

Federal Communications Commission

#### (REFERENCE COPY - Not for submission)

## FCC Form 399: Reimbursement Request

| Facility<br>ID: | <b>455</b> | Service: DTV       | Call<br>Sign:  | WADL | Channel: 27 (UHF) |
|-----------------|------------|--------------------|----------------|------|-------------------|
| File<br>Number: | 000002     | 7046               |                |      |                   |
| FRN: <b>00</b>  | 03781630   | Date<br>Submitted: | 07/18<br>/2019 |      |                   |

# Applicant Name, Type, and Contact Information

| Information | Applicant                            | Address                                                                                                             | Phone                       | Email                               | Applicant<br>Type |
|-------------|--------------------------------------|---------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------|-------------------|
|             | ADELL<br>BROADCASTING<br>CORPORATION | Kevin Adell<br>The Word<br>Network<br>20733 West<br>Ten Mile<br>Road<br>Southfield,<br>MI 48075<br>United<br>States | +1<br>(248)<br>357-<br>4566 | r.<br>lameti@thewordnetwork.<br>org | Corporation       |

#### Reimbursement Contact Name and Information Reimbursement Contact Information

| Applicant      | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] |         |       |       |

### Preparer Contact Name and Information

| Contact<br>Information | Applicant                                          | Address | Phone | Email |
|------------------------|----------------------------------------------------|---------|-------|-------|
|                        | The Preparer is same as the reimbursement contact. |         |       |       |

| Broadcaster                              | Question                                                                                                                                                                                                                                                                                                                                                                             | Response                                                                                                                                                                                                                                    |
|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Information<br>and<br>Transition<br>Plan | Will the station be sharing equipment with<br>another broadcast television station or<br>stations (e.g., a shared antenna, co-location<br>on a tower, use of the same transmitter<br>room, multiple transmitters feeding a<br>combiner, etc.)? If yes, enter the facility ID's<br>of the other stations and click 'prefill' to<br>download those stations' licensing<br>information. | No                                                                                                                                                                                                                                          |
|                                          | Briefly describe transition plan                                                                                                                                                                                                                                                                                                                                                     | Install new transmitter, top-mounted<br>antenna and transmission line for operation<br>on repack Channel 27 while continue<br>operations on current Channel 39 with<br>existing transmitter, side-mounted antenna<br>and transmission line. |

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

| Primary     | Existing Transmitter Information    |                                                            |                   |  |  |  |
|-------------|-------------------------------------|------------------------------------------------------------|-------------------|--|--|--|
| Transmitter | Section                             | Question                                                   | Response          |  |  |  |
|             | Existing Transmitter<br>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                                               |                   |  |  |  |
|             | Manufacturer and Type               | Model                                                      | Diamond           |  |  |  |
|             |                                     | Year                                                       | 2002              |  |  |  |
|             |                                     | Туре                                                       | Solid State       |  |  |  |
|             |                                     | Solid State Cooling                                        | Air Cooled        |  |  |  |
|             |                                     | Solid State Power Capacity                                 | 18 kW             |  |  |  |

**Existing Transmitter Information** 

| Primary     | New Transmitter Costs |                                           |                                                                                                        |  |  |  |
|-------------|-----------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------|--|--|--|
| Transmitter | Section               | Question                                  | Response                                                                                               |  |  |  |
|             | New Transmitter       | Use                                       | Primary<br>(Main)                                                                                      |  |  |  |
|             |                       | Change Type                               | Purchase<br>New                                                                                        |  |  |  |
|             |                       | Is this a request for upgraded equipment? | No                                                                                                     |  |  |  |
|             |                       | Manufacturer                              |                                                                                                        |  |  |  |
|             |                       | Model                                     | THU9-16<br>EVO                                                                                         |  |  |  |
|             |                       | Transmitter Type                          | Solid State                                                                                            |  |  |  |
|             |                       | Solid State Cooling                       | Liquid<br>Cooled                                                                                       |  |  |  |
|             |                       | Solid State Power capacity                | 25.5 kW                                                                                                |  |  |  |
|             |                       | Justification for New Transmitter         | Current<br>transmitter<br>cannot be<br>re-<br>channeled<br>to meet<br>repack<br>channel<br>assignment. |  |  |  |

