



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **49157** | Service: **DTV** | Call **WCCB** | Channel: **18 (UHF)** |
ID: | Sign:
File **0000027054**
Number:
FRN: **0003828712** | Date **07/30**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
NORTH CAROLINA BROADCASTING PARTNERS Doing Business As: NORTH CAROLINA BROADCASTING PARTNERS	Beverly B. Poston ONE TELEVISION PLACE CHARLOTTE, NC 28205 United States	+1 (704) 372-4434	BPoston@bahakel.com	General Partnership

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
M. Anne Swanson <i>Legal Counsel</i> <i>Wilkinson Barker Knauer LLP</i>	M. Anne Swanson 1800 M Street NW Suite 800N Washington, DC 20036 United States	+1 (202) 383-3342	ASwanson@wbklaw.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		Install new primary transmitter. Install new antenna to operate on reassigned channel. See WCCB Form 399 Amendment 2-8-19 and WCCB Transition Drawing Revised 2-20-19.

Transmitters

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

**Primary
Transmitter**

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	DCX-3H (IOX/DCX Product Family)
	Year	2002
	Type	Inductive Output Tube
	IOT Power Type	Three
	Power Capacity	60 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	HPTV-PRLX- U32
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	55 kW
	Justification for New Transmitter	Manufacturer is not able to re-tune existing transmitter. New transmitter is required to operate on reassigned channel. New transmitter is upgrade to solid state with non- reimbursable cost increase of \$2070.30. See Exhibit B.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
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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	500.0 feet
	Other Electrical Service	Yes
	Description	Circuit breakers and disconnects for transmitter, pumps, and heat exchangers. Cost estimate is based upon previous projects experience of a similar nature. See Exhibit I.
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

Primary
Transmitter

Other Transmitter Cost Not Listed

Name	Description
Site Design and Survey by Manufacturer	Cost for site design and survey by manufacturer to determine electrical, HVAC, and space considerations for new primary transmitter and RF system. See Exhibit C.(Survey itself is in Exhibit B.)

Antennas

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

**Primary
Antenna**

Add 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 this antenna currently shared with any other stations?	No
	Is this 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)	1000.0 kW

Manufacturer	
Model	TFU- 24DSC-R 3C130
Year	2002

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)	1000.0 kW
	Manufacturer	

Model	TFU-24DSC /VP-R 3C30
Year	2019
Justification for New Antenna	Existing antenna is on a fixed channel and cannot be re-tuned. New antenna is upgrade to elliptical polarization with non-reimbursable cost of \$20,100. See attached Amendment 2-8-19 and Dielectric quote.

Primary Antenna

Other Antenna Costs

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

	Feed Line Size	6 1/8 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	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

**Primary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

Transmission Line

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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	Owned
	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?	Yes
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1037877
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	35° 16' 02.0" N-
	Longitude (NAD83)	080° 44' 04.0" W-
	Overall Structure Height	1214.55 feet

Support Structure Height	1140.73 feet
Ground Elevation Above Mean Sea Level (AMSL)	779.85 feet
Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	WCCB-TV, Inc.
Date Constructed	01/01/1966

Primary Tower

Tower Modification Costs

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

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Information not provided.

**Outside
Professional Services Costs**

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	480
	Explanation	Reassigned station does not have sufficient qualified internal personnel for project management. It is estimated that outside project management will be required for 60 days while new antennas, transmission line, and transmitter are installed.
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes

	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	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	No
	Additional Field Engineering Service	No

	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**

Name	Description
WCCB Additional Repack Related Legal Services	Attorneys Fees - Repack requirements (vendor contracts, refinancing, tax, affiliation agreements, equipment selection /justification). See Exhibit H

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	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?	No
	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
Wireless Microphones	To replace station's wireless microphones that will be displaced because existing channels are eliminated due to repack. See Exhibit F.

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 HPTV-PRLX- U32	\$1,823,800.00	\$1,394,918.70		\$1,393,687.95	
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	\$1,788,000.00	\$1,372,118.70	N/A	\$1,372,118.70	Sub-total matches Estimated Cost
Site Design and Survey by Manufacturer	<i>\$15,300.00</i>	\$15,300.00	N/A	\$15,300.00	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$13,000.00	\$0.00	N/A	N/A	N/A

Other Electrical Service: Circuit breakers and disconnects for transmitter, pumps, and heat exchangers. Cost estimate is based upon previous projects experience of a similar nature. See Exhibit I.	\$7,500.00	\$7,500.00	N/A	\$6,269.25	N/A
Sub-total	\$1,823,800.00	\$1,394,918.70	N/A	\$1,393,687.95	N/A
Total for all systems	\$2,442,225.14	\$1,861,758.84	N/A	\$1,537,718.64	N/A

