

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 3661 Service: DTV Call WTVW Channel: 22 (UHF)

ID: Sign:

ID: File

0000028334

Number:

FRN: **0004284899** Date **06/28**

Submitted: /2019

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|----------------------------------|---|-----------------------------|-------------------------------|-------------------|
| MISSION BROADCASTING, INC. | 30400 DETROIT ROAD SUITE 304 WESTLAKE, OH 44145 United States | +1 (440) 526- 2227 | missionbroadcasting@gmail.com | Corporation |

Reimbursement Contact Name and Information Reimbursement Contact Information

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

Preparer Contact Information

Preparer Contact Name and Information

| Applicant | Address | Phone | Email |
|------------------------------|--|-------------------|---------------------|
| Henry Gola Wiley Rein LLP | 1776 K Street, N.W. Washington, DC 20006 United States | +1 (202) 719-7561 | hgola@wileyrein.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 | Replace transmitter, antenna and line. Acquire interim antenna and line for continued operation during construction and duration of the assigned phase. Map and analyze tower; design and implement modifications if required. See attached. |

Transmitters

| rs | 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 | DCX Millennium |
| | Year | 2005 |
| | Туре | Inductive Output Tube |
| | IOT Power Type | Single |
| | Power Capacity | 30 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 | TBD |
| | Transmitter Type | Inductive Output Tube |
| | IOT Power Type | Single |
| | Power capacity | 25 kW |
| | Justification for New Transmitter | The manufacturer of the existing IOT transmitter advises that the transmitter cannot be retuned to the assigned channel. A new Comark Paragon MSDC IOT transmitter is the basis for a replacement as suggested by the FCC. See attachment. |

Primary Transmitter

Other Transmitter Costs

| Section | Question | Response |
|---|--|------------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
| | Switchgear (industrial 800 amp) | Yes |
| | Transformer (480V) | Yes |
| | Power | 150 kVA |
| | Rigid Conduit and Wiring | Yes |
| | Size | 3 inches |
| | Length | 100.0 feet |
| | Other Electrical Service | No |
| | Description | N/A |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Туре | 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 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 |
|-------------------------------|--|
| Additional Interior RF System | Interior RF System Existing Transmitter to Interim Transmission line |

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 | Side 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) | 1000.0 kW |

| Manufacturer | |
|--------------|-----------------------|
| Model | TFU- 30DSC T170 |
| Year | 2005 |

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 | 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) | 570.0 kW |
| | Manufacturer | |
| | Model | TFU-29ETT /VP-R 3T170 |

| Year | 2018 |
|-------------------------------|---|
| Justification for New Antenna | The existing primary antenna is a single channel slotted coaxial which cannot accommodate the assigned channel. The new antenna is moving from side to top, new line needed for the new main antenna. The existing antenna and line will serve as interim |

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 | 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 |

Other Antenna Cost Not Listed

| Name | Description |
|-------------------------------|-------------------------------|
| Feed Through Complex | Feed Through Complex |
| Wedding Cake Mounting Adapter | Wedding Cake Mounting Adapter |

| 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 | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 900 feet per run |

Primary Transmi

New Transmission Line

| smissio | 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? | Yes |
| | | Туре | 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 | 980 feet per run |
| | | Justification for New Transmission Line | Antenna moving to top mount. New line needed to feed new top mount antenna. |

Primary Other Transmission Line Expenses Not Listed

Transmission loine tion 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

| Existing Tower Description | Type of change | |
|--------------------------------|---|----------------------|
| Description | .) pe e. e. e. e. e. | 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? | No |
| | Is tower compliant with Rev G? | No |
| Existing Tower | Do you have a tower registration number? | Yes |
| Structure Registration | ASR Number | 1027511 |
| Coordinates (NAD83 (| Latitude (NAD83) | 38° 01' 26.8" N- |
| North American Datum of 1983)) | Longitude (NAD83) | 087° 21' 43.3" W- |
| | Overall Structure Height | 890.08 feet |
| | Support Structure Height | 879.91 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 476.04 feet |

| Structure Type | GTOWER - Guyed Structure Used for Communication Purposes |
|------------------|--|
| Tower Owner | American Tower, LLC |
| Date Constructed | 09/01/1982 |

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

Information not provided.

