



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **18753** | Service: **DTV** | Call **WVIZ** | Channel: **35 (UHF)** |  
ID: | Sign:  
File **0000027479**  
Number:  
FRN: **0005277538** | Date **10/18**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>IDEASTREAM</b> Doing Business As: IDEASTREAM	KEVIN E. MARTIN IDEA CENTER 1375 EUCLID AVENUE CLEVELAND, OH 44115 United States	+1 (216) 916-6455	kevin. martin@ideastream. 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
<b>Jerrold Francis Wareham</b> <i>Repack Coordinator ideastream</i>	JERRY WAREHAM IDEA CENTER 1375 EUCLID AVENUE CLEVELAND, OH 44115 United States	+1 (216) 916- 6120	jerry. wareham@ideastream. org

**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.	Yes
Briefly describe transition plan	WVIZ must replace its main antenna and transmitter in order to move it its new channel. It will need to install interim facilities in order to be able to replace the main facility. See attached narrative.

**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	Innovator
	Year	2009
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	15 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	ULXTE40
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	23 kW
	Justification for New Transmitter	The new transmitter is required because higher TPO for higher ERP to replicate the current signal on the new channel. The replication transmitter is the ULXTE30 (invoice attached). The ULXTE40 is an upgrade to achieve maximization (invoice attached)

**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)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.
<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
Switch	Switch, cable and controller for new transmitter and dummy load Dielectric Switch Quote Attached
Transmitter Site Suvey	Survey of transmitter site to determine exact facility needs
Dummy Load	New dummy load required for new transmitter see attached quote from Bird

**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?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	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) .....	150.0 kW



Manufacturer	
Model	TFU- 10GTH-R C170
Year	2009

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	Top Mount
	Antenna position in stack	Top
	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) .....	181.0 kW
	Manufacturer	

Model	TFU-10GTH-R C170 SP
Year	2019
Justification for New Antenna	Existing main antenna is a coaxial slot antenna that is channel specific and cannot be reused on the new channel.

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No

<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	
	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
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Design power capacity in use	40.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	150.0 kW
	Manufacturer	
	Model	TFU-8WB-R
	Year	2019

	Justification for New Antenna	WVIZ needs an interim antenna for operation . while it replaces the primary antenna Dielectric Quote Attached
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## Interim Antenna

### Other Antenna Costs

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

## Interim 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
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1207 feet per run



**Primary** **New Transmission Line**  
**Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1207 feet per run
	Justification for New Transmission Line	Current transmission line has 19.5" segment lengths which will not work for the WVIZ assigned repack Ch. 35. See attached quote.

**Primary** **Other Transmission Line Expenses Not Listed**  
**Transmission Line**

Information not provided.

**Interim** **New Transmission Line**  
**Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	4 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	1000 feet per run
	Justification for New Transmission Line	WVIZ will need an interim transmission line for operation while it replaces its primary transmission line. Dielectric quote attached.

**Interim** **Other Transmission Line Expenses Not Listed**  
**Transmission Line**

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?	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 Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1265403
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	41° 23' 09.9" N-
	Longitude (NAD83)	081° 41' 20.7" W-
	Overall Structure Height	912.06 feet
	Support Structure Height	912.06 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1040.01 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	6600 Broadview LLC
	Date Constructed	06/05/2009

**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
73195	WKYC	DTV

## 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**

Section	Question	Response
<b>Services Costs Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	160
	Explanation	Project manager needed to manage all work required coordinate vendor and contractor specification development, selection of list for bid solicitation, bid evaluation, vendor /contractor selection /contracting and contract enforcement. See Osborn estimate.
<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	Yes

	Quantity	1
	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	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**  
Services not provided.



## 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?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
Employee Time	Time needed by ideastream employees to work on the transition to a new channel.

