## FCC Form 399:

Reimbursement Request

| Facility | 68695 | Service: DTV | Call | KPXC-TV | Channel: $\mathbf{1 8}$ (UHF) |
| :--- | :--- | :--- | :--- | :--- | :--- |
| ID: |  |  | Sign: |  |  |
| File | 0000028374 |  |  |  |  |
| Number: |  |  |  |  |  |
| FRN: $\mathbf{0 0 3 0 2 9 7 4 5 1}$ | Date | $\mathbf{0 6 / 2 2}$ |  |  |  |
|  |  | Submitted: | $/ \mathbf{2 0 2 1}$ |  |  |


| Applicant <br> Information | Applicant Name, Type, and Contact Information |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  | Applicant | Address | Phone | Email | Applicant <br> Type |  |
|  | INYO BROADCAST | Michelle Brester | +1 | mbrester@inyotv. | Limited |  |
|  | LICENSES LLC | 3110 W | $(435)$ | com | Liability |  |
|  | Doing Business As: INYO | California | $414-$ |  | Company |  |
|  | BROADCAST LICENSES | Avenue, Suite C | 1338 |  |  |  |
|  | LLC | Salt Lake City, |  |  |  |  |
|  |  | UT 84104 |  |  |  |  |
|  |  | United States |  |  |  |  |
|  |  |  |  |  |  |  |

## Reimbursementeontactintormation Name and Information

Applicant Address Phone Email
[Confidential]

Preparer Contact Information

Preparer Contact Name and Information
Applicant Address Phone Email

The Preparer is same as the reimbursement contact.

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.

Briefly describe transition plan

Yes

Relocate from ASR \#1254146 to ASR \#1034537. No interim facilities needed. Construct post-repack facilities at alternate location pursuant to CP authorization. Install new transmitter, RF system, transmission line, and antenna on postrepack channel.

| Transmitters | Section | Question | Response |
| :--- | :--- | :--- | :--- |
| Transmitter Related <br> Expenses | Do you have transmitter related expenses? | Yes |  |

Primary
Transmitter
Existing Transmitter Information

| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Transmitter Description | Type of change | Purchase <br> New |
|  | Use | Primary <br> (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 | Paragon |
|  | Year | 2008 |
|  | Type | Inductive Output Tube |
|  | IOT Power Type | Two |
|  | Power Capacity | 50 kW |


| Primary Transmitter | New Transmitter Costs |  |  |
| :---: | :---: | :---: | :---: |
|  | Section | Question | Response |
|  | New Transmitter | Use | Primary <br> (Main) |
|  |  | Change Type | Purchase New |
|  |  | Is this a request for upgraded equipment? | Yes |
|  |  | Manufacturer |  |
|  |  | Model | THU9-16 EVO |
|  |  | Transmitter Type | Solid State |
|  |  | Solid State Cooling | Liquid <br> Cooled |
|  |  | Solid State Power capacity | 25.5 kW |
|  |  | Justification for New Transmitter | Transmitter replacement is more cost effective then re-tune of Paragon transmitter. See attached exhibit. See attached Transmitter Upgrade Disclaimer. |


| Section | Question | Response |
| :--- | :--- | :--- |
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
|  | Switchgear (industrial 800 amp) | Yes |
|  | Transformer (480V) | No |
|  | Power | N/A |


|  | Rigid Conduit and Wiring | No |
| :---: | :---: | :---: |
|  | Size | N/A |
|  | Length | N/A |
|  | Other Electrical Service | Yes |
|  | Description | Electrical installation for replacement transmitter. |
| HVAC Service | Does the replacement transmitter require HVAC Service? | Yes |
|  | Type | Cooling Only |
|  | Size | 10 tons |
|  | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leashold improvement? | Yes |
|  | Size | $450.0$ <br> square feet |
| Channel 14 Costs | Is an RF Consulting Engineer needed? | N/A |
|  | Is a channel 14 Mask Filer needed? | N/A |
|  | Is additional field engineering time needed? | N/A |
|  | Number of Days | N/A |

Primary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
| :--- | :--- |
| Removal of existing equipment | Removal of existing transmitters and <br> equipment / Site prep |
| RF Interconnect | Interconnect between RF System and <br> transmission line |

## Antennas

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


| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Antenna Description | Type of change | Purchase <br> New |
|  | Antenna Use | Primary <br> (Main) |
|  | Description of Use | N/A |
|  | Ownership | Leased |
|  | Owner | Amercian <br> Tower |
|  | Site | N/A |
|  | Is this antenna currently shared with any other stations? | Yes |
|  | 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 | Class | Full Power |
|  | Mounting | Top Mount |
|  | Antenna position in stack | Bottom |
|  | Polarization | Horizontal |
|  | Type | Broadband Panel |
|  | Number of Stations Supported | 2 |
|  | Number of Panels | 14 |
|  | Design power capacity in use | 50.0 \% |
|  | Lower Limit | 470.00 MHz |
|  | Upper Limit | 698.00 MHz |
|  | Other Antenna Type | N/A |
|  | ERP: (Effective Radiated Power) | 1000.0 kW |


| Manufacturer |  |
| :--- | :--- |
| Model | TUD-C5-14 <br> /70H-2-B |
| Year | 2009 |

