



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **50147** | Service: **DTV** | Call **WOUB-TV** | Channel: **32 (UHF)**  
ID: | Sign:  
File **0000028541**  
Number:  
FRN: **0005012729** | Date **01/13**  
Submitted: **/2021**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>OHIO UNIVERSITY</b> Doing Business As: OHIO UNIVERSITY	Stephen Skidmore WOUB PUBLIC MEDIA 9 SOUTH COLLEGE STREET ATHENS, OH 45701 United States	+1 (740) 593-4927	SKIDMORE@OHIO.EDU	Government Entity

## 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
<b>Steve Skidmore</b> <i>Chief Technology Officer Ohio University / WOUB Public Media</i>	Steve Skidmore WOUB Public Media 9 South College Street RM 395F Athens, OH 45701 United States	+1 (740) 593-4927	skidmore@ohio.edu

**Broadcaster  
Information  
and  
Transition  
Plan**

Question		Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.		No
Briefly describe transition plan		See Attachment Exhibit C1 Amendment 2 Submitted 3-21-18 See Attachment Gates Air Submitted 3-21-18 See Attachment Exhibit B1 Amendment 1 submitted 8-2-16 See Attachment "Exhibit A1 WOUB Transition Plan"

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	ADC Visionary DT HP50SAW
	Year	2001
	Type	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	28 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	ULXTE-40
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	25.3 kW
	Justification for New Transmitter	3-21-19 The Gates Air Transmitter is a comparable substitute to the Rhode & Schwartz THU9-16 transmitter originally specified and approved. This transmitter was chosen through a competitive bid process required by the State of Ohio and Ohio University.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	150.0 feet
	Other Electrical Service	Yes
	Description	it will require new 220/110 service for the heat exchanger system, and support equipment.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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
Structural Reinforcement	The transmitter will be placed on a second story wooden floor. It will require some structural reinforcement to support the weight of the transmitter.

**Antennas**

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

**Primary  
Antenna****Existing Antenna Information**

Section	Question	Response
Existing Antenna Description	Type of change	Retune Existing
	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?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1
	Number of Panels	40
	Design power capacity in use	34.0 %
	Lower Limit	470.00 MHz

Upper Limit	860.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	250.0 kW
Manufacturer	Dielectric
Model	TUF-04-10 /40H-SP-1-T
Year	2001

### Primary Antenna

#### Adjustment to Existing Antenna

Section	Question	Response
Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	Yes

### Primary Antenna

#### Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Type	New
	Number of channels supported	2
	Frequencies of channels supported	RF channel
	Frequency	N/A

Enter a list of RF channel numbers.

RF Channel Number
27
32



**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Name		Description
Station Load		Must install a station load to conduct testing of the transmitter before on air transition. QUOTE ATTACHED Exhibit B3
Four Coaxial Elbows		61/8 elbows to connect combiner to Wave Guide switch.
Transition		61/8 coaxial transition to waveguide to connect to existing waveguide switch

**Transmission Line**

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

**Primary Transmission Line****Existing Transmission Line**

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	Dielectrict
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	910 feet per run

Primary Transmission Line	Other Transmission Line Expenses Not Listed
Information not provided.	

**Tower Equipment And Rigging Costs**

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

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	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	1041734
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	39° 18' 52.0" N-
	Longitude (NAD83)	082° 08' 59.0" W-
	Overall Structure Height	859.57 feet
	Support Structure Height	820.53 feet
	Ground Elevation Above Mean Sea Level (AMSL)	784.77 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	OHIO UNIVERSITY TELECOM CENTER DBA = WOUB-FM /TV
	Date Constructed	01/01/1978

**Primary  
Tower**

**Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
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**

Name	Description
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**Antenna and Transmission Line Tuning**

WOUB plans to utilize the existing Dielectric antenna and the feed line to minimize costs. This will require physical inspection of antenna and feed line on the tower and will require tower rigging to accomplish the inspection and tuning.

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**Outside  
Professional**

Section	Question	Response
<b>Services Costs Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	100
	Explanation	University public TV station requires additional project management support for repack work.
<b>Outside RF consulting Engineering Services</b>	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	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes

	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	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
<b>Site Survey</b>	Site survey will determine actual site conditions and determine the materials and components required for system installation /integration for the WOUB site.



## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	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	No
<b>Other Miscellaneous Expenses</b>	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
<b>Additional Legal Expenses</b>	Additional legal expenses for small market, University licensee public TV station
<b>Quarterly Progress Reports</b>	FCC-required quarterly progress reports for repacked station

## 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
<b>Primary Transmitter ULXTE-40</b>	<b>\$1,012,700.00</b>	<b>\$693,573.20</b>		<b>\$620,535.02</b>	
Structural Reinforcement	<i>\$5,000.00</i>	\$5,000.00	To utilize existing building it will be necessary to reinforce the existing floor to support the weight of the new transmitter. This expense is cost effective compared to adding an addition to the existing building.	\$30.58	N/A
Other Electrical Service: it will require new 220/110 service for the heat exchanger system, and support equipment.	<i>\$20,000.00</i>	\$20,000.00	Additional electrical expenses will be determined after the final transmitter manufacturer is determined and a site analysis is conducted.	N/A	N/A