## 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 ULXTE40	\$1,009,072.04	\$848,895.20		\$441,945.10	
Dummy Load	<i>\$18,660.04</i>	\$18,660.04	New dummy load required for new transmitter see quote from Bird attached.	\$18,660.04	N/A
Transmitter Site Suvey	<i>\$8,000.00</i>	\$8,000.00	Survey of transmitter site to determine needs	N/A	N/A
Switch	<i>\$19,712.00</i>	\$19,712.00	New switch needed for new transmitter and dummy load. Dielectric Quote Attached.	N/A	N/A

Other Electrical Service: Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.	<b>\$15,700.00</b>	\$15,700.00	See attached electrical quote.	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$786,823.16	N/A	\$423,285.06	N/A
<b>Sub-total</b>	\$1,009,072.04	\$848,895.20	N/A	\$441,945.10	N/A
<b>Total for all systems</b>	\$2,291,097.79	\$1,971,366.21	N/A	\$799,025.18	N/A

## Components

Actual Information	
Description	File Name
Dummy Load	<p><b>Component Description:</b> New Dummy Load Invoice for \$18,660.04 attached along with quote.</p> <p><b>Amount:</b> \$18,660.04</p>
Transmitter Site Suvey	Information not provided.
Switch	Information not provided.
Other Electrical Service: Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.	Information not provided.

UHF - Liquid Cooled Solid  
State Transmitter 21 - 31  
kW

**Component Description:**

One third down  
payment for  
transmitter  
required for  
replication (total  
\$634,927.60). The  
additional cost for  
maximization (total  
\$151,895.56) also  
attached as  
JW3004459VI is  
not reimbursable.

**Amount:**

\$211,642.53

**Component Description:**

One third second  
payment for  
transmitter  
required for  
replication (total  
\$634,927.60). The  
additional cost for  
maximization (total  
\$151,895.56)  
second payment of  
one third invoice  
also attached is  
not reimbursable.

**Amount:**

\$211,642.53

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
Interim Antenna TFU-8WB-R	\$96,130.00	\$51,325.00		\$40,432.50	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, One station antenna - medium power (50- 200 kW), horizontally polarized	\$89,400.00	\$44,925.00	Dielectric Quote for Interim Antenna attached	\$40,432.50	N/A
Primary Antenna TFU- 10GTH-R C170 SP	\$296,230.00	\$199,536.00		\$86,911.20	

UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$193,136.00	Quoted cost of antenna from the manufacturer with the upgrade cost related to vertical polarization removed from the overall cost. See attached quote.	\$86,911.20	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Sub-total</b>	\$392,360.00	\$250,861.00	N/A	\$127,343.70	N/A
<b>Total for all systems</b>	\$2,291,097.79	\$1,971,366.21	N/A	\$799,025.18	N/A

## Components

Actual Information	
Description	File Name
Sweep test of existing antenna	Information not provided.

<p>UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized</p>	<p><b>Component Description:</b> See attached cover letter. Reimbursement is sought for the second payment related to the Interim Antenna</p> <p><b>Amount:</b> \$20,216.25</p>
<p>UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized</p>	<p><b>Component Description:</b> See attached Cover Letter. Reimbursement sought for down payment of the Interim Antenna portion of the invoice</p> <p><b>Amount:</b> \$20,216.25</p>
<p>UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized</p>	<p><b>Component Description:</b> See attached Cover Letter. Reimbursement requested for first payment for amount related to Main Antenna Antenna \$67,726.80 Mounting \$ 8,798.40 Feed Through \$ 7,225.20 Elbow Complex \$ 3,160.80 Total \$86,911.20</p> <p><b>Amount:</b> \$86,911.20</p>
<p>Sweep test of existing antenna</p>	<p>Information not provided.</p>



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
Interim Transmission Line	\$74,000.00	\$59,448.26		\$53,503.44	
Flexible Air Transmission Line - dielectric, 4"	\$74,000.00	\$59,448.26	Dielectric Quote attached. Line \$53,048.26 Sweep \$ 6,400.00 Total \$59,448.26	\$53,503.44	N/A
Primary Transmission Line	\$243,814.00	\$259,200.00		\$80,125.65	
Rigid Transmission Line - copper, 6 1/8"	\$243,814.00	\$259,200.00	N/A	\$80,125.65	N/A
Sub-total	\$317,814.00	\$318,648.26	N/A	\$133,629.09	N/A
Total for all systems	\$2,291,097.79	\$1,971,366.21	N/A	\$799,025.18	N/A