Components

Actual Information	
Description	File Name

UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	<div> Component Description: WCCB Transmitter Fourth Payment </div> <div> Amount: \$67,877.20 </div>
	<div> Component Description: WCCB Transmitter Deposit Invoice </div> <div> Amount: \$473,070.10 </div>
	<div> Component Description: WCCB Transmitter Second Payment </div> <div> Amount: \$407,263.20 </div>
	<div> Component Description: WCCB Transmitter Third Payment </div> <div> Amount: \$407,263.20 </div>
	<div> Component Description: WCCB Transmitter Change Order Payment </div> <div> Amount: \$16,645.00 </div>
Site Design and Survey by Manufacturer	<div> Component Description: Final payment for Site Survey and Design. </div> <div> Amount: \$13,300.00 </div>
	<div> Component Description: Down payment for Site Survey and Design. </div> <div> Amount: \$2,000.00 </div>
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.

Other Electrical Service:
Circuit breakers and
disconnects for transmitter,
pumps, and heat
exchangers. Cost estimate
is based upon previous
projects experience of a
similar nature. See Exhibit I.

Component Description:

WCCB
Transmitter
Electrical
Installation

Amount:

\$5,838.00

Component Description:

WCCB
Transmitter
Ground Strap

Amount:

\$431.25

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-24DSC /VP-R 3C30	\$192,855.00	\$190,445.00		\$85,700.25	
UHF - High Power, Side Mount, basic slot antenna, 1000 kW input, directional,, elliptically or circularly polarized	<i>\$150,675.00</i>	\$150,675.00	N/A	\$67,803.75	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$2,880.00	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$11,620.00	N/A	\$5,229.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$21,750.00	N/A	\$9,787.50	N/A

Sub-total	\$192,855.00	\$190,445.00	N/A	\$85,700.25	N/A
Total for all systems	\$2,442,225.14	\$1,861,758.84	N/A	\$1,537,718.64	N/A

Components

Actual Information	
Description	File Name
UHF - High Power, Side Mount, basic slot antenna, 1000 kW input, directional,, elliptically or circularly polarized	<p>Component Description: WCCB Main Antenna First Payment</p> <p>Amount: \$67,803.75</p>
Sweep test of existing antenna	<p>Component Description: WCCB Main Antenna Sweep Test First Payment</p> <p>Amount: \$2,880.00</p>
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	<p>Component Description: WCCB Main Antenna Elbow Complex First Payment</p> <p>Amount: \$5,229.00</p>
Side mount brackets for high power antennas (if not included in antenna base cost)	<p>Component Description: WCCB Main Antenna Mounts First Payment</p> <p>Amount: \$9,787.50</p>

Cost Information **Transmission Line**
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 GTOWER	\$223,100.00	\$80,500.00		\$19,100.00	
Tall Tower (greater than 500')	\$210,500.00	\$68,500.00	N/A	N/A	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	\$19,100.00	See Exhibit K
Sub-total	\$223,100.00	\$80,500.00	N/A	\$19,100.00	N/A
Total for all systems	\$2,442,225.14	\$1,861,758.84	N/A	\$1,537,718.64	N/A

Components

Actual Information	
Description	File Name
Tall Tower (greater than 500')	Information not provided.

Structural engineering tower
load study for well
documented tower

Component Description: WCCB
Ultrasound
Testing Invoice
Amount: \$4,500.00

Component Description: WCCB Tower
Structural
Analysis Invoice
(revised)
Amount: \$6,600.00

Component Description: WCCB Corrosion
Risk Analysis
Invoice
Amount: \$1,250.00

Component Description: WCCB Tower
Wind and Ice
Analysis (revised)
Amount: \$1,250.00

Component Description: WCCB Ultrasonic
Testing Invoice
Amount: \$5,500.00

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	\$122,760.00	\$116,750.00		\$26,926.34	
WCCB Additional Repack Related Legal Services	<i>\$12,000.00</i>	\$12,000.00	N/A	\$11,850.90	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
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	\$168.00	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$1,278.00	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	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$2,312.50	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	\$11,316.94	See Exhibit J
Project management of the transition	\$75,840.00	\$72,000.00	N/A	N/A	N/A
Sub-total	\$122,760.00	\$116,750.00	N/A	\$26,926.34	N/A
Total for all systems	\$2,442,225.14	\$1,861,758.84	N/A	\$1,537,718.64	N/A

Components

Actual Information	
Description	File Name
WCCB Additional Repack Related Legal Services	Component Description:
	WCCB Post- Auction Repack
	Legal Services
	Amount:
	\$2,164.90
	Component Description:
	WCCB Post- Auction Repack
	Legal Services
	Amount:
	\$819.00
	Component Description:
	WCCB Post- Auction Repack
	Legal Services
	Amount:
	\$8,867.00
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.