Facility ID's and Call Signs of all stations with whom the antenna is shared.
Facility ID Call Sign

166510 KPJR-TV

| Section | Question | Response |
| :---: | :---: | :---: |
| New Antenna Description | Use | Primary <br> (Main) |
|  | Description of Use | N/A |
|  | Change Type | Purchase <br> 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 <br> Manufacturer and Types | Class | Full Power |
|  | Mounting | Side Mount |
|  | Antenna position in stack | Not in Stack |
|  | Polarization | Elliptical |
|  | Type | Slotted <br> 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) | 330.0 kW |
|  | Manufacturer |  |


| Model | TFU-18DSC <br> /VP-R C170 |
| :--- | :--- |
| Year | 2018 |
| Justification for New Antenna | Needed for <br> post-repack <br> channel <br> operations. |

Primary Other Antenna Costs Antenna

| Section | Question | Response |
| :---: | :---: | :---: |
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? |  |
|  | 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 <br> Channel |
|  | Feed Line Size | $6 \text { 1/8 }$ <br> 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? | Yes |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Primary
Other Antenna Cost Not Listed
Antenna Information not provided.

| TransmissionSeffiien | Question | Response |
| :---: | :--- | :--- |
| Transmission Line <br> Related Expenses | Do you have transmission line related <br> expenses? | Yes |


| Primary Existing Transmission Line |  |  |
| :---: | :---: | :---: |
| Transmissionseitiofn | Question | Response |
| Existing Transmission Line Description | Type of change | Purchase New |
|  | Use | Primary <br> (Main) |
|  | Description of Use | N/A |
|  | Ownership | Leased |
|  | Owner | American <br> Tower |
|  | Site | N/A |
|  | Is the existing transmission line shared with another station or stations? | Yes |
|  | Is Transmission Line in operating condition? | Yes |
| Existing Transmission Line Manufacturer and Type | Manufacturer |  |
|  | Type | Rigid |
|  | Diameter | $\begin{aligned} & 73 / 16 \\ & \text { inches } \end{aligned}$ |
|  | Other Diameter | N/A |
|  | Segment Length | Broadband |
|  | Other Segment Length | N/A |
|  | Number of parallel runs | 1 |
|  | Length | 1172 feet per run |

Facility ID's and Call Signs of all stations with whom the transmission line is shared.

| Facility ID | Call Sign |
| :--- | :--- |
| 166510 | KPJR-TV |


| PrimaryNew Transmission Line <br> Transmission_seintion <br> New Transmission Line <br> Costs Question | Response |
| :--- | :--- | :--- | :--- |


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

Primary Tower

## Add Tower

| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Tower Description | Type of change | Modify Existing |
|  | Tower Use | Primary (Main) |
|  | Description of Use | N/A |
|  | Ownership | Leased |
|  | Is this tower consider Complex? | No |
|  | Is this tower currently shared with any other stations? | Yes |
|  | One or more FM, AM or TV radio broadcaster(s) | Yes |
|  | Others Types of Users | No |
|  | Is tower documented for structural analysis? | Yes |
|  | Is tower compliant with Rev G? | Yes |
| Existing Tower <br> Structure Registration | Do you have a tower registration number? | Yes |
|  | ASR Number | 1034537 |
| Coordinates (NAD83 ( North American Datum of 1983)) | Latitude (NAD83) | $40^{\circ} 05^{\prime} 47.3^{\prime \prime} \mathrm{N}$ - |
|  | Longitude (NAD83) | $\begin{aligned} & 104^{\circ} 54^{\prime} 05.9^{\prime \prime} \\ & \text { W- } \end{aligned}$ |
|  | Overall Structure Height | 1169.93 feet |
|  | Support Structure Height | 1158.78 feet |
|  | Ground Elevation Above Mean Sea Level (AMSL) | 5089.83 feet |


| Structure Type | GTOWER - <br> Guyed <br> Structure Used <br> for <br> Communication <br> Purposes |
| :--- | :--- |
| Tower Owner | Vertical Bridge <br> Towers, LLC |
| Date Constructed | $06 / 01 / 1996$ |

FM, AM or TV radio broadcasters. Facility ID's, Call Signs and Services of other broadcast stations with whom the tower is shared

Facility ID Call Sign Service
59972 KKSE-FM FM

Primary Tower

Tower Modification Costs

| Section |  | Question |
| :--- | :--- | :--- |
| Engineering Study | Please what type of engineering study is <br> required, if any: | No study <br> needed |
| Tower Reinforcements | Please select whether tower reinforcements <br> are needed: | No <br> reinforcements <br> needed |

## Tower Rigging Costs

| Section | Question | Response |
| :--- | :--- | :--- |
| Tower Rigging Costs | Complex Tower | N/A |
| Helicopter Services <br> Required | Are helicopter services required? | No |


| Name | Description |
| :--- | :--- |
| Tower Structural Study | Tower Structural Study |

