



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **50044** | Service: **DTV** | Call **KPBT-TV** | Channel: **28 (UHF)** |
ID: | Sign:
File **0000028613**
Number:
FRN: **0021001540** | Date **12/01**
Submitted: **/2017**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
PERMIAN BASIN PUBLIC TELECOMMUNICATIONS, INC. Doing Business As: KPBT-TV	CARLA ANNE HOLEVA P.O. BOX 8940 MIDLAND, TX 79708 United States	+1 (432) 563-5728	choleva@basinpbs.org	Not-for-Profit

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
David Sanderford <i>Marsand, Inc.</i>	David Sanderford 1957 Reynolds Dr Azle, TX 76020 United States	+1 (817) 783-5566	david@marsand.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	See attached Transition Plan Narrative.

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	DHD60P2
	Year	2001
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	14 kW

**Primary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	THU9-12Evo
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	19 kW
	Justification for New Transmitter	Solid State Power Capacity is "pre-mask filter". See attached Transition Plan Narrative.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches

	Length	180.0 feet
	Other Electrical Service	Yes
	Description	Build out electrical to accommodate the addition of the existing UPS and generator and then move the UPS and generator after the transition to comply with WARN act.
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 leasehold improvement?	Yes
	Size	800.0 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
Remove Existing Equipment	Remove pre-auction channel transmitter and interior RF system.

Transmitter Installation	Installation, commissioning and proof of performance documentation.
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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	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	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	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)	220.0 kW

Manufacturer	
Model	ATL20H3- HSO-38
Year	2001

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)	500.0 kW
	Manufacturer	

Model	SAA28- ATW_P3- J300-ES6R- 28
Year	2018
Justification for New Antenna	See attached Transition Plan Narrative.

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?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
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
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?	Yes

**Primary
Transmission Line**

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Air
	Diameter	4 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	315 feet per run

Primary
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	4 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	900 feet per run
	Justification for New Transmission Line	See attached Transition Plan Narrative.

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

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)	No
	Others Types of Users	Yes
	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	1215312
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	31° 53' 50.3" N-
	Longitude (NAD83)	102° 20' 15.5" W-
	Overall Structure Height	367.78 feet
	Support Structure Height	350.06 feet
	Ground Elevation Above Mean Sea Level (AMSL)	2917.62 feet

Structure Type	MAST - Mast
Tower Owner	Gray Television Group, Inc.
Date Constructed	12/23/2000

Other Types of Users

Users

KOSA-TV STL

K238AZ FM Trans

Primary Tower

Tower Modification Costs

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

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?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1053361
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	32° 05' 11.0" N-
	Longitude (NAD83)	102° 17' 12.0" W-
	Overall Structure Height	1131.88 feet
	Support Structure Height	1030.17 feet
	Ground Elevation Above Mean Sea Level (AMSL)	2909.09 feet
	Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
	Tower Owner	Subcarrier Communications Inc

	Date Constructed	01/01/1963
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**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
65306	KMCM	FM
9667	KCRS-FM	FM
41856	KMRK-FM	FM

**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:	Minor 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	350
	Explanation	Please see attached Transition Plan Narrative.
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	No
	Quantity	N/A
	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	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Site Survey	Required for specifying the final equipment needs and installation planning.

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	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
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
Studio to Transmitter Link	Fiber or microwave radio connection from the studio to the transmitter site.

Cost Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter THU9-12Evo	\$1,057,560.00	\$795,630.11		\$0.00	
Other Electrical Service: Build out electrical to accommodate the addition of the existing UPS and generator and then move the UPS and generator after the transition to comply with WARN act.	<i>\$94,025.00</i>	\$94,025.00	Please see attached quotations for generator and UPS decommissioning, move and commissioning.	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$9,360.00	\$8,820.00	N/A	N/A	N/A
Transformer 3 phase/480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A	N/A	N/A
10 Ton system	\$38,900.00	\$14,645.80	See attached HVAC quote (6 ton system).	N/A	N/A

Other -- Building Addition Size: 800.0	\$96,875.00	\$96,875.00	See attached Building Modification quote.	N/A	N/A
Transmitter Installation	\$30,000.00	\$30,000.00	Please see attached transmitter installation quotation.	N/A	N/A
Remove Existing Equipment	\$15,000.00	\$15,000.00	Dismantle and remove the transmitter and interior RF components.	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW	\$684,000.00	\$451,264.31	See attached transmitter quotation.	N/A	N/A
Sub-total	\$1,057,560.00	\$795,630.11	N/A	\$0.00	N/A
Total for all systems	\$2,004,640.00	\$1,622,985.11	N/A	\$24,715.00	N/A

Components

Information not provided.