2" Rigid Conduit and Wiring (Cost per foot)	\$3,900.00	\$3,750.00	N/A	\$0.00	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$629,823.20	Quote Attached Exhibit B2	\$620,504.44	N/A
Transformer 3 phase/480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$1,012,700.00	\$693,573.20	N/A	\$620,535.02	N/A
<b>Total for all systems</b>	\$1,549,947.06	\$1,001,330.26	N/A	\$668,895.52	N/A

## Components

Actual Information	
Description	File Name
Structural Reinforcement	<p><b>Component Description:</b> Parts needed to make repairs at the WOUB transmitter on a Sunday. 10.1 oz white paint able latex caulking 12 oz spray foam insulation, Hillman linch pin, Hitch pin steel</p> <p><b>Amount:</b> \$30.58</p>
Other Electrical Service: it will require new 220/110 service for the heat exchanger system, and support equipment.	Information not provided.
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	<b>Component Description:</b>  <b>Amount:</b>	ULXTE - 40 Transmitter \$620,504.44
Transformer 3 phase/480v - 300 KVA	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 TUF-04-10 /40H-SP-1-T	\$116,305.06	\$111,775.06		\$0.00	
New combiner, cost per channel (without antenna)	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Station Load	<i>\$18,707.06</i>	\$18,707.06	The new transmitter must be tested off-air before the official testing period begins. A station load is required to do this testing. Quote Attached Exhibit B3	N/A	N/A
Transition	<i>\$1,500.00</i>	\$1,500.00	Direct quote from ERI, Attachment A3	N/A	N/A

Four Coaxial Elbows	<b>\$5,168.00</b>	\$5,168.00	Direct Quote from ERI, INC, Attachment A2	N/A	N/A
<b>Sub-total</b>	\$116,305.06	\$111,775.06	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,549,947.06	\$1,001,330.26	N/A	\$668,895.52	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	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$1,549,947.06	\$1,001,330.26	N/A	\$668,895.52	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	\$230,500.00	\$20,000.00		\$8,316.00	
Atenna and Transmission Line Tuning	<i>\$20,000.00</i>	\$20,000.00	Utilizing the existing system will be cost effective compared to installing a new feed line and antenna. The system was initially optimized for Channels 20 and 27. it needs to be optimized for channel 32 as assigned in the repack.	\$8,316.00	Field Service WOUB Starting Scope of work. (1) Technician onsite for 2 days to take sweep measurements to the antenna. (2) Dielectric climber for 2 days to inspect transmission line, spring hanger tensions and the antenna.

Tall Tower (greater than 500')	\$210,500.00	\$0.00	We are not building a new tower. The LMS system automatically added in a cost for a new antenna. I spoke with Raphael Sznajder and Cindy Cavell who said to submit it this way.	N/A	N/A
<b>Sub-total</b>	\$230,500.00	\$20,000.00	N/A	\$8,316.00	N/A
<b>Total for all systems</b>	\$1,549,947.06	\$1,001,330.26	N/A	\$668,895.52	N/A

## Components

Actual Information	
Description	File Name
Atenna and Transmission Line Tunning	<p><b>Component Description:</b></p> <p>Field Service WOUB Starting Scope of work. (1) Technician onsite for 2 days to take sweep measurements to the antenna. (2) Dielectric climber for 2 days to inspect transmission line, spring hanger tensions and the antenna.</p> <p><b>Amount:</b></p> <p>\$8,316.00</p>

Tall Tower (greater than 500')	Information not provided.
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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	\$145,892.00	\$139,482.00		\$35,044.50	
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	\$14,600.00	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 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	\$1,962.50	Construction Permit Application Develop final ERP and parameter for initial CP application Invoice cover services provided July 2017. Consultant Engineer Hourly - 6.2 Hours. Preparation brief statement to support amendment application, i
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$1,250.00	Conduct preliminary review of repacked channel assignment and implementation with existing broadband antenna. Determine m ERP to avoid exceeding 1 expansion. Invoice cover services through May 2017. Consulting engineer - hourly 3.2 hour.

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
Project management of the transition	\$15,800.00	\$15,000.00	University licensed public TV station requires additional project management support for repack transition.	N/A	N/A
Site Survey	<b>\$17,232.00</b>	\$17,232.00	Quote Attached: Exhibit A5	\$17,232.00	WOUB Repa Site Surve
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	WOUB may need to operate one of the transmitters at a reduced power during the transition /testing phase. Theoretically the existing RF system will support both channels 27 and 32 at full power. This is a precautionary request.	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
<b>Sub-total</b>	\$145,892.00	\$139,482.00	N/A	\$35,044.50	N/A
<b>Total for all systems</b>	\$1,549,947.06	\$1,001,330.26	N/A	\$668,895.52	N/A

## Components

Actual Information	
Description	File Name
Comprehensive coverage verification via field study, if needed	<div> <div>Component Description:</div> <div>Partial Payment. Milestone Payment #1 (20%) when PO was signed. The remaining 80% of the balance of the purchase order will be billed when the work is completed.</div> <div>Amount:</div> <div>\$2,920.00</div> </div> <div> <div>Component Description:</div> <div>Final Payment. Milestone Payment #2 (80%) for delivery of measurement report.</div> <div>Amount:</div> <div>\$11,680.00</div> </div>
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	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:**

Preparation of brief statement to support amendment to application, upload material and adjust proposed ERP. Invoice Covers services provided through August 201. Consultant Engineer Hourly - 1.6 hours.