Existing Tower

| Section | Question | Response |
| :---: | :---: | :---: |
| Existing Tower Description | Type of change | Move Equipment |
|  | 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? | Yes |
|  | One or more FM, AM or TV radio broadcaster(s) | Yes |
|  | Others Types of Users | No |
|  | Is tower documented for structural analysis? | Unknown |
|  | Is tower compliant with Rev G? | Unknown |
| Existing Tower <br> Structure Registration | Do you have a tower registration number? | Yes |
|  | ASR Number | 1254146 |
| Coordinates (NAD83 ( North American Datum of 1983)) | Latitude (NAD83) | $40^{\circ} 05^{\prime} 59.0{ }^{\prime \prime} \mathrm{N}$ - |
|  | Longitude (NAD83) | $\begin{aligned} & 104^{\circ} 54^{\prime} 04.0 " \\ & \text { W- } \end{aligned}$ |
|  | Overall Structure Height | 1158.78 feet |
|  | Support Structure Height | 996.71 feet |
|  | Ground Elevation Above Mean Sea Level (AMSL) | 5089.83 feet |
|  | Structure Type | GTOWER - <br> Guyed <br> Structure Used for <br> Communication Purposes |
|  | Tower Owner | American <br> Towers, LLC |

FM, AM or TV radio broadcasters. Facility ID's, Call Signs and Services of other broadcast stations with whom the tower is shared<br>Facility ID Call Sign Service<br>166510 KPJR-TV DTV

Primary Tower

Tower Rigging Costs

| Section | Question | Response |
| :--- | :--- | :--- |
| Tower Rigging Costs | Complex Tower | N/A |
| Helicopter Services <br> Required | Are helicopter services required? | No |

Primary
Other Tower Expenses Not Listed
Tower
Information not provided

| Section <br> Professional <br> Services Costs <br> Outside Project <br> Management Services | Question <br> Do you require outside project management <br> services? | Yes |
| :--- | :--- | :--- | :--- |
|  | Number of Hours |  |


|  | For Main Facility | Yes |
| :---: | :---: | :---: |
|  | Prepare request for Special Temporary Authority | Yes |
|  | Quantity | 1 |
|  | NEPA Section 106 environmental review | Yes |
|  | Environmental Assessment | Yes |
|  | ASR Modification | Yes |
|  | FAA Consultation (including preparation of FAA Form 7460) | Yes |
|  | Negotiation of Lease and other Matter for Shared Locations | Yes |
|  | Prepare or Review FCC Form 399 for Reimbursement | Yes |
|  | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
|  | RF exposure measurements | Yes |
|  | Additional Field Engineering Service | No |
|  | Number of Days | N/A |
|  | Justification | N/A |

## Outside <br> Other Professional Services Expenses Not Listed <br> Professional LSenviecies 16astsided.

Other
Expenses

| Section |  | Question |
| :--- | :--- | :--- |
| AM Pattern Disturbance | Is an Impact Study needed? | Response |
| Facility Expenses | Is Remediation needed? |  |
|  | Name | No |
|  | Other Distributed Transmission System <br> Expenses Not listed | N/A |
| Permit and Filing Costs | Name | N/A |
|  | Is Notification of a Medical Facility required <br> as a result of DTV broadcasting? | Yes |
|  | Local Zoning <br> Other Miscellaneous this relocation require MVPD <br> Notification of a Channel Change? <br> Expenses | Non-zoning permits <br> channel change? <br> Announcement regarding an upcoming <br> Does this relocation require the |
|  | BLM or NFS Coordination <br> Storage? | Yes |
|  | Does this relocation require paying <br> Disposal Costs (for equipment and other <br> waste, net of any salvage value)? | Ye Construction Permit Minor Change |


| Other Expenses | Other Expenses Not Listed |  |
| :---: | :---: | :---: |
|  | Name | Description |
|  | Portable Rental | Cost to rental portable toilet for workers at tower/transmitter site |
|  | Sales Tax | Sales tax paid directly to Colorado Department of Revenue for repack equipment. |

## Transmitters

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


| UHF - <br> Liquid <br> Cooled <br> Solid State | $\$ 947,000.00$ | $\$ 603,076.43$ | Correction: See <br>  <br> Schwarz Quote \#802- <br> 047701.3. Please <br> also see attached <br> Rohde \& Schwarz | $\$ 594,480.43$ | N |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Transmitter <br> $21-31 \mathrm{~kW}$ |  |  | Quote \#140310.0 and <br> Rohde \& Schwarz <br> Quote \#325670.0 <br> KPXC-Proof |  |  |
| Sub-total | $\$ 1,169,812.50$ | $\$ 785,884.00$ | $\mathrm{~N} / \mathrm{A}$ | $\$ 763,823.10$ | N |
| Total for all | $\$ 2,631,362.54$ | $\$ 1,849,870.14$ | $\mathrm{~N} / \mathrm{A}$ | $\$ 1,406,313.92$ | N |
| systems |  |  |  |  |  |

