |
| Transmitter Proof of Performance | <p>Component Description: First 50 % Payment of TV Transmitter Proof Performance</p> <p>Amount: \$6,550.00</p> |
| Transmitter Installation | <p>Component Description: First 50 % Payment of TV transmitter Installation</p> <p>Amount: \$9,317.50</p> |
| Other -- Building Addition Size: 400.0 | Information not provided. |
| Other Electrical Service: Additional panel breaker, safety switches for liquid pumps, electrical conduits and cables, ground system, etc. | Information not provided. |
| 2" Rigid Conduit and Wiring (Cost per foot) | Information not provided. |
| UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW | <p>Component Description: first 50% Payment of UHF TV transmitter</p> <p>Amount: \$116,550.00</p> |

| | | |
|--|--|---|
| Transmitter | <p>Component Description:</p> <p>Amount:</p> | <p>First 50% Payment of Auxiliary TV Transmitter</p> <p>\$33,583.00</p> |
| Installation of LPTV | <p>Component Description:</p> <p>Amount:</p> | <p>First 50% payment of Auxiliary TV Transmitter installation</p> <p>\$6,774.50</p> |
| Shipping and Crating | <p>Component Description:</p> <p>Amount:</p> | <p>First Payment of 50% of shipping and crating</p> <p>\$2,670.00</p> |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | Information not provided. | |
| 1" Rigid Conduit and Wiring | Information not provided. | |
| Other Electrical Service: Panel breaker, ground system, connecting cables. | 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 PSILP8A W23 | \$57,380.00 | \$55,900.00 | | \$3,345.00 | |
| Side mount brackets for high power antennas (if not included in antenna base cost) | \$23,150.00 | \$22,000.00 | N/A | \$0.00 | N/A |
| UHF - High Power, Side Mount, basic slot antenna, 1 bay,, 8 - 10 kW input, horizontally polarized | <i>\$25,000.00</i> | \$25,000.00 | N/A | \$3,345.00 | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| Connectors Adapters | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |
| Primary Antenna PSILPD12AW-23-EP | \$85,140.00 | \$83,400.00 | | \$8,079.00 | |

| | | | | | |
|---|--------------------|--------------|---|--------------|-----|
| 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 |
| Side mount brackets for high power antennas (if not included in antenna base cost) | \$23,150.00 | \$22,000.00 | N/A | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| UHF - High Power, Side Mount, basic slot antenna, 27 kW input, directional,, elliptically or circularly polarized | \$50,000.00 | \$50,000.00 | Cost adjusted according to an e-mail received on 2017-07-25 14:23:52 EDT by Geoffrey Mendenhall | \$8,079.00 | N/A |
| Sub-total | \$142,520.00 | \$139,300.00 | N/A | \$11,424.00 | N/A |
| Total for all systems | \$837,383.50 | \$728,758.50 | N/A | \$193,584.50 | N/A |

Components

| Actual Information | |
|--|---------------------------|
| Description | File Name |
| Side mount brackets for high power antennas (if not included in antenna base cost) | Information not provided. |

| | | |
|---|---|--|
| UHF - High Power, Side Mount, basic slot antenna, 1 bay,, 8 - 10 kW input, horizontally polarized | Component Description: Amount: | First 1/3 payment of the cost of the antenna that is due now \$3,345.00 |
| Sweep test of existing antenna | Information not provided. | |
| Connectors Adapters | Information not provided. | |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | Information not provided. | |
| Side mount brackets for high power antennas (if not included in antenna base cost) | Information not provided. | |
| Sweep test of existing antenna | Information not provided. | |
| UHF - High Power, Side Mount, basic slot antenna, 27 kW input, directional,, elliptically or circularly polarized | Component Description: Amount: | First 1/3 Payment of the cost of the antenna. \$8,079.00 |

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 | \$8,500.00 | \$8,250.00 | | \$987.00 | |
| Connectors Adapters | \$2,500.00 | \$2,500.00 | N/A | N/A | N/A |
| Flexible Foam Transmission Line - dielectric, 1 5/8" | \$6,000.00 | \$5,750.00 | N/A | \$987.00 | N/A |
| Sub-total | \$8,500.00 | \$8,250.00 | N/A | \$987.00 | N/A |
| Total for all systems | \$837,383.50 | \$728,758.50 | N/A | \$193,584.50 | N/A |

Components

| Actual Information | |
|--|---|
| Description | File Name |
| Connectors Adapters | Information not provided. |
| Flexible Foam Transmission Line - dielectric, 1 5/8" | <div>Component Description: Firs 1/3 payment of the cost of the transmission line</div> <div>Amount: \$987.00</div> |

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 | \$0.00 | \$0.00 | | \$0.00 | |
| Sub-total | \$0.00 | \$0.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$837,383.50 | \$728,758.50 | N/A | \$193,584.50 | N/A |

Components

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 | \$87,770.00 | \$82,750.00 | | \$0.00 | |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$7,360.00 | \$7,000.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | 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 |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | N/A | N/A |

| | | | | | |
|--|--------------|--------------|-------------------------|--------------|-----|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N/A |
| Prepare request for Special Temporary Authorization | \$4,100.00 | \$3,000.00 | 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 |
| 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 |
| RF Exposure Measurements | \$21,050.00 | \$20,000.00 | N/A | N/A | N/A |
| Additional Field Engineering Service, 10 Days | \$5,000.00 | \$5,000.00 | \$500 per day (10 days) | N/A | N/A |
| Project management of the transition | \$25,280.00 | \$24,000.00 | N/A | N/A | N/A |
| Sub-total | \$87,770.00 | \$82,750.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$837,383.50 | \$728,758.50 | N/A | \$193,584.50 | 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 |
|--|-----------------------------|--------------------|------------------------------|---------------|---------------------------|
| Other Expenses | \$86,790.00 | \$86,185.00 | | \$0.00 | |
| Station Personnel | <i>\$21,100.00</i> | \$21,100.00 | See attachment | N/A | N/A |
| MVPD Notification of Channel Change | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$2,500.00</i> | \$2,500.00 | N/A | N/A | N/A |
| Equipment Storage | <i>\$5,000.00</i> | \$5,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | <i>\$15,000.00</i> | \$15,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$20,000.00</i> | \$20,000.00 | N/A | N/A | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |

| | | | | | |
|--|--------------|--------------|-----|--------------|-----|
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | 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 |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | N/A | N/A | N/A |
| Sub-total | \$86,790.00 | \$86,185.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$837,383.50 | \$728,758.50 | N/A | \$193,584.50 | N/A |

Components

Information not provided.

**Cost
Information**

Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|-----------------------|--------------------------------|----------------|--------------|
| Total for all systems | \$837,383.50 | \$728,758.50 | \$193,584.50 |

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>Esteban Paredes <i>General Manager</i></p> <p>03/27/2018</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"> 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>Esteban Paredes <i>General Manager</i></p> <p>03/27/2018</p> |

Attachments