#### **Other Transmitter Costs**

| Primary     | Other Transmitter Costs |                                       |          |  |  |
|-------------|-------------------------|---------------------------------------|----------|--|--|
| Transmitter | Section                 | Question                              | Response |  |  |
|             | Electrical Service      | Service Entrance (3 phases 800A 208V) | Yes      |  |  |
|             |                         | 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                                                                     | No  |
|                                                                           | Description                                                                                  | N/A |
| HVAC Service                                                              | Does the replacement transmitter require HVAC Service?                                       | No  |
|                                                                           | Туре                                                                                         | N/A |
|                                                                           | Size                                                                                         | N/A |
|                                                                           | Other Size                                                                                   | N/A |
| Transmitter Building<br>Addition/Modification or<br>Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leashold improvement? | No  |
|                                                                           | Size                                                                                         | N/A |
| Channel 14 Costs                                                          | Is an RF Consulting Engineer needed?                                                         | N/A |
|                                                                           | Is a channel 14 Mask Filer needed?                                                           | N/A |
|                                                                           | Is additional field engineering time needed?                                                 | N/A |
|                                                                           | Number of Days                                                                               | N/A |

#### Other Transmitter Cost Not Listed

PrimaryOther Transmitter CoTransmitterInformation not provided.

| Antennas Section |               | Question                              | Response |
|------------------|---------------|---------------------------------------|----------|
| Antenna Rela     | ated Expenses | Do you have antenna related expenses? | Yes      |

| Primary<br>Antenna | Existing Antenna Inform         | ation                                                            |                    |  |
|--------------------|---------------------------------|------------------------------------------------------------------|--------------------|--|
|                    | Section                         | Question                                                         | Response           |  |
|                    | Existing Antenna<br>Description | Type of change                                                   | Purchase<br>New    |  |
|                    |                                 | Antenna Use                                                      | Primary<br>(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                | Class                                                            | Full Power         |  |
|                    | Manufacturer and Type           | Mounting                                                         | Side Mount         |  |
|                    |                                 | Antenna position in stack                                        | Not in Stack       |  |
|                    |                                 | Polarization                                                     | Horizontal         |  |
|                    |                                 | Туре                                                             | Slotted<br>Coaxial |  |
|                    |                                 | Number of Stations Supported                                     | N/A                |  |
|                    |                                 | Number of Panels                                                 | N/A                |  |
|                    |                                 | Design power capacity in use                                     | N/A                |  |
|                    |                                 | Lower Limit                                                      | N/A                |  |
|                    |                                 | Upper Limit                                                      | N/A                |  |
|                    |                                 | Other Antenna Type                                               | N/A                |  |
|                    |                                 | ERP: (Effective Radiated Power)                                  | 1000.0 kW          |  |

| Manufacturer |                         |
|--------------|-------------------------|
| Model        | TFU-<br>30DSC-<br>RS250 |
| Year         | 2002                    |

| Primary | New Antenna Costs       |                                                                      |                    |  |
|---------|-------------------------|----------------------------------------------------------------------|--------------------|--|
| Antenna | 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             | Class                                                                | Full Power         |  |
|         | Manufacturer and Types  | Mounting                                                             | Top Mount          |  |
|         |                         | Antenna position in stack                                            | Not in Stack       |  |
|         |                         | Polarization                                                         | Elliptical         |  |
|         |                         | Туре                                                                 | 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)                                      | 605.0 kW           |  |
|         |                         | Manufacturer                                                         |                    |  |
|         |                         |                                                                      | 1                  |  |

| Model                         | TFU-23ET<br>/VP-R S256<br>(SP)                                                                           |
|-------------------------------|----------------------------------------------------------------------------------------------------------|
| Year                          | 2017                                                                                                     |
| Justification for New Antenna | Current<br>antenna<br>cannot be<br>re-tuned fo<br>use on<br>repack<br>channel.<br>See<br>Attachmen<br>1. |