Components

Actual Information	
Description	File Name

Flexible Air Transmission Line - dielectric, 4"	<div> <b>Component Description:</b> <p>See attached cover letter. Reimbursement is requested for second payment of amount related to interim transmission line. Line \$23,871.72 Sweep \$ 2,880.00 Total \$26,751.72</p> </div> <div> <b>Amount:</b> <p>\$26,751.72</p> </div>
Rigid Transmission Line - copper, 6 1/8"	<div> <b>Component Description:</b> <p>See attached Cover Letter. Reimbursement requested for down payment of the amount related to the Interim Transmission Line. Line \$23,871.72 Sweep \$ 2,880.00 Total \$26,751.72</p> </div> <div> <b>Amount:</b> <p>\$26,751.72</p> </div>
Rigid Transmission Line - copper, 6 1/8"	<div> <b>Component Description:</b> <p>See attached Cover Letter. Reimbursement is requested for down payment of amount related to the Main Transmission Line Line \$74,759.96 TLSCR'S \$ 2,485.69 Sweep \$ 2,880.00 Total \$80,125.65</p> </div> <div> <b>Amount:</b> <p>\$80,125.65</p> </div>

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	\$381,100.00	\$362,000.00		\$0.00	
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	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Sub-total	\$381,100.00	\$362,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,291,097.79	\$1,971,366.21	N/A	\$799,025.18	N/A

Components

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
<b>Outside Professional Services</b>	<b>\$55,990.00</b>	<b>\$56,750.00</b>		<b>\$21,339.25</b>	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$1,366.00	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$900.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$900.00	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$25,280.00	\$23,000.00	Osborn Engineering Estimate attached. \$21,000 Time \$ 2,000 Reimbursable \$23,000 Total	\$11,925.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$7,500.00	Required to revise and resubmit Form 399 at the request of the FCC and respond to multiple requests for additional information and documentation regarding reimbursement requests	\$6,248.25	Required to revise and resubmit 399 at the request of the FCC

<b>Sub-total</b>	\$55,990.00	\$56,750.00	N/A	\$21,339.25	N/A
<b>Total for all systems</b>	\$2,291,097.79	\$1,971,366.21	N/A	\$799,025.18	N/A

## Components

Actual Information Description	File Name
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b> Legal Services on 6-7-2017 \$117 Review of public notice &amp; email to client 6-20-2017 \$117 Review draft construction permit modification application and associated emails</p> <p><b>Amount:</b> \$234.00</p> <p><b>Component Description:</b> Legal Services on 7-24-2017 \$195 Review of CP authorizations</p> <p><b>Amount:</b> \$195.00</p> <p><b>Component Description:</b> See attached cover letter. \$296.50 is the amount of this invoice related to Outside Professional Services Attorney Fees Prepare and File FCC Form 2100 (main) Construction Permit.</p> <p><b>Amount:</b> \$296.50</p>

<b>Component Description:</b>	See attached cover letter. \$39 is the portion of this invoice related to Outside Professional Services Attorney Fees Prepare and File FCC Form 2100 (main) Construction Permit.
<b>Amount:</b>	\$39.00

<b>Component Description:</b>	See attached cover letter. \$328.50 is the portion of this invoice related to Outside Professional Services Attorney Fees Prepare and File FCC Form 2100 (main) Construction Permit.
<b>Amount:</b>	\$328.50

<b>Component Description:</b>	Legal Services on 5-3-2017 \$117 email exchanges with consulting engineer regarding FCC release of TV study update
<b>Amount:</b>	\$117.00

<b>Component Description:</b>	Legal Services on 2-10-2017 \$78 email exchange with client regarding channel change
<b>Amount:</b>	\$78.00

	<p><b>Component Description:</b></p> <p>Includes revised cover letter correcting typo in amount of cost as requested. Legal Services 9-27-2017 \$78 Memo to client reports due for CP holders and second filing window notice</p> <p><b>Amount:</b></p> <p>\$78.00</p>
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.
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	<p><b>Component Description:</b></p> <p>Prepare CP Application for WVIZ 6.0</p> <p><b>Amount:</b></p> <p>\$900.00</p>