## Components

| Actual Information Description | File Name |  |
| :---: | :---: | :---: |
| RF Interconnect | Component Description: <br> Amount: | Cost of additional RF equipment needed during transmitter installation. Supporting documentation is attached. This invoice has been paid. <br> \$11,535.10 |
| Removal of existing equipment | Component Description: <br> Amount: | Cost to remove and dispose of old transmitter equipment. Supporting documentation is attached. This invoice has been paid. \$27,500.00 |


| Other -- Building Addition Size: 450.0 | Component Description: <br> Amount: | Cost to modify internal space in transmitter building to make room for transmitter placement. Supporting documentation attached. This invoice has been paid. $\$ 6,167.50$ |
| :---: | :---: | :---: |
| 10 Ton system | Component Description: <br> Amount: | Cost to supply and install two new 5ton HVAC systems. Supporting documentation attached. \$26,093.00 |
| Other Electrical Service: Electrical installation for replacement transmitter. | Component Description: <br> Amount: | Balance payment for electrical installation of Rohde \& Schwarz transmitter. Supporting documentation attached. This invoice has been paid. |



| UHF - Liquid Cooled Solid State Transmitter 21-31 kW | Component Description: Amount: | Cost of additional parts for transmitter. Supporting documentation is attached. This invoice has been paid. <br> \$807.77 |
| :---: | :---: | :---: |
|  | Component Description: Amount: | 75\% "remaining balance" payment for Rohde \& Schwarz. Invoice includes "total" taxes payable on order. Supporting documentation attached. \$448,976.66 |
|  | Component Description: Amount: | 25\% "down <br> payment" for <br> Rohde \& Schwarz <br> transmitter. <br> Supporting <br> documentation <br> attached. <br> \$144,696.00 |
|  | Component Description: Amount: | Cost to re-proof transmitter at new TPO. Supporting documentation is attached. This invoice has been paid. \$8,596.00 |

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Primary <br> Antenna <br> TFU-18DSC <br> /VP-R C170 | \$501,440.00 | \$158,723.00 |  | \$153,723.00 |  |
| Pattern <br> scatter <br> analysis <br> for side <br> mount high <br> /med <br> power <br> antennas <br> (if not <br> included <br> in antenna <br> base cost) | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |
| Side <br> mount <br> brackets <br> for high <br> power <br> antennas <br> (if not included <br> in antenna base cost) | \$23,150.00 | \$16,425.00 | $\begin{aligned} & \text { See attached } \\ & \text { Dielectric } \\ & \text { Quote } \\ & \text { \#700495CMZ- } \\ & 1 \text { (Revised). } \end{aligned}$ | \$16,425.00 | N/A |
| Elbow <br> complex, <br> single <br> channel, <br> at antenna <br> input, per <br> 6 1/8. <br> feedline (if <br> needed) | \$12,300.00 | $\$ 10,298.00$ | See attached <br> Dielectric <br> Quote <br> \#700495CMZ- <br> 1 (Revised). | \$10,298.00 | N/A |


| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | See attached Dielectric Quote \#700495CMZ1 (Revised). | \$6,400.00 | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| UHF - <br> Lower <br> Power <br> Side <br> Mount, <br> One <br> station <br> antenna -- <br> 200-500 <br> kW, <br> elliptically <br> or <br> circularly <br> polarized | \$227,000.00 | \$54,270.00 | ***System <br> Notice: <br> Estimate <br> adjusted and <br> locked <br> because line has been <br> superseded. <br> ***The <br> estimated <br> cost has <br> been re- <br> entered due <br> to a technical <br> error with the <br> LMS form. <br> Per FCC procedure, we have reentered the original cost estimate that ties to our 4/2 /2018 submission while the technical issue is resolved. | \$54,270.00 | N/A |
| UHF - <br> Lower <br> Power <br> Side <br> Mount, <br> One <br> station <br> antenna -- <br> 200-500 <br> kW, <br> elliptically <br> or <br> circularly <br> polarized | \$227,000.00 | \$66,330.00 | ***System <br> Notice: <br> Estimate adjusted and locked because line has been superseded. ***See attached Dielectric Quote \#700495CMZ 1 (Revised). | \$66,330.00 | N/A |


| Sub-total | $\$ 501,440.00$ | $\$ 158,723.00$ | $\mathrm{~N} / \mathrm{A}$ | $\$ 153,723.00$ | $\mathrm{~N} / \mathrm{A}$ |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Total for <br> all <br> systems | $\$ 2,631,362.54$ | $\$ 1,849,870.14$ | $\mathrm{~N} / \mathrm{A}$ | $\$ 1,406,313.92$ | $\mathrm{~N} / \mathrm{A}$ |

## Components

## Actual Information

## Description

Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)

## File Name

Information not provided.

Side mount brackets for high power antennas (if not included in antenna base cost)

| Component Description: | $45 \%$ "down |
| :--- | :--- |
|  | payment" for |
|  | primary antenna |
|  | side mount |
|  | brackets. |
|  | Supporting |
|  | documentation and |
|  | explanation of |
|  | variance attached. |
|  | $\$ 7.391 .25$ |


| Component Description: | $45 \%$ "prior to ship" <br> payment for side <br> mount brackets. |
| :--- | :--- |
|  | Explanation of |
|  | variance form and |
|  | supporting |
|  | documentation |
|  | attached. |
|  | $\$ 7,391.25$ |

Component Description: Remaining balance due on primary antenna side mount brackets.