Outside Professional

| Section | Question | Response |
|--|--|---|
| Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 283 |
| | Explanation | Schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel trained in project management for such complex projects. Internal accounting and Project management. |
| 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 |
| 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 | No |
| | Environmental Assessment | No |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | Negotiation of Lease and other Matter for Shared Locations | Yes |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | No |
| | | |

| RF exposure measurements | No |
|--------------------------------------|---|
| Additional Field Engineering Service | Yes |
| Number of Days | 17 |
| Justification | It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services. |

Outside
Professional Services Expenses Not Listed
Professional Services ©qstsided.

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 | No |
| | FCC License to Cover Application | No |
| | 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 |
|-----------|---|
| Sales Tax | Sales and use tax for goods and services. |

Cost Information

Transmitters

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

| Predetermined Estimated Cost Actual Cost Description Cost Estimate Cost Justification Actual Cost Justification Primary \$786,950.00 \$1,071,051.00 \$0.00 Transmitter | | | | | | |
|---|------------------------------------|--------------|----------------|--|-------------|------------------------------|
| Single IOT \$578,000.00 \$865,551.00 The purchase price of the new transmitter is based on a Proposal from Comark for a 25 kW MSDC IOT as suggested by the FCC. See attachment. | Description | | | | Actual Cost | Actual Cost Justification |
| System (25 kW) | Primary Transmitter TBD | \$786,950.00 | \$1,071,051.00 | | \$0.00 | |
| - industrial 800 amp Transformer \$25,550.00 \$24,300.00 N/A N/A N/A N/A N/A 3 phase /480v - 150 KVA 3" Rigid \$5,200.00 \$4,900.00 N/A N/A N/A N/A Conduit and Wiring (Cost per foot) Additional Interior RF System | system (25 | \$578,000.00 | \$865,551.00 | purchase price of the new transmitter is based on a Proposal from Comark for a 25 kW MSDC IOT as suggested by the FCC. See | N/A | N/A |
| 3 phase /480v - 150 KVA 3" Rigid \$5,200.00 \$4,900.00 N/A N/A N/A N/A Conduit and Wiring (Cost per foot) Additional Interior RF System | - industrial | \$38,200.00 | \$36,300.00 | N/A | N/A | N/A |
| Conduit and Wiring (Cost per foot) Additional \$140,000.00 \$140,000.00 N/A N/A N/A Interior RF System | 3 phase /480v - 150 | \$25,550.00 | \$24,300.00 | N/A | N/A | N/A |
| Interior RF System | Conduit and Wiring (Cost per | \$5,200.00 | \$4,900.00 | N/A | N/A | N/A |
| Sub-total \$786,950.00 \$1,071,051.00 N/A \$0.00 N/A | Interior RF | \$140,000.00 | \$140,000.00 | N/A | N/A | N/A |
| | Sub-total | \$786,950.00 | \$1,071,051.00 | N/A | \$0.00 | N/A |

Total for all \$2,374,444.00 \$2,508,345.70 N/A \$413,772.70 N/A systems

Components

Information not provided.

Cost Information

Antennas

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|---|--------------|------------------------------|
| Primary Antenna TFU-29ETT /VP-R 3T170 | \$347,755.00 | \$284,498.00 | | \$250,288.20 | |
| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) | \$12,300.00 | \$10,710.00 | See Dielectric quote DMS140-4 | \$9,639.00 | N/A |
| Feed Through Complex | \$8,400.00 | \$8,400.00 | See Dielectric quote DMS140-4 | \$7,560.00 | N/A |
| Wedding Cake Mounting Adapter | \$30,825.00 | \$30,825.00 | See Dielectric quote DMS140-4 | \$27,742.50 | N/A |
| UHF - High Power Top Mount (200-1000 kW), One station antenna, elliptically or circularly polarized | \$289,500.00 | \$228,163.00 | Total cost \$258,388 less vpol (\$30,225); see Dielectric quote DMS140-4 | \$205,346.70 | N/A |

| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
|---|----------------|----------------|-----|--------------|-----|
| Sub-total | \$347,755.00 | \$284,498.00 | N/A | \$250,288.20 | N/A |
| Total for all systems | \$2,374,444.00 | \$2,508,345.70 | N/A | \$413,772.70 | N/A |

