

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 136750 Service: DTV Call WZRB Channel: 25 (UHF)

Sign:

ID:

File **0000028354**

Number:

FRN: **0003720042** Date **06/21**

Submitted: /2018

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|-----------------------------|-----------------------------|---------------------------------|
| ION MEDIA LICENSE COMPANY, LLC Doing Business As: ION MEDIA LICENSE COMPANY, LLC | Bianca Frye 601 Clearwater Park Road West Palm Beach, FL 33401 United States | +1 (561) 682- 4110 | BiancaFrye@ionmedia. com | Limited Liability Company |

Reimbursement Contact Name and Information Reimbursement Contact Information

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

Preparer Contact Information

Preparer Contact Name and Information

| ldress | Phone | Email |
|--------|--------|--------------|
| | ddress | ddress Phone |

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 | Install and operate from interim antenna on pre repack channel utilizing current non retunable transmitter. Replace current top mount antenna, transmission line and transmitter for operation on post repack channel. |

| 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 | |
| Manufacturer and Type | Model | DCX |
| | Year | 1997 |
| | Туре | Inductive Output Tube |
| | IOT Power Type | Two |
| | Power Capacity | 40 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 | THU9-4 EVO |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 6.5 kW |
| | Justification for New Transmitter | See attached Transmitter Exhibits. See attached Transmitter Upgrade Disclaimer |

Primary Transmitter

Other Transmitter Costs

| Question | Response |
|---------------------------------------|---|
| 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 |
| | Service Entrance (3 phases 800A 208V) Switchgear (industrial 800 amp) Transformer (480V) Power Rigid Conduit and Wiring |

| | Length | N/A |
|---|--|---|
| | Other Electrical Service | Yes |
| | Description | Electrical Installation for replacement transmitter |
| HVAC Service | Does the replacement transmitter require HVAC Service? | Yes |
| | Туре | Cooling Only |
| | Size | 5 tons |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leashold improvement? | No |
| | Size | N/A |
| Channel 14 Costs | Is an RF Consulting Engineer needed? | N/A |
| | Is a channel 14 Mask Filer needed? | N/A |
| | Is additional field engineering time needed? | N/A |
| | Number of Days | N/A |

Primary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|-------------------------------|--|
| RF Interconnect | Interconnect between RF System and transmission line |
| Removal of Existing Equipment | Removal of existing transmitters and equipment / Site Prep |

Antennas

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

Existing Antenna Information

| Section | Question | Response |
|------------------------------|--|--------------------|
| Existing Antenna Description | Type of change | Purchase New |
| | Antenna Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing antenna shared with another station or stations? | No |
| | Is the existing antenna directional? | Yes |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna | Class | Full Power |
| Manufacturer and Type | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Туре | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels | N/A |
| | Design power capacity in use | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 240.0 kW |

| Manufacturer | |
|--------------|---------------------------|
| Model | TFU- 22GTH-R 4BP300 |
| Year | 1997 |

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 | Class | Full Power |
| Manufacturer and Types | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Туре | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels/Bays | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Design power capacity in use | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 155.0 kW |
| | Manufacturer | |
| | | |

| Model | TFU-17JTH /VP-R 4BP300 |
|-------------------------------|--|
| Year | 2017 |
| Justification for New Antenna | Current slot antenna cannot be re- channeled |

Other Antenna Costs

| Section | Question | Response |
|--------------------------------|---|----------------------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | No |
| | Туре | |
| | Number of channels supported | N/A |
| | Frequencies of channels supported | N/A |
| | Frequency | N/A |
| | Do you need a combiner output splitter /switcher for dual feed lines? | N/A |
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes |
| | Broadband or Single Channel? | Single Channel |
| | Feed Line Size | 4 1/16 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 |