Supporting documentation and detailed cost breakout attached.

Amount:

Elbow complex, single channel, at antenna input, per $61 / 8$. feedline (if needed)

| Component Description: | Remaining balance <br> due on primary <br> elbow complex. |
| :--- | :--- |
|  | Supporting |
| documentation and |  |
|  | detailed cost |
|  | breakout attached. |
|  | $\$ 1,029.80$ |

Component Description:

Amount:
\$4,634.10

45\% "down payment" for primary elbow complex. Supporting documentation and explanation of variance attached.

Amount:

Sweep test of existing antenna

| Component Description: | 45\% "prior to ship" payment for repack sweep of primary antenna operations. Explanation of variance form and supporting documentation attached. |
| :---: | :---: |
| Amount: | \$2,880.00 |
| Component Description: | 10\% "balance" <br> payment for repack <br> sweep of primary <br> antenna <br> operations. <br> Supporting <br> documentation <br> attached. This <br> invoice has been <br> paid. |
| Amount: | \$640.00 |
| Component Description: | 45\% "down payment" for repack sweep of primary antenna operations. Supporting documentation and explanation of variance attached. |
| Amount: | \$2,880.00 |

UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized

| Component Description: | $45 \%$ "down |
| :--- | :--- |
|  | payment" for |
| primary side mount |  |
|  | antenna. |
|  | Supporting |
| documentation and |  |
|  | explanation of |
|  | variance attached. |
|  | $\$ 54,270.00$ |


| Component Description: | Remaining balance <br> due on primary <br> antenna. |
| :--- | :--- |
|  | Explanation of |
| variance form, |  |
|  | supporting |
| documentation and |  |
|  | detailed cost |
|  | breakout attached. |
|  | $\$ 12,060.00$ |

Component Description:
45\% "prior to ship" payment for primary antenna. Explanation of variance form and supporting documentation attached. \$54,270.00

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Primary <br> Transmission <br> Line | \$222,200.00 | \$166,322.80 |  | \$163,573.68 |  |
| Rigid <br> Transmission Line copper, 6 1/8" | \$222,200.00 | \$166,322.80 | See attached <br> Dielectric <br> Quote <br> \#700495CMZ <br> 1 (Revised), <br> Dielectric <br> \#918011 <br> (Page 3 - <br> Change <br> Order), <br> Dielectric <br> Quote <br> \#1697601, <br> Dielectric <br> Quote <br> \#1697646, and Dielectric <br> Quote <br> \#1929717 | \$163,573.68 | N/A |
| Sub-total | \$222,200.00 | \$166,322.80 | N/A | \$163,573.68 | N/A |
| Total for all systems | \$2,631,362.54 | \$1,849,870.14 | N/A | \$1,406,313.92 | N/A |

## Components

Actual Information
Description File Name
Rigid Transmission Line -
copper, 6 1/8"

| Component Description: | Cost of additional transmission line components. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$1,780.10 |
| Component Description: | 10\% "balance" payment for additional pieces of main transmission line. Supporting documentation and cover letter for expedited freight are attached. This invoice has been paid. |
| Amount: | \$515.55 |
| Component Description: | Cost of additional equipment needed for transmission line. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$999.60 |
| Component Description: | Cost of hanger assembly. <br> Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$411.60 |


| Component Description: | Full cost of additional transformer and reducer. <br> Supporting documentation and detailed cost breakout attached. |
| :---: | :---: |
| Amount: | \$2,338.00 |
| Component Description: | Additional <br> transmission line components. <br> Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$515.55 |
| Component Description: | 45\% "down <br> payment" for primary transmission line. <br> Supporting documentation and explanation of variance attached. |
| Amount: | \$66,460.91 |
| Component Description: | Additional <br> transmission line components. <br> Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$2,256.81 |


| Component Description: | Sales tax for additional transmission line components. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$42.48 |
| Component Description: | 45\% "prior to ship" payment for transmission line cut pieces. Explanation of variance form and supporting documentation attached. |
| Amount: | \$4,639.95 |
| Component Description: | 45\% "down <br> payment" for primary transmission line cut pieces. Supporting documentation and explanation of variance attached. |
| Amount: |  |


| Component Description: Amount: | 10\% "balance" <br> payment for <br> additional pieces of main transmission line. Supporting documentation and cover letter for expedited freight are attached. This invoice has been paid. |
| :---: | :---: |
| Amount. |  |
| Component Description: Amount: | Additional transmission line components. Supporting documentation is attached. This invoice has been paid. |
| Component Description: Amount: | Remaining balance due on primary transmission line. Explanation of variance form, supporting documentation and detailed cost breakout attached. \$14,769.08 |
| Component Description: | 45\% "prior to ship" payment for primary transmission line. Explanation of variance form and supporting documentation attached. |
| Amount: | \$66,460.91 |