**Amount:**

\$400.00

**Component Description:**

Construction Permit Application. Develop final ERP and parameter for initial CP application. Invoice cover services provided June-July 2017. Consultant Engineer Hourly - 6.25 Hours.

**Amount:**

\$1,562.50



Perform engineering study for new channel assignment and antenna development	<div data-bbox="707 174 1382 367"> <p><b>Component Description:</b> Consulting Engineer - J. Davis - Hourly (@ \$250 /hr)</p> <p><b>Amount:</b> \$200.00</p> </div> <div data-bbox="707 477 1382 624"> <p><b>Component Description:</b> Consulting Engineer - J. Davis - Hourly (@\$250/hr)</p> <p><b>Amount:</b> \$250.00</p> </div> <div data-bbox="707 734 1382 1480"> <p><b>Component Description:</b> Conduct preliminary review of repacked channel assignment and implementation with existing broadband antenna. Determine max ERP to avoid exceeding 1% expansion. Invoice covers services through May 2017. Consulting engineer - hourly 3.2 hour.</p> <p><b>Amount:</b> \$800.00</p> </div>
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Prepare and or review reimbursement form	Information not provided.
Project management of the transition	Information not provided.

Site Survey	<div> <div>Component Description:</div> <div>Amount:</div> </div> <div> <div>WOUB Repack Site Survey</div> <div>\$17,232.00</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.

## 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
<b>Other Expenses</b>	<b>\$44,550.00</b>	<b>\$36,500.00</b>		<b>\$5,000.00</b>	
Non-zoning permits	<i>\$500.00</i>	\$500.00	State required electrical permits.	N/A	N/A
Additional Legal Expenses	<i>\$10,000.00</i>	\$10,000.00	Additional legal expenses to advise and support small market University-licensed public TV station with repack transition.	N/A	N/A
MVPD Notification of Channel Change	<i>\$1,500.00</i>	\$1,500.00	Actual estimate from Joe Davis of Chesapeake RF Consultants. Attached Exhibit A4.	\$1,250.00	MVPD Notification WOUB FCC ID 50147 MVPD Notification Mailing Complete per FCC Repack
Develop and air announcement of upcoming channel change	<i>\$3,000.00</i>	\$3,000.00	Conceptional development, CG and video development, and production of 3 60 second spots.	N/A	N/A

Equipment Delivery and Handling Charges	<b>\$10,000.00</b>	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<b>\$3,000.00</b>	\$3,000.00	Estimate for local refuse removal.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$3,500.00	Actual estimate from Joe Davis of Chesapeake RF Consultants. Attached Exhibit A4	\$3,750.00	The original estimate was from Joe Davis of Chesapeake RF Consultants. When it came time to do the actual work Joe Davis was not available. His schedule was full. The work had to occur on a time table based on the FCC construction clock.
Quarterly Progress Reports	<b>\$5,000.00</b>	\$5,000.00	Assistance with preparation and filing of FCC-required quarterly status reports for repack transition.	N/A	N/A
<b>Sub-total</b>	<b>\$44,550.00</b>	<b>\$36,500.00</b>	N/A	<b>\$5,000.00</b>	N/A

<b>Total for all systems</b>	\$1,549,947.06	\$1,001,330.26	N/A	\$668,895.52	N/A
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## Components

<b>Actual Information</b>	
<b>Description</b>	<b>File Name</b>
Non-zoning permits	Information not provided.
Additional Legal Expenses	Information not provided.
MVPD Notification of Channel Change	<p><b>Component Description:</b> MVPD Notification WOUB FCC ID 50147 MVPD Notification Mailing Complete per FCC Repack</p> <p><b>Amount:</b> \$1,250.00</p>
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)	Information not provided.

DTV Medical Facility Notification	<div data-bbox="719 174 1366 488"> <p><b>Component Description:</b> Medical Notification WOUB FCC ID 50147 Medical Notification Mailing Complete per FCC Repack</p> <p><b>Amount:</b> \$3,750.00</p> </div> <div data-bbox="719 595 1366 869"> <p><b>Component Description:</b> Actual Cost for Medical Notifications based on updated quote from RF Notifications Inc.</p> <p><b>Amount:</b> \$3,750.00</p> </div>
Quarterly Progress Reports	Information not provided.

**Cost  
Information**

**Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$1,549,947.06	\$1,001,330.26	\$668,895.52

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
The facility has ceased operating on its pre-auction channel.	Yes
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"> <li>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.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	



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><b>Cindy Perry</b>  <i>Director  Grants  Accounting</i></p> <p>01/13/2021</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"> <li>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.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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><b>Cindy Perry</b>  <i>Director  Grants  Accounting</i></p> <p>01/13/2021</p>

## Attachments