<p>Perform engineering study for new channel assignment and antenna development</p>	<table> <tr> <td data-bbox="697 100 1114 600"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 100 1428 600"> <p>WVIZ - Review of Proposed Dielectric Antenna Pattern and Subsequently Revised Pattern. Conference Call to Discuss Status and Options 3.0 \$450.00 \$450.00</p> </td></tr> <tr> <td data-bbox="697 600 1114 1099"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 600 1428 1099"> <p>WVIZ Repack Call and Data Review 1.5 \$225.00 \$225.00</p> </td></tr> <tr> <td data-bbox="697 1099 1114 1384"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 1099 1428 1384"> <p>WVIZ Assignment - Review of Population Loss, Preliminary Antenna Comparison (TUA-C4-08) and Potential Interfering Stations 1.5 \$225.00 \$225.00</p> </td></tr> </table>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>WVIZ - Review of Proposed Dielectric Antenna Pattern and Subsequently Revised Pattern. Conference Call to Discuss Status and Options 3.0 \$450.00 \$450.00</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>WVIZ Repack Call and Data Review 1.5 \$225.00 \$225.00</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>WVIZ Assignment - Review of Population Loss, Preliminary Antenna Comparison (TUA-C4-08) and Potential Interfering Stations 1.5 \$225.00 \$225.00</p>
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<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>						

Project management of the transition	<table> <tr> <td data-bbox="707 181 1010 208"><b>Component Description:</b></td><td data-bbox="1147 181 1374 483">Initial invoice for Project Management Services per Osborn Engineering Estimate previously submitted.</td></tr> <tr> <td data-bbox="707 501 810 528"><b>Amount:</b></td><td data-bbox="1147 501 1262 528">\$8,400.00</td></tr> <tr> <td data-bbox="707 640 1010 667"><b>Component Description:</b></td><td data-bbox="1147 640 1374 902">Third payment for Project Management per Osborn Engineering estimate previously submitted.</td></tr> <tr> <td data-bbox="707 920 810 947"><b>Amount:</b></td><td data-bbox="1147 920 1262 947">\$2,610.00</td></tr> <tr> <td data-bbox="707 1059 1010 1086"><b>Component Description:</b></td><td data-bbox="1147 1059 1374 1321">Second invoice for Project Management per Osborn Engineering estimate previously submitted.</td></tr> <tr> <td data-bbox="707 1339 810 1366"><b>Amount:</b></td><td data-bbox="1147 1339 1241 1366">\$915.00</td></tr> </table>	<b>Component Description:</b>	Initial invoice for Project Management Services per Osborn Engineering Estimate previously submitted.	<b>Amount:</b>	\$8,400.00	<b>Component Description:</b>	Third payment for Project Management per Osborn Engineering estimate previously submitted.	<b>Amount:</b>	\$2,610.00	<b>Component Description:</b>	Second invoice for Project Management per Osborn Engineering estimate previously submitted.	<b>Amount:</b>	\$915.00
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Prepare and or review reimbursement form	<table> <tr> <td data-bbox="707 1509 1010 1536"><b>Component Description:</b></td><td data-bbox="1147 1509 1356 1653">Review of and Reponse to WVIZ 399 Questions .5 \$75.00</td></tr> <tr> <td data-bbox="707 1671 810 1697"><b>Amount:</b></td><td data-bbox="1147 1671 1227 1697">\$75.00</td></tr> <tr> <td data-bbox="707 1809 1010 1836"><b>Component Description:</b></td><td data-bbox="1147 1809 1356 1953">- Preliminary Widely Cost Spreadsheet for WVIZ 1.0 \$150.00</td></tr> <tr> <td data-bbox="707 1971 810 1998"><b>Amount:</b></td><td data-bbox="1147 1971 1241 1998">\$150.00</td></tr> </table>	<b>Component Description:</b>	Review of and Reponse to WVIZ 399 Questions .5 \$75.00	<b>Amount:</b>	\$75.00	<b>Component Description:</b>	- Preliminary Widely Cost Spreadsheet for WVIZ 1.0 \$150.00	<b>Amount:</b>	\$150.00				
<b>Component Description:</b>	Review of and Reponse to WVIZ 399 Questions .5 \$75.00												
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<b>Component Description:</b>	- Preliminary Widely Cost Spreadsheet for WVIZ 1.0 \$150.00												
<b>Amount:</b>	\$150.00												

<b>Component Description:</b>	See attached cover letter. \$558 is the amount of this invoice related to Prepare and or Review Reimbursement form
<b>Amount:</b>	\$558.00

<b>Component Description:</b>	Prepare and or Review Reimbursement
<b>Amount:</b>	\$604.50

<b>Component Description:</b>	Prepare and or Review Reimbursement
<b>Amount:</b>	\$186.00

<b>Component Description:</b>	See attached cover letter. \$273.00 is the portion of this invoice relating to Prepare and or Review Reimbursement Form
<b>Amount:</b>	\$273.00