## Tower Equipment and Rigging Costs

Information
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 <br> Tower GTOWER | \$210,500.00 | \$200,000.00 |  | \$0.00 |  |
| Tall Tower (greater than 500') | \$210,500.00 | \$200,000.00 | N/A | N/A | N/A |
| Primary <br> Tower GTOWER | \$213,974.25 | \$245,874.25 |  | \$245,874.25 |  |
| Tall Tower (greater than 500') | $\$ 210,500.00$ | $\$ 242,400.00$ | See attached <br> Worldwide Communications Quote \#S-18919 and Elevated Structural Consultants Quote \#01. | \$242,400.00 | N/A |
| Tower Structural Study | \$3,474.25 | \$3,474.25 | See attached Vertical Bridge Quote \#01. Taxes of \$224.25 included in estimate. | \$3,474.25 | N/A |
| Sub-total | \$424,474.25 | \$445,874.25 | N/A | \$245,874.25 | N/A |
| Total for all systems | \$2,631,362.54 | \$1,849,870.14 | N/A | \$1,406,313.92 | N/A |

## Components

Actual Information
Description
File Name

| Tall Tower (greater than 500') | Information not provided. |  |
| :---: | :---: | :---: |
| Tall Tower (greater than 500') | Component Description: Amount: | 75\% "deposit payment" for tower service. Supporting documentation attached. This invoice has been paid. <br> \$179,550.00 |
|  | Component Description: Amount: | $25 \%$ "balance due payment" for tower service. Supporting documentation attached. This invoice has been paid. $\$ 59,850.00$ |
|  | Component Description: Amount: | Cost for engineering review of tower rigging plan. Supporting documentation is attached. This invoice has been paid. $\$ 3,000.00$ |
| Tower Structural Study |  |  |
|  | Component Description: Amount: | Cost of Tower Structural Study. Supporting documentation attached. This invoice has been paid. $\$ 3,474.25$ |

## Outside Professional Services

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

| Description | Estimated |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Predetermined Cost Estimate | Estimated <br> Cost | Cost Justification | Actual Cost | Actual Cost Justificatior |
| Outside | \$189,650.00 | \$176,885.30 |  | \$26,072.30 |  |
| Professional |  |  |  |  |  |

Services

| RF Exposure <br> Measurements | \$21,050.00 | \$20,000.00 | N/A | N/A | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$80,000.00 | N/A | N/A | N/A |
| FAA <br> 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 <br> modification <br> (prepare FCC <br> Form 854) | \$2,105.00 | \$2,000.00 | N/A | N/A | N/A |
| Environmental <br> Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | \$10,520.00 | \$10,000.00 | N/A | N/A | N/A |


| NEPA Section <br> 106 <br> environmental <br> review, if <br> needed | \$6,310.00 | \$6,000.00 | N/A | N/A | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Attorney Fees <br> Prepare and <br> File request for <br> Special <br> Temporary <br> Authorization | \$3,680.00 | \$3,600.00 | N/A | N/A | N/A |
| Attorney Fees - <br> Negotiation of lease and other matters for shared locations | \$4,210.00 | \$4,000.00 | N/A | N/A | N/A |
| Attorney Fees <br> Prepare and <br> File FCC Form <br> 2100 (main), <br> License to <br> Cover <br> Application | \$2,365.00 | \$2,250.00 | N/A | N/A | N/A |
| Attorney Fees - <br> Prepare and <br> File FCC Form <br> 2100 (main), <br> Construction <br> Permit <br> Application | \$5,260.00 | \$13,949.20 | See attached Cooley Invoices \#501527111, 501527150k, 501527-243 | \$13,949.20 | Cooley Invoice \#501527-11 dated 1/24 /2018 is a duplicate. Please rejec per administrativ correction. |
| Prepare request for Special Temporary Authorization | \$2,050.00 | \$2,000.00 | N/A | N/A | N/A |


| Prepare engineering section of FCC | \$1,580.00 | \$1,500.00 | N/A | N/A | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Form 2100 (main), License to Cover |  |  |  |  |  |
| Application |  |  |  |  |  |
| Prepare engineering section of FCC | \$3,155.00 | \$3,000.00 | N/A | \$2,000.00 | N/A |
| Form 2100 (main), |  |  |  |  |  |
| Construction |  |  |  |  |  |
| Permit |  |  |  |  |  |
| Application |  |  |  |  |  |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$5,000.00 | N/A | \$125.00 | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$9,998.10 | Legal fees for frequency coordination issues | \$9,998.10 | 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 | \$28,440.00 | \$9,088.00 | See Shared <br> Equipment and AT <br> Exhibits for more information. | N/A | N/A |
| Sub-total | \$189,650.00 | \$176,885.30 | N/A | \$26,072.30 | N/A |
| Total for all systems | \$2,631,362.54 | \$1,849,870.14 | N/A | \$1,406,313.92 | N/A |


| Actual Information Description | File Name |
| :---: | :---: |
| RF Exposure Measurements | Information not provided. |
| Comprehensive coverage verification via field study, if needed | Information not provided. |
| 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) | Information not provided. |
| Environmental <br> Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | Information not provided. |
| NEPA Section 106 environmental review, if needed | Information not provided. |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | Information not provided. |
| Attorney Fees - Negotiation of lease and other matters for shared locations | Information not provided. |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application |  |