# Primary Other Antenna Costs

| Antenna       | Section                                                    | Question                                                                              | Response                  |
|---------------|------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------|
|               | Combiner for Shared<br>Antenna                             | Do you need a Combiner for a Shared Antenna?                                          | No                        |
|               |                                                            | Туре                                                                                  |                           |
|               |                                                            | Number of channels supported                                                          | N/A                       |
|               |                                                            | Frequencies of channels supported                                                     | N/A                       |
|               |                                                            | Frequency                                                                             | N/A                       |
| Elbow Complex |                                                            | Do you need a combiner output splitter /switcher for dual feed lines?                 | N/A                       |
|               | Do you require the separate purchase of the Elbow Complex? | Yes                                                                                   |                           |
|               |                                                            | Broadband or Single Channel?                                                          | Single<br>Channel         |
|               |                                                            | Feed Line Size                                                                        | 6 1/8<br>inches<br>inches |
|               | Side Mount Brackets                                        | Do you require the separate purchase of side mount brackets for a high power antenna? | No                        |

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

# Primary<br/>AntennaOther Antenna Cost Not ListedInformation not provided.

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

| Primary     | Existing Transmission Line                |                                                                            |                     |  |
|-------------|-------------------------------------------|----------------------------------------------------------------------------|---------------------|--|
| Transmissio | on Line<br>Section                        | Question                                                                   | Response            |  |
|             | Existing Transmission<br>Line 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 the existing transmission line shared with another station or stations? | No                  |  |
|             |                                           | Is Transmission Line in operating condition?                               | Yes                 |  |
|             | Existing Transmission                     | Manufacturer                                                               |                     |  |
|             | Line Manufacturer and<br>Type             | Туре                                                                       | Waveguide           |  |
|             |                                           | Diameter                                                                   | N/A                 |  |
|             |                                           | Other Diameter                                                             | N/A                 |  |
|             |                                           | Segment Length                                                             | N/A                 |  |
|             |                                           | Other Segment Length                                                       | N/A                 |  |
|             |                                           | Number of parallel runs                                                    | 1                   |  |
|             |                                           | Length                                                                     | 700 feet<br>per run |  |

**Existing Transmission Line** 

| Primary     | New Transmission Line          |                                           |                                                                                                                                                                                  |  |
|-------------|--------------------------------|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Transmissio | n Line<br>Section              | Question                                  | Response                                                                                                                                                                         |  |
|             | New Transmission Line<br>Costs | Use                                       | Primary<br>(Main)                                                                                                                                                                |  |
|             |                                | Description of Use                        | N/A                                                                                                                                                                              |  |
|             |                                | Change Type                               | Purchase<br>New                                                                                                                                                                  |  |
|             |                                | Is this a request for upgraded equipment? | No                                                                                                                                                                               |  |
|             |                                | Туре                                      | 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                                    | 700 feet per<br>run                                                                                                                                                              |  |
|             |                                | Justification for New Transmission Line   | New<br>transmission<br>line is<br>required for<br>installation<br>of new top-<br>mounted<br>antenna.<br>Current<br>transmission<br>line not<br>usable with<br>repack<br>channel. |  |

# Primary Other Transmission Line Expenses Not Listed

Transmission home tion not provided.