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 | Class | Full Power |
| Manufacturer and Type | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Horizontal |
| | Туре | Broadband Slot |
| | Number of Stations Supported | 1 |
| | Number of Panels/Bays | 8 |
| | Lower Limit | 470.00 MHz |
| | Upper Limit | 698.00 MHz |
| | Design power capacity in use | 25.0 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 31.0 kW |
| | Manufacturer | |
| | Model | TFU-8WB- 1-R |
| | Year | 2017 |

| Justification for New Antenna | Interim |
|-------------------------------|-------------|
| | antenna |
| | needed to |
| | to complete |
| | move to |
| | new |
| | channel |
| | |

Interim Antenna

Other Antenna Costs

| Section | Question | Response |
|--------------------------|---|---------------|
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes |
| | Broadband or Single Channel? | S |
| | Feed Line Size | 4 1/16 inches |
| 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? | No |
| 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 ^{Seffien} | Question | Response |
|------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

Primary Transmission Line

Existing Transmission Line

| n 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 | Manufacturer | |
| Line Manufacturer and Type | Туре | Rigid |
| | Diameter | 4 1/16 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 570 feet per run |

Primary Transmission

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 |
| | Туре | Rigid |
| | Diameter | 4 1/16 inches |
| | Other Diameter | N/A |
| | Segment Length | 19 1/2 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 570 feet per |
| | Justification for New Transmission Line | See attached Transmission Line Exhibit |

rimary

Other Transmission Line Expenses Not Listed

| Transmission Line | | Description |
|-------------------|----------------------------------|----------------------------------|
| | Sweep existing transmission line | Sweep existing transmission line |

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? | No |
| | Is this tower currently shared with any other stations? | No |
| | One or more FM, AM or TV radio broadcaster(s) | N/A |
| | Others Types of Users | N/A |
| | Is tower documented for structural analysis? | Unknown |
| | Is tower compliant with Rev G? | No |
| Existing Tower Structure | Do you have a tower registration number? | Yes |
| Registration | ASR Number | 1044529 |
| Coordinates (NAD83 (North American Datum of | Latitude (NAD83) | 34° 02' 39.0" N- |
| 1983)) | Longitude (NAD83) | 080° 59' 50.0" W- |
| | Overall Structure Height | 550.19 feet |
| | Support Structure Height | 501.96 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 379.92 feet |

| Structure Type | TOWER - Free Standing or Guyed Structure |
|------------------|--|
| Tower Owner | Roberts Tower Company II, LLC |
| Date Constructed | 04/20/1988 |

Primary Tower

Tower Modification Costs

| Section | Question | Response |
|----------------------|--|---|
| Engineering Study | Please what type of engineering study is required, if any: | Study needed for undocumented /poorly documented tower |
| Tower Reinforcements | Please select whether tower reinforcements are needed: | Major 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

| Name | Description |
|------------------|--|
| Structural Study | Structural analysis required after tower mapping completed |

| Intorim | antonna | installation | |
|---------|---------|--------------|---|
| ınterim | antenna | installation | 1 |

Install interim antenna to operate on current channel. Remove interim antenna after commencement of operations on new main antenna.

Outside Professional

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

| | Prepare request for Special Temporary Authority | Yes |
|----------------------------------|--|-----------|
| | Quantity | 1 |
| | NEPA Section 106 environmental review | Yes |
| | Environmental Assessment | Yes |
| | ASR Modification | Yes |
| | FAA Consultation (including preparation of FAA Form 7460) | Yes |
| | 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 | No |
| | Number of Days | N/A |
| | Justification | N/A |
| | Additional Field Engineering Service Number of Days | No N/A |

Outside
Professional Services Expenses Not Listed
Professional Services © pstsided.

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 | Yes |
| Other Miscellaneous Expenses | Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)? | Yes |
| | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | Yes |
| | Does this relocation require Equipment Storage? | Yes |
| | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | Yes |
| | Does this relocation require MVPD Notification of a Channel Change? | Yes |

Other Expenses Not Listed

Expenses Information not provided.