| Component Description: | Cost of legal fees related to CP application. Supporting documentation and explanation of variance are attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$3,925.35 |
| Component Description: | Invoice for station's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 12/15/2017. Payee has corresponded with FCC staff and has provided corrected supporting documentation. |
| Amount: |  |
| Component Description: | Invoice for KPXC's portion of general repack legal expenses incurred for 47 of the ION repack stations for period 1/1/2018-6 /30/2018. Cover letter, hourly supporting documentation and invoice attached. |
| Amount: | \$537.87 |


| Component Description: | Invoice for KPXC's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 12/15/2017. Payee has corresponded with FCC staff. Cover letter, hourly supporting documentation and invoice attached. |
| :---: | :---: |
| Amount: |  |
| Component Description: | Invoice for KPXC's portion of general repack legal expenses incurred for 47 of the ION repack stations for period 1/1/2018-6 /30/2018. Cover letter, hourly supporting documentation and invoice attached. This invoice has been paid. |
| Amount: | \$537.87 |


|  | Component Description: | Invoice for KPXC's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 12/15/2017. Payee has corresponded with FCC staff. Hourly supporting documentation and invoice attached. \$4,742.99 |
| :---: | :---: | :---: |
|  | Component Description: Amount: | Invoice for KPXC's repack legal expenses incurred for period 1/1/2018 - 3/31/2018. Cover letter, hourly supporting documentation and invoice attached. \$15,733.80 |
| Prepare request for Special Temporary Authorization | Information not provided. |  |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |  |


| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: <br> Amount: | Cost of engineering consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid. $\$ 2,000.00$ |
| :---: | :---: | :---: |
| Perform engineering study for new channel assignment and antenna development | Component Description: | Cost of engineering consultant work for new channel assignment and antenna development. Invoice has been corrected per FCC reviewers request. Hourly supporting documentation attached. \$62.50 |
|  | Component Description: | Cost of engineering consultant for work on new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid. |


| Address transition timing <br> and coordination issues w/ <br> other stations and wireless | Component Description: | Cost of legal fees <br> related to <br> frequency <br> coordination <br> issues. Supporting <br> documentation is <br> attached. This <br> invoice has been <br> paid. |
| :--- | :--- | :--- |
| $\$ 9,998.10$ |  |  |
| Prepare and or review <br> reimbursement form | Amount: |  |
| Project management of the <br> transition | Information not provided. |  |

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

| Description | Predetermined Cost Estimate | Estimated <br> Cost | Estimated <br> Cost <br> Justification | Actual Cost | Actual Cost Justification |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Other Expenses | \$123,785.79 | \$116,180.79 |  | \$53,247.59 |  |
| MVPD <br> Notification of Channel Change | \$2,350.00 | \$2,350.00 | Second notification necessary because of transition date change due to dependency. | \$2,350.00 | N/A |
| Sales Tax | \$13,188.08 | \$13,188.08 | Sales tax paid directly to Colorado Department of Revenue for repack equipment. Please see "Repack Sales Tax Denver" spreadsheet. | \$13,188.08 | N/A |
| Portable <br> Rental | \$1,633.00 | \$1,633.00 | Please see Empire <br> Portable <br> Restrooms Quote \#218 with ongoing monthly billing | \$1,633.00 | N/A |
| Equipment Storage | \$10,000.00 | \$10,000.00 | Storage needed before repack equipment can be installed. | \$5,144.73 | N/A |


| Equipment <br> Delivery and <br> Handling <br> Charges | \$28,424.71 | \$28,424.71 | This is the actual amount ION has been charged by vendors for equipment needed for repack | \$28,424.71 | N/A |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Non-zoning permits | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Local Zoning | \$25,000.00 | \$25,000.00 | N/A | N/A | N/A |
| FCC Filing Fees Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |
| FCC Filing <br> Fees - Form <br> 2100 license <br> to cover <br> application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 minor change CP application | \$1,110.00 | \$1,070.00 | N/A | N/A | N/A |
| DTV Medical <br> Facility <br> Notification | \$11,550.00 | \$4,000.00 | N/A | \$2,507.07 | N/A |
| Sub-total | \$123,785.79 | \$116,180.79 | N/A | \$53,247.59 | N/A |
| Total for all systems | \$2,631,362.54 | \$1,849,870.14 | N/A | \$1,406,313.92 | N/A |