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

### **Existing Tower**

| Primary | Existing Tower                                           |                                                         |                      |  |  |
|---------|----------------------------------------------------------|---------------------------------------------------------|----------------------|--|--|
| Tower   | Section                                                  | Question                                                | Response             |  |  |
|         | Existing Tower                                           | Type of change                                          | Modify Existing      |  |  |
|         | Description                                              | Tower Use                                               | Primary (Main)       |  |  |
|         |                                                          | Description of Use                                      | N/A                  |  |  |
|         |                                                          | Ownership                                               | Owned                |  |  |
|         |                                                          | Is this tower consider Complex?                         | No                   |  |  |
|         |                                                          | Is this tower currently shared with any other stations? | No                   |  |  |
|         |                                                          | One or more FM, AM or TV radio<br>broadcaster(s)        | N/A                  |  |  |
|         |                                                          | Others Types of Users                                   | N/A                  |  |  |
|         |                                                          | Is tower documented for structural analysis?            | Yes                  |  |  |
|         |                                                          | Is tower compliant with Rev G?                          | No                   |  |  |
|         | Existing Tower                                           | Do you have a tower registration number?                | Yes                  |  |  |
|         | Structure<br>Registration                                | ASR Number                                              | 1016353              |  |  |
|         | Coordinates (NAD83<br>(North American<br>Datum of 1983)) | Latitude (NAD83)                                        | 42° 33' 15.0" N-     |  |  |
|         |                                                          | Longitude (NAD83)                                       | 082° 53' 15.0" W-    |  |  |
|         |                                                          | Overall Structure Height                                | 656.16 feet          |  |  |
|         |                                                          | Support Structure Height                                | 590.54 feet          |  |  |
|         |                                                          | Ground Elevation Above Mean Sea Level (AMSL)            | 589.89 feet          |  |  |
|         |                                                          | Structure Type                                          | MTOWER -<br>Monopole |  |  |

| Tower Owner      | ADELL<br>BROADCASTING<br>CORPORATION |
|------------------|--------------------------------------|
| Date Constructed | 09/01/1988                           |

#### Tower Modification Costs

#### Primary Tower

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

# Primary Tower Rigging Costs

### Tower

| 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.

| Outside      | Section                                                  | Question                                                                     | Response                                                                                                                                                                                                                                     |
|--------------|----------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Professional | Services Costs<br>Outside Project<br>Management Services | Do you require outside project management services?                          | Yes                                                                                                                                                                                                                                          |
|              |                                                          | Number of Hours                                                              | 595                                                                                                                                                                                                                                          |
|              |                                                          | Explanation                                                                  | reimbursement<br>filing, expense<br>tracking,<br>vendor<br>coordination,<br>progress<br>reporting,<br>budget<br>creation,<br>budget review,<br>budget<br>tracking, daisy-<br>chain<br>monitoring and<br>all other<br>activities<br>necessary |
|              | Outside RF consulting<br>Engineering Services            | Perform engineering study for new channel assignment and antenna development | Yes                                                                                                                                                                                                                                          |
|              |                                                          | Prepare engineering section of Form FCC<br>Construction Permit Application   | Yes                                                                                                                                                                                                                                          |
|              |                                                          | For Auxiliary Facility                                                       | No                                                                                                                                                                                                                                           |
|              |                                                          | For Main Facility                                                            | Yes                                                                                                                                                                                                                                          |
|              |                                                          | Prepare engineering section of Form FCC<br>License to Cover Application      | Yes                                                                                                                                                                                                                                          |
|              |                                                          | For Auxiliary Facility                                                       | No                                                                                                                                                                                                                                           |
|              |                                                          | For Main Facility                                                            | Yes                                                                                                                                                                                                                                          |
|              |                                                          | Prepare request for Special Temporary<br>Authority                           | No                                                                                                                                                                                                                                           |
|              |                                                          | Quantity                                                                     | N/A                                                                                                                                                                                                                                          |
|              |                                                          | Do you have Distributed Transmission<br>System engineering services?         | N/A                                                                                                                                                                                                                                          |
|              |                                                          | Critical Facility                                                            | N/A                                                                                                                                                                                                                                          |

|                                          | Terrain-Shielded Facility                                                                  | N/A |
|------------------------------------------|--------------------------------------------------------------------------------------------|-----|
| Attorney and Other<br>Outside Consulting | Prepare and file Form FCC Construction<br>Permit Application                               | Yes |
| Services                                 | 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<br>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                                 | No  |
|                                          | Prepare or Review FCC Form 399 for Reimbursement                                           | Yes |
|                                          | Address transition timing and coordination issues w/ other stations and wireless providers | No  |
| RF Field Engineering<br>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 |