Cost Information

Transmitters

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Transmitter THU9-4 EVO | \$368,750.00 | \$354,250.00 | | \$66,212.64 | |
| Removal of Existing Equipment | \$25,000.00 | \$25,000.00 | N/A | N/A | N/A |
| RF Interconnect | \$25,000.00 | \$25,000.00 | N/A | N/A | N/A |
| 5 Ton system | \$20,250.00 | \$19,250.00 | 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 | \$66,212.64 | N/A |
| Other Electrical Service: Electrical Installation for replacement transmitter | \$25,000.00 | \$25,000.00 | N/A | N/A | N/A |
| Sub-total | \$368,750.00 | \$354,250.00 | N/A | \$66,212.64 | N/A |
| Total for all systems | \$1,877,890.00 | \$1,682,283.00 | N/A | \$78,712.64 | N/A |

Components

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

| RF Interconnect | Information not provided | | |
|--------------------------------|---------------------------|---------------------------|--|
| Tr interconnect | iniomation not provided. | Information not provided. | |
| 5 Ton system | Information not provided. | | |
| UHF - Liquid Cooled Solid | | | |
| State Transmitter 4.9 . 6.5 kW | Component Description: | 30% "deposit | |
| KVV | | payment for | |
| | | Comark | |
| | | Transmitter. | |
| | | Supporting | |
| | | documentatio | |
| | | attached. | |
| | Amount: | \$66,212.64 | |
| Other Electrical Service: | Information not provided. | | |
| Electrical Installation for | | | |
| replacement transmitter | | | |

Cost Information

Antennas

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

| Description Interim Antenna TFU-8WB-1- | Predetermined Cost Estimate \$86,300.00 | Estimated Cost \$83,593.00 | Estimated Cost Justification | Actual Cost \$0.00 | Actual Cost Justification |
|--|---|----------------------------------|------------------------------|--------------------------|------------------------------|
| R UHF - High Power, Side Mount, basic slot antenna, 8 bay,, 31 kW input, directional,, horizontally polarized | \$70,000.00 | \$70,000.00 | 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 4 1/16. feedline (if needed) | \$9,570.00 | \$7,193.00 | N/A | N/A | N/A |
| Primary Antenna TFU-17JTH /VP-R 4BP300 | \$305,800.00 | \$184,188.00 | | \$0.00 | |

| Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed) | \$9,570.00 | \$9,100.00 | 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 Top Mount (200- 1000 kW), One station antenna, elliptically or circularly polarized | \$289,500.00 | \$168,688.00 | V-Pol cost not included in reimbursement request | N/A | N/A |
| Sub-total | \$392,100.00 | \$267,781.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,877,890.00 | \$1,682,283.00 | N/A | \$78,712.64 | N/A |

Components

Information not provided.

Cost Information

Transmission Line

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Transmission Line | \$87,340.00 | \$81,417.00 | | \$0.00 | |
| Rigid Transmission Line - copper, 4 1 /16" | \$80,940.00 | \$75,017.00 | N/A | N/A | N/A |
| Sweep existing transmission line | \$6,400.00 | \$6,400.00 | N/A | N/A | N/A |
| Sub-total | \$87,340.00 | \$81,417.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,877,890.00 | \$1,682,283.00 | N/A | \$78,712.64 | 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 | \$779,800.00 | \$747,000.00 | | \$11,000.00 | |
| Structural Study | \$12,000.00 | \$12,000.00 | N/A | \$7,000.00 | N/A |
| Interim antenna installation | \$110,000.00 | \$110,000.00 | N/A | N/A | N/A |
| Tall Tower (greater than 500') | \$210,500.00 | \$200,000.00 | N/A | N/A | N/A |
| Major tower reinforcement /modifications | \$421,000.00 | \$400,000.00 | N/A | N/A | N/A |
| Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | \$26,300.00 | \$25,000.00 | N/A | \$4,000.00 | N/A |
| Sub-total | \$779,800.00 | \$747,000.00 | N/A | \$11,000.00 | N/A |
| Total for all systems | \$1,877,890.00 | \$1,682,283.00 | N/A | \$78,712.64 | N/A |