## Components

| Actual Information Description | File Name |  |
| :---: | :---: | :---: |
| MVPD Notification of Channel Change | Component Description: | Cost of MVPD notifications for channel change. Supporting documentation is attached. This invoice has been paid. |
|  | Amount: <br> Component Description: <br> Amount: | \$1,600.00 <br> Cost of MVPD <br> notifications. <br> Second notification needed due to transition date change. <br> Supporting documentation attached. Invoice has been paid. $\$ 750.00$ |



| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$121.00 |
| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$121.00 |
| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$121.00 |
| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$121.00 |


| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$121.00 |
| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$121.00 |
| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$121.00 |
| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$121.00 |


| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$121.00 |
| Component Description: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$121.00 |
| Component Description: Amount: | Cost of 1 month rental for onsite portable restroom. Supporting documentation is attached. This invoice has been paid. <br> $\$ 121.00$ |
| Component Description: Amount: | Sales tax for equipment storage of antenna package. Supporting documentation is attached. This invoice has been paid. <br> \$394.73 |


| Component Description: | Cost of equipment storage for antenna package. Supporting documentation is attached. |
| :---: | :---: |
| Amount: | \$4,750.00 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$148.57 |
| Component Description: | Cost of first month, dropoff, and pickup for onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$537.53 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation and explanation of variance attached. This invoice has been paid. |
| Amount: |  |


| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$154.34 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$148.57 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$154.34 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$148.57 |


| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$148.57 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$165.44 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$154.34 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation and explanation of variance attached. This invoice has been paid. |
| Amount: |  |


| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$148.57 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$148.57 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$154.34 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$165.44 |


| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation and explanation of variance attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$170.23 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$148.57 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation and explanation of variance attached. This invoice has been paid. |
| Amount: | \$148.57 |
| Component Description: | Cost for additional month of onsite storage container rental. Supporting documentation is attached. This invoice has been paid. |
| Amount: | \$148.57 |


|  | Component Description: <br> Amount: | Cost for additional month of onsite storage container rental. Supporting documentation and explanation of variance attached. This invoice has been paid. <br> \$154.34 |
| :---: | :---: | :---: |
|  | Component Description: <br> Amount: | Cost for additional month of onsite storage container rental. Supporting documentation and explanation of variance attached. This invoice has been paid. \$148.57 |
| Equipment Delivery and Handling Charges | Component Description: <br> Amount: | Cost of freight for additional transmission line components. Supporting documentation and cover letter for expedited freight attached. This invoice has been paid. <br> \$86.24 |


| Component Description: | Cost of freight for additional transmission line components. Supporting documentation and cover letter for expedited freight is attached. This invoice has been paid. |
| :---: | :---: |
| Amount: | \$476.71 |
| Component Description: | Cost of freight, shipping, and handling related to Dielectric Invoice \#318011. <br> Supporting documentation and detailed cost breakout attached. |
| Amount: | ,307.46 |
| Component Description: | Cost of freight for additional pieces of transmission line. Supporting documentation and cover letter for expedited freight attached. This invoice has been paid. |
| Amount: | \$4,451.19 |


|  | Component Description: Amount: | Freight, shipping, and handling related to antenna package. Supporting documentation is attached. This invoice has been paid. $\$ 22,103.11$ |
| :---: | :---: | :---: |
|  | Component Description: Amount: | Cost of freight for additional pieces of transmission line and main antenna package. <br> Supporting documentation and cover letter for expedited freight attached. This invoice has been paid. <br> \$22,103.11 |
|  | Component Description: Amount: | Freight, shipping, and handling related to antenna package. <br> Supporting documentation is attached. This invoice has been paid. <br> \$4,451.19 |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. |  |
| Non-zoning permits | Information not provided. |  |
| Local Zoning | Information not provided. |  |


| FCC Filing Fees - Special <br> Temporary Authorization <br> request | Information not provided. |
| :--- | :--- |
| FCC Filing Fees - Form <br> 2100 license to cover <br> application | Information not provided. |
| FCC Filing Fees - Form <br> 2100 minor change CP <br> application | Information not provided. |
| DTV Medical Facility Component Description: |  |
| Notification | Cost of medical <br> notifications for <br> channel change. |

## Cost Information

Grand Total

|  | Predetermined <br> Cost Estimate | Estimated Cost | Actual Cost |
| :--- | :--- | :--- | :--- |
| Total for all systems | $\$ 2,631,362.54$ | $\$ 1,849,870.14$ | $\$ 1,406,313.92$ |

## Reimbursemefriestatus

The facility has ceased operating on its preauction channel.

Construction of final facilities or all necessary modifications are complete.

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

## Response

Yes

No

## Certification

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. |$\quad$| Grant |
| :--- |
| I declare, under penalty of perjury, that I am |
| an authorized representative of the above- |
| named applicant for the Authorization(s) |
| specified above. |$\quad$| Chief |
| :--- |
| Financial |


| Certification | Section | Question | Response |
| :---: | :---: | :---: | :---: |
|  | Submission of Actual <br> Cost Documentation <br> 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.
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.

| 8. The above-named |
| :--- |
| entity acknowledges |
| that overpayments or |
| payments in error |
| must be promptly |
| refunded to the |
| Commission. |
| 9.The above-named <br> entity certifies that it <br> is in full compliance <br> with all statutes, <br> rules, regulations <br> and governmental <br> requirements for <br> which compliance is <br> a prerequisite for <br> obtaining the <br> payments herein <br> requested. |
| I declare, under penalty of perjury, that I am <br> an authorized representative of the above- <br> named applicant for the Authorization(s) <br> specified above. |
| Grant <br> Boren <br> Chief |
| Financial |
| Officer |

## Attachments