<b>Component Description:</b>	See attached cover letter. \$195.00 is the amount of this invoice related to Prepare and or Review Reimbursement Form
<b>Amount:</b>	\$195.00

<b>Component Description:</b>	Review and categorize past invoices to provide information required for reimbursement
<b>Amount:</b>	\$75.00

<b>Component Description:</b>	Legal Services on 7-5-2017 \$117 Resp to client re empl. time reimb 7-6-2017 \$156 Review empl. time exhibit 7-10-2017 \$49.50 File forms 7-10-2017 \$468 Rev final 399 and confirm to file
<b>Amount:</b>	\$790.50

<b>Component Description:</b>	-Help Prepare 399 1.0 \$150.00 - Review of 399 1.0 \$150.00 - 399 Narrative Review and Conference Call 2.0 \$300.00 - 399 Questions1.0 \$150.00
<b>Amount:</b>	\$750.00

<b>Component Description:</b>	Legal Services on 8-4-2017 \$117 Rev of 399 revision request 8-7-2017 \$117 Rev add documentation 8- 11-2017 \$41.25 File amended 399 8-11-2017 \$312 Review amended 399 8-17-2017 \$117 Resp client regard CORES
<b>Amount:</b>	\$704.25

<b>Component Description:</b>	Legal Services on 5-2-2017 Review of Widely catalog with client
<b>Amount:</b>	\$156.00

<b>Component Description:</b>	6-14-2017 \$195 Resp to client re reimbursement 6- 19-2017 \$117 Resp to client re 399 6- 20-2017 \$195 Review Draft Reimburse App 6- 28-2017 \$624 Review 399 narr conf call & follow up
<b>Amount:</b>	\$1,131.00

**Component Description:**

Review of FCC  
Requested 399  
Changes,  
Conference Call  
and Preparation 4.0  
\$600 Services  
provided by  
engineer Benjamin  
Pidek

**Amount:**

\$600.00

## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$134,761.75</b>	<b>\$134,211.75</b>		<b>\$74,768.04</b>	
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$1,000.00</i>	\$1,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$23,800.00</i>	\$23,800.00	Shipping and offloading for transmitter and main and interim antennas and transmission lines. See attached quotes.	\$4,185.00	N/A
Equipment Storage	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A

MVPD Notification of Channel Change	<b>\$1,000.00</b>	\$1,000.00	N/A	N/A	N/A
Employee Time	<b>\$82,411.75</b>	\$82,411.75	Employee Time Estimate Updated 8- 21-18.pdf	\$70,583.04	N/A
<b>Sub-total</b>	\$134,761.75	\$134,211.75	N/A	\$74,768.04	N/A
<b>Total for all systems</b>	\$2,291,097.79	\$1,971,366.21	N/A	\$799,025.18	N/A

## Components

Actual Information	
Description	File Name
DTV Medical Facility Notification	Information not provided.
Non-zoning permits	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
Equipment Delivery and Handling Charges	<p><b>Component Description:</b></p> <p>See attached cover letter. Reimbursement is requested for the down payment of the amount related to Equipment Delivery and Handling Main Antenna and Transmission Line</p> <p><b>Amount:</b></p> <p>\$4,185.00</p>
Equipment Storage	Information not provided.



Develop and air announcement of upcoming channel change	Information not provided.
MVPD Notification of Channel Change	Information not provided.
Employee Time	<div> <div> <b>Component Description:</b> </div> <div> This invoice is for the period 10-1-2017 through 9-30-2018. Attached is detailed labor rate calculation for the period along with individual hours and pay stubs. Also attached is a revised estimate for the project. </div> </div> <div> <div> <b>Amount:</b> </div> <div> \$41,872.54 </div> </div> <div> <div> <b>Component Description:</b> </div> <div> Invoice as requested, summary of hours to be reimbursed by position, labor rate calculation, individual time records, paystubs for the first date and last date for which reimbursement is requested. </div> </div> <div> <div> <b>Amount:</b> </div> <div> \$28,710.50 </div> </div>

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$2,291,097.79	\$1,971,366.21
			\$799,025.18

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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"> <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>Jerrold Wareham</b>  <i>Repack Coordinator</i></p> <p>10/18/2018</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>Jerrold Wareham</b>  <i>Repack Coordinator</i></p> <p>10/18/2018</p>

## Attachments