Cost Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna SAA28-ATW_P3-J300-ES6R-28	\$177,640.00	\$172,350.00		\$0.00	
UHF - High Power, Side Mount, basic slot antenna, 500 kW input, directional,, elliptically or circularly polarized	<i>\$142,500.00</i>	\$142,500.00	See attached antenna quotation (cost for comparable Hpol only antenna).	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$18,450.00	See attached antenna quotation.	N/A	N/A

Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Sub-total	\$177,640.00	\$172,350.00	N/A	\$0.00	N/A
Total for all systems	\$2,004,640.00	\$1,622,985.11	N/A	\$24,715.00	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	\$66,600.00	\$30,000.00		\$0.00	
Flexible Air Transmission Line - dielectric, 4"	\$66,600.00	\$30,000.00	See attached antenna quotation.	N/A	N/A
Sub-total	\$66,600.00	\$30,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,004,640.00	\$1,622,985.11	N/A	\$24,715.00	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	\$381,100.00	\$362,000.00		\$0.00	
GTOWER					
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	Installation of antenna and transmission line.	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Primary Tower	\$110,500.00	\$56,555.00		\$16,555.00	
MAST					
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$16,555.00	See attached series of invoices labeled Initial Tower Studies	\$16,555.00	N/A

Short Tower (less than 500')	\$84,200.00	\$40,000.00	This tower is not able to be brought into conformance with the TIA-222-G specification. Existing antenna and transmission line removal only post-transition.	N/A	N/A
Sub-total	\$491,600.00	\$418,555.00	N/A	\$16,555.00	N/A
Total for all systems	\$2,004,640.00	\$1,622,985.11	N/A	\$24,715.00	N/A

Components

Actual Information	
Description	File Name
Structural engineering tower load study for well documented tower	Information not provided.
Tall Tower (greater than 500')	Information not provided.
Minor tower reinforcement /modifications	Information not provided.

Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	Component Description: Amount:	KPBT - Geotechnical Investigation \$3,300.00
	Component Description: Amount:	KPBT - Tower Mapping \$3,500.00
	Component Description: Amount:	KPBT - Remobilization Fee \$1,600.00
	Component Description: Amount:	KPBT - Foundation Mapping \$3,900.00
	Component Description: Amount:	KPBT - Structural Analysis \$1,500.00
	Component Description: Amount:	KOSA - Remobilization Fee \$2,755.00
Short Tower (less than 500')	Information not provided.	

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$94,490.00	\$90,250.00		\$8,160.00	
Site Survey	<i>\$10,000.00</i>	\$10,000.00	Please see attached Site Survey quotation.	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	\$1,620.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$690.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	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
Project management of the transition	\$55,300.00	\$52,500.00	Please see attached Project Management quotation.	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$5,850.00	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
Sub-total	\$94,490.00	\$90,250.00	N/A	\$8,160.00	N/A
Total for all systems	\$2,004,640.00	\$1,622,985.11	N/A	\$24,715.00	N/A

Components

Actual Information
Description

File Name

Site Survey	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	<div> Component Description: Repack Services Amount: \$120.00 </div> <div> Component Description: Attorney Fees Form 2100 Form 399 STA Amount: \$1,500.00 </div>
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<div> Component Description: Television Repacking Services Amount: \$690.00 </div>
Prepare and or review reimbursement form	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Project management of the transition	Information not provided.
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Perform engineering study for new channel assignment and antenna development	<div> Component Description: Engineering services Amount: \$1,631.25 </div> <div> Component Description: Initial RF Coverage Scenarios Amount: \$4,218.75 </div>

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.
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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	\$116,750.00	\$116,200.00		\$0.00	
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$15,000.00</i>	\$15,000.00	Disposal of old transmitter, antenna, line and misc. electrical.	N/A	N/A
Studio to Transmitter Link	<i>\$60,000.00</i>	\$60,000.00	Construct fiber "last mile" connection for STL link (preferred). Microwave radio link is more expensive.	N/A	N/A
MVPD Notification of Channel Change	<i>\$1,200.00</i>	\$1,200.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$6,000.00</i>	\$6,000.00	N/A	N/A	N/A

Equipment Delivery and Handling Charges	\$23,000.00	\$23,000.00	Freight for antenna and transmission line. Offloading equipment rental and labor.	N/A	N/A
Sub-total	\$116,750.00	\$116,200.00	N/A	\$0.00	N/A
Total for all systems	\$2,004,640.00	\$1,622,985.11	N/A	\$24,715.00	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$2,004,640.00	\$1,622,985.11
			\$24,715.00

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>Carla Anne Holeva CEO/GM 12/01/2017</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>Carla Anne Holeva CEO/GM</p> <p>12/01/2017</p>

Attachments