| Actual Information Description | File Name | |
|--|---------------------------------|--|
| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) | Component Description: Amount: | Elbow complex, installment #2 \$4,819.50 |
| | Component Description: Amount: | Elbow complex, installment #1, line 5 of invoice \$4,819.50 |
| Feed Through Complex | Component Description: | Feed through |
| | Amount: | complex, installment #2 \$3,780.00 |
| | Component Description: | Feed through complex, |
| | Amount: | installment #1, line 4 of invoice \$3,780.00 |

| Nedding Cake Mounting Adapter | Component Description | Wodding ooks |
|----------------------------------|---------------------------|--------------------------------|
| | Component Description: | Wedding cake mounting adapter, |
| | | installment #2 |
| | Amount: | \$13,871.25 |
| | Component Description: | Wedding Cake |
| | Component Description. | Mounting Care |
| | | Adapter, |
| | | installment #1, |
| | | line 3 of invoice |
| | Amount: | \$13,871.25 |
| UHF - High Power Top | | |
| Mount (200-1000 kW), One | Component Description: | Antenna, |
| station antenna, elliptically | | installment #2 |
| or circularly polarized | Amount: | \$102,673.35 |
| | Component Description: | Antenna, |
| | | installment #1, |
| | | line 1 of invoice |
| | Amount: | \$102,673.35 |
| Sweep test of existing antenna | Information not provided. | |

Cost Information

Transmission Line

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|--------------------------------|-------------------|--|--------------|------------------------------|
| Primary Transmission Line | \$197,960.00 | \$148,806.70 | | \$133,925.50 | |
| Rigid Transmission Line - copper, 6 1/8" | \$197,960.00 | \$148,806.70 | See Dielectric quote DMS140-4 | \$133,925.50 | N/A |
| Sub-total | \$197,960.00 | \$148,806.70 | N/A | \$133,925.50 | N/A |
| Total for all systems | \$2,374,444.00 | \$2,508,345.70 | N/A | \$413,772.70 | N/A |

| Actual Information Description | File Name | |
|--|--------------------------------|---|
| Rigid Transmission Line - copper, 6 1/8" | Component Description: Amount: | Transmission line, installment #2 \$66,962.75 |
| | Component Description: | Transmission line, installment #1, line |
| | Amount: | 6 of invoice \$66,962.75 |

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 GTOWER | \$657,800.00 | \$625,000.00 | | \$2,900.00 | |
| 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 | \$2,900.00 | 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 |
| Sub-total | \$657,800.00 | \$625,000.00 | N/A | \$2,900.00 | N/A |
| Total for all systems | \$2,374,444.00 | \$2,508,345.70 | N/A | \$413,772.70 | N/A |

| Actual Information Description | File Name | |
|---|--------------------------------|-----------------------------|
| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | Component Description: Amount: | Tower mapping \$2,900.00 |

| Tall Tower (greater than 500') | Information not provided. |
|--|---------------------------|
| Major tower reinforcement /modifications | 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 | \$113,634.00 | \$109,200.00 | | \$24,659.00 | |
| Additional Field Engineering Service, 17 Days | \$34,000.00 | \$34,000.00 | 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 | \$3,000.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$7,000.00 | 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 | \$2,500.00 | N/A |
| Project management | \$44,714.00 | \$42,450.00 | N/A | \$12,159.00 | N/A |
| of the transition | | | | | |

| Total for all | \$2,374,444.00 | \$2,508,345.70 | N/A | \$413,772.70 | N/A |
|---------------|----------------|----------------|-----|--------------|-----|
| systems | | | | | |

| Actual Information Description | File Name |
|---|---------------------------|
| Additional Field Engineering Service, 17 Days | 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. |