ASR modification (prepare FCC Form 854)	<div> <div>Component Description:</div> <div>WCCB Antenna Structure Registration Legal Issues (revised)</div> <div>Amount:</div> <div>\$168.00</div> </div>
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<div> <div>Component Description:</div> <div>WCCB Construction Permit Legal Issues (revised)</div> <div>Amount:</div> <div>\$498.00</div> </div> <div> <div>Component Description:</div> <div>WCCB Construction Permit Legal Issues (revised)</div> <div>Amount:</div> <div>\$780.00</div> </div>
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	Information not provided.

Perform engineering study for new channel assignment and antenna development	<table> <tr> <td data-bbox="715 174 1023 210">Component Description:</td><td data-bbox="1158 174 1370 244">WCCB Eng Study Invoice</td></tr> <tr> <td data-bbox="715 255 826 291">Amount:</td><td data-bbox="1158 255 1254 291">\$250.00</td></tr> <tr> <td data-bbox="715 394 1023 430">Component Description:</td><td data-bbox="1158 394 1370 463">WCCB Eng Study Invoice</td></tr> <tr> <td data-bbox="715 474 826 510">Amount:</td><td data-bbox="1158 474 1254 510">\$312.50</td></tr> <tr> <td data-bbox="715 613 1023 649">Component Description:</td><td data-bbox="1158 613 1370 683">WCCB Eng Study Invoice</td></tr> <tr> <td data-bbox="715 694 826 730">Amount:</td><td data-bbox="1158 694 1278 730">\$1,500.00</td></tr> <tr> <td data-bbox="715 833 1023 869">Component Description:</td><td data-bbox="1158 833 1370 902">WCCB Eng Study Invoice (revised)</td></tr> <tr> <td data-bbox="715 913 826 949">Amount:</td><td data-bbox="1158 913 1254 949">\$250.00</td></tr> </table>	Component Description:	WCCB Eng Study Invoice	Amount:	\$250.00	Component Description:	WCCB Eng Study Invoice	Amount:	\$312.50	Component Description:	WCCB Eng Study Invoice	Amount:	\$1,500.00	Component Description:	WCCB Eng Study Invoice (revised)	Amount:	\$250.00
Component Description:	WCCB Eng Study Invoice																
Amount:	\$250.00																
Component Description:	WCCB Eng Study Invoice																
Amount:	\$312.50																
Component Description:	WCCB Eng Study Invoice																
Amount:	\$1,500.00																
Component Description:	WCCB Eng Study Invoice (revised)																
Amount:	\$250.00																
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.																

Prepare and or review reimbursement form	Component Description: WCCB Post-Auction Repack Legal Issues (revised) Amount: \$4,362.00
	Component Description: WCCB Post-Auction Repack Legal Services Amount: \$175.50
	Component Description: WCCB Post-Auction Repack Legal Issues. Amount: \$1,003.00
	Component Description: WCCB Post-Auction Repack Legal Issues (revised) Amount: \$3,198.00
	Component Description: WCCB Post-Auction Repack Legal Issues Amount: \$1,057.44
	Component Description: WCCB Post-Auction Repack Legal Issues Amount: \$1,521.00
Project management of the transition	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	\$79,710.14	\$79,145.14		\$12,304.10	
MVPD Notification of Channel Change	<i>\$1,000.00</i>	\$1,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$1,000.00</i>	\$1,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$12,500.00</i>	\$12,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$41,642.00</i>	\$41,642.00	See Exhibit B and Form 399 Amendment.	\$8,434.10	N/A
Non-zoning permits	<i>\$500.00</i>	\$500.00	N/A	\$120.00	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

DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$3,750.00	N/A
Wireless Microphones	\$10,988.14	\$10,988.14	N/A	N/A	N/A
Sub-total	\$79,710.14	\$79,145.14	N/A	\$12,304.10	N/A
Total for all systems	\$2,442,225.14	\$1,861,758.84	N/A	\$1,537,718.64	N/A

Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.

Disposal Costs (for equipment and other waste, net of any salvage value)	Component Description: WCCB Coolant Disposal Invoice Amount: \$6,934.10
	Component Description: WCCB Coolant TCLP Testing Invoice Amount: \$500.00
	Component Description: WCCB Coolant TCLP Testing Invoice Amount: \$500.00
	Component Description: WCCB Coolant Testing Invoice Amount: \$500.00
Non-zoning permits	Component Description: WCCB Transmitter Electrical Installation Permit Amount: \$120.00
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
DTV Medical Facility Notification	Component Description: WCCB Medical Facility Notification Amount: \$3,750.00
Wireless Microphones	Information not provided.

Cost Information	Grand Total		
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,442,225.14	\$1,861,758.84	\$1,537,718.64

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>Beverly Poston <i>President</i></p> <p>07/30/2019</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>Beverly Poston <i>President</i></p> <p>07/30/2019</p>

Attachments