Components

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

| Structural Study | | |
|---|---------------------------|--|
| | Component Description: | Cost of tower structural study. Supporting documentation attached. This invoice has been paid. |
| | Amount: | \$7,000.00 |
| Interim antenna installation | Information not provided. | |
| Tall Tower (greater than 500') | Information not provided. | |
| Major tower reinforcement /modifications | Information not provided. | |
| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | Component Description: | Cost of tower mapping analysis. Supporting documentation attached. This invoice has been paid. |
| | Amount: | \$4,000.00 |

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 | \$161,210.00 | \$152,750.00 | | \$1,500.00 | |
| 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 |
| ASR modification (prepare FCC Form 854) | \$2,105.00 | \$2,000.00 | N/A | N/A | N/A |
| NEPA Section 106 environmental review, if needed | \$6,310.00 | \$6,000.00 | 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 - 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 request for Special Temporary Authorization | \$2,050.00 | \$1,500.00 | 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 | \$1,500.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | N/A | N/A |

| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | \$10,520.00 | \$10,000.00 | N/A | N/A | N/A |
|--|----------------|----------------|-----|-------------|-----|
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | \$2,105.00 | \$2,000.00 | N/A | N/A | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Sub-total | \$161,210.00 | \$152,750.00 | N/A | \$1,500.00 | N/A |
| Total for all systems | \$1,877,890.00 | \$1,682,283.00 | N/A | \$78,712.64 | N/A |

Components

| Actual Information Description | File Name |
|--|---------------------------|
| RF Exposure Measurements | Information not provided. |
| Comprehensive coverage verification via field study, if needed | Information not provided. |

| ASR modification (prepare FCC Form 854) | Information not provided. | |
|---|---------------------------|--|
| NEPA Section 106 environmental review, if needed | Information not provided. | |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | 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 request for Special Temporary Authorization | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: | Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid. |
| | Amount: | \$1,500.00 |

| Perform engineering study for new channel assignment and antenna development | Information not provided. |
|--|---------------------------|
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | Information not provided. |
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | Information not provided. |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. |
| Prepare and or review reimbursement form | 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 | \$88,690.00 | \$79,085.00 | | \$0.00 | |
| MVPD Notification of Channel Change | \$500.00 | \$500.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$0.00 | \$0.00 | The amount is yet to be determined (TBD) and ION will submit on-air announcement costs when finalized. | N/A | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |
| Local Zoning | \$25,000.00 | \$25,000.00 | N/A | N/A | N/A |
| Non-zoning permits | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | \$10,000.00 | \$10,000.00 | N/A | N/A | N/A |

| Total for all systems | \$1,877,890.00 | \$1,682,283.00 | N/A | \$78,712.64 | N/A |
|--|----------------|----------------|-----|-------------|-----|
| Sub-total | \$88,690.00 | \$79,085.00 | N/A | \$0.00 | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$2,000.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 minor change CP application | \$1,110.00 | \$1,070.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| Equipment Storage | \$10,000.00 | \$10,000.00 | N/A | N/A | N/A |

Components

Information not provided.

Cost Information

Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|-----------------------|--------------------------------|----------------|-------------|
| Total for all systems | \$1,877,890.00 | \$1,682,283.00 | \$78,712.64 |

| Reimbursem | entestiatus | 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 |

Section Question Response

Submission of Estimated Expenses Statements

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.

- 1. The Authorized
 Person signing
 below certifies that he
 /she is authorized to
 submit this TV
 Broadcaster
 Relocation Fund
 Reimbursement
 Form on behalf of
 the above-named
 entity.
- 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.
- 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

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

Mario Vasquez

Vice President -Finance, Operations

06/21/2018

Section Question Response

Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).

- 1. The Authorized
 Person signing
 below certifies and
 represents that he
 /she is authorized to
 submit this TV
 Broadcaster
 Relocation Fund
 Reimbursement
 Form on behalf of
 the above-named
 entity.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- 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.

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 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.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Mario Vasquez Vice President -Finance, Operations

06/21/2018

Attachments