| (main) Construction Demi | Component Description: | See cover letter |
|--|---------------------------|--------------------------------|
| (main), Construction Permit | | item 4 - Prepare |
| Application | | engineering section |
| | | of FCC form 2100, |
| | | Construction |
| | | Permit Application |
| | | services provided |
| | | by consultant |
| | | Kessler and |
| | | Gehman |
| | | Associates. |
| | Amount: | \$3,000.00 |
| Perform engineering study | | |
| for new channel | Component Description: | See cover letter |
| assignment and antenna | | item 3 - Perform |
| development | | engineering study |
| | | for new channel |
| | | assignment and |
| | | antenna |
| | | development |
| | | provided by |
| | | consultant Kessler |
| | | and Gehman |
| | | Associates. |
| | Amount: | \$7,000.00 |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. | |
| Prepare and or review | | |
| reimbursement form | Component Description: | See cover letter |
| | | item 2 - Prepare |
| | | and or review |
| | | reimbursement |
| | | form services |
| | | provided by consultant Kessler |
| | | and Gehman |
| | | Associates. |
| | Amount: | \$2,500.00 |
| | , anounc | Ψ2,000.00 |
| Project management of the | | |

Component Description: Project

Management for Structural Analysis

and Tower

Modifications for

dates September 29, 2018 through October 26, 2018

including

consultants Kessler

and Gehman Associates.

Amount: \$375.00

Component Description: Project

management services 3.30.19 through 4.26.19

Amount: \$600.00

Component Description: Project

Management for Structural Analysis

and Tower Modifications. Services from July 28, 2018 through September 28,

2018.

Amount: \$75.00

Component Description: Project

Amount:

Management for Structural Analysis

and Tower
Modifications for
dates October 27,
2018 through
November 30,
2018 including
consultants Kessler

and Gehman Associates. \$3,200.00 **Component Description:** Project

Management for Structural Analysis

and Tower Modifications for

dates May 26, 2018 through June 29, 2018 including consultants Kessler

and Gehman Associates.

Amount: \$450.00

Component Description: Project

Management for Structural Analysis

and Tower
Modifications.
Services from

December 1, 2018 through December

31, 2018.

Amount: \$300.00

Component Description: See lines 1, 5-8 on

cover letter -

Project

Management for Structural Analysis

and Tower
Modifications
services and
reporting
preparation

including services

from consultants
Kessler and
Gehman
Associates.

Amount: \$4,309.00

Component Description: Project

Management for Structural Analysis

and Tower

Modifications for dates January 1, 2019 through January 31, 2019

including

consultants Kessler

and Gehman Associates.

Amount: \$825.00

Component Description: Project

management services 3.2.19 through 3.29.19

Amount: \$225.00

Component Description: Project

management services 2.1.19 through 3.1.19

Amount: \$1,800.00

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 | \$270,345.00 | \$269,790.00 | | \$2,000.00 | |
| Sales Tax | \$149,600.00 | \$149,600.00 | Sales and use tax for good and services based on IN state rates. | N/A | N/A |
| MVPD Notification of Channel Change | \$3,500.00 | \$3,500.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$3,500.00 | \$3,500.00 | Costs to develop and produce spots and crawls for viewer notification. | N/A | N/A |
| Equipment Storage | \$16,000.00 | \$16,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | \$30,000.00 | \$30,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$16,000.00 | \$16,000.00 | N/A | N/A | N/A |

| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |
|---|----------------|----------------|-----|--------------|-----|
| Non-zoning permits | \$40,000.00 | \$40,000.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | N/A | \$2,000.00 | N/A |
| Sub-total | \$270,345.00 | \$269,790.00 | N/A | \$2,000.00 | N/A |
| Total for all systems | \$2,374,444.00 | \$2,508,345.70 | N/A | \$413,772.70 | N/A |

| Actual Information Description | File Name |
|--|---------------------------|
| Sales Tax | Information not provided. |
| MVPD Notification of Channel Change | Information not provided. |
| Develop and air announcement of upcoming channel change | Information not provided. |
| Equipment Storage | Information not provided. |
| Equipment Delivery and Handling Charges | Information not provided. |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. |
| FCC Filing Fees - Special Temporary Authorization request | Information not provided. |
| Non-zoning permits | Information not provided. |

DTV Medical Facility Notification

Component Description: Notification of

medical facilities

Amount: \$2,000.00

Cost Information

Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|-----------------------|--------------------------------|----------------|--------------|
| Total for all systems | \$2,374,444.00 | \$2,508,345.70 | \$413,772.70 |

| Reimbursem | envestiatus | 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. Dennis P.
Thatcher
President

06/28/2019

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. Dennis P.
Thatcher
President

06/28/2019

Attachments