Other Professional Services Expenses Not Listed Professional Services roostsided.

| Other    | Section                         | Question                                                                                                                   | Response |
|----------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------|
| Expenses | AM Pattern Disturbance          | Is an Impact Study needed?                                                                                                 | No       |
|          |                                 | Is Remediation needed?                                                                                                     | No       |
|          | Facility Expenses               | Name                                                                                                                       | N/A      |
|          |                                 | Other Distributed Transmission System<br>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                                                                                       | Yes      |
|          |                                 | FCC License to Cover Application                                                                                           | Yes      |
|          |                                 | FCC Special Temporary Authority<br>Application                                                                             | No       |
|          | Other Miscellaneous<br>Expenses | Does this relocation require paying<br>Disposal Costs (for equipment and other<br>waste, net of any salvage value)?        | No       |
|          |                                 | Does this relocation require Equipment<br>Delivery or Handling Charges not otherwise<br>included in individual item costs? | Yes      |
|          |                                 | Does this relocation require Equipment Storage?                                                                            | No       |
|          |                                 | Does this relocation require the<br>Development and Airing of an<br>Announcement regarding an upcoming<br>channel change?  | Yes      |
|          |                                 | Does this relocation require MVPD<br>Notification of a Channel Change?                                                     | Yes      |

# Other Expenses Not Listed

**Expenses** Information not provided.

#### Transmitters

#### Cost Information

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

| Description                                                           | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual Cost  | Actual Cost<br>Justification |
|-----------------------------------------------------------------------|--------------------------------|-------------------|------------------------------------|--------------|------------------------------|
| Primary<br>Transmitter<br>THU9-16<br>EVO                              | \$961,400.00                   | \$913,700.00      |                                    | \$168,668.13 |                              |
| UHF -<br>Liquid<br>Cooled<br>Solid State<br>Transmitter<br>21 - 31 kW | \$947,000.00                   | \$900,000.00      | N/A                                | \$168,668.13 | N/A                          |
| Service<br>entrance 3<br>phase/800<br>amp/208<br>volt                 | \$14,400.00                    | \$13,700.00       | N/A                                | N/A          | N/A                          |
| Sub-total                                                             | \$961,400.00                   | \$913,700.00      | N/A                                | \$168,668.13 | N/A                          |
| Total for<br>all<br>systems                                           | \$1,784,995.00                 | \$1,707,730.00    | N/A                                | \$169,079.38 | N/A                          |

#### Components

| Actual Information<br>Description                         | File Name                         |                                                                  |
|-----------------------------------------------------------|-----------------------------------|------------------------------------------------------------------|
| UHF - Liquid Cooled Solid<br>State Transmitter 21 - 31 kW | Component Description:<br>Amount: | WADL CH27<br>THU9evo-16<br>Transmitter<br>System<br>\$168,668.13 |
| Service entrance 3 phase<br>/800 amp/208 volt             | Information not provided.         |                                                                  |

#### Antennas

#### Cost Information

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

| Description                                                                                                                           | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual Cost  | Actual Cost<br>Justification |
|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------|------------------------------------|--------------|------------------------------|
| Primary<br>Antenna<br>TFU-23ETT<br>/VP-R S250<br>(SP)                                                                                 | \$308,530.00                   | \$293,100.00      |                                    | \$0.00       |                              |
| Sweep<br>test of<br>existing<br>antenna                                                                                               | \$6,730.00                     | \$6,400.00        | N/A                                | N/A          | 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                    | \$11,700.00       | N/A                                | N/A          | N/A                          |
| UHF -<br>High<br>Power Top<br>Mount<br>(200-1000<br>kW), One<br>station<br>antenna ,<br>elliptically<br>or<br>circularly<br>polarized | \$289,500.00                   | \$275,000.00      | See<br>Attachment<br>1             | N/A          | N/A                          |
| Sub-total                                                                                                                             | \$308,530.00                   | \$293,100.00      | N/A                                | \$0.00       | N/A                          |
| Total for<br>all<br>systems                                                                                                           | \$1,784,995.00                 | \$1,707,730.00    | N/A                                | \$169,079.38 | N/A                          |

#### **Transmission Line**

#### Cost Information

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

| Description                                       | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual Cost  | Actual Cost<br>Justification |
|---------------------------------------------------|--------------------------------|-------------------|------------------------------------|--------------|------------------------------|
| Primary<br>Transmission<br>Line                   | \$141,400.00                   | \$134,400.00      |                                    | \$0.00       |                              |
| Rigid<br>Transmission<br>Line -<br>copper, 6 1/8" | \$141,400.00                   | \$134,400.00      | N/A                                | N/A          | N/A                          |
| Sub-total                                         | \$141,400.00                   | \$134,400.00      | N/A                                | \$0.00       | N/A                          |
| Total for all systems                             | \$1,784,995.00                 | \$1,707,730.00    | N/A                                | \$169,079.38 | N/A                          |

#### Components

#### **Tower Equipment and Rigging Costs**

#### Cost Information

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

| Description                                                                         | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual Cost  | Actual Cost<br>Justification |
|-------------------------------------------------------------------------------------|--------------------------------|-------------------|------------------------------------|--------------|------------------------------|
| Primary<br>Tower<br>MTOWER                                                          | \$223,100.00                   | \$212,000.00      |                                    | \$0.00       |                              |
| Structural<br>engineering<br>tower load<br>study for<br>well<br>documented<br>tower | \$12,600.00                    | \$12,000.00       | N/A                                | \$0.00       | N/A                          |
| Tall Tower<br>(greater<br>than 500')                                                | \$210,500.00                   | \$200,000.00      | N/A                                | N/A          | N/A                          |
| Sub-total                                                                           | \$223,100.00                   | \$212,000.00      | N/A                                | \$0.00       | N/A                          |
| Total for all systems                                                               | \$1,784,995.00                 | \$1,707,730.00    | N/A                                | \$169,079.38 | N/A                          |

#### Components

#### **Outside Professional Services**

#### Cost Information

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

|                                                                                                          | Predetermined | Estimated    | Estimated<br>Cost                         |             | Actual Cost   |
|----------------------------------------------------------------------------------------------------------|---------------|--------------|-------------------------------------------|-------------|---------------|
| Description                                                                                              | Cost Estimate | Cost         | Justification                             | Actual Cost | Justification |
| Outside<br>Professional<br>Services                                                                      | \$116,360.00  | \$120,925.00 |                                           | \$411.25    |               |
| Project<br>management<br>of the transition                                                               | \$94,010.00   | \$99,675.00  | Widelity<br>Strategic<br>Support<br>Quote | \$411.25    | 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    | \$5,000.00   | N/A                                       | N/A         | N/A           |
| Prepare<br>engineering<br>section of FCC<br>Form 2100<br>(main),<br>License to<br>Cover<br>Application   | \$1,580.00    | \$1,500.00   | N/A                                       | N/A         | N/A           |

| Prepare<br>engineering<br>section of FCC<br>Form 2100<br>(main),<br>Construction<br>Permit<br>Application | \$3,155.00     | \$3,000.00     | N/A | N/A          | N/A |
|-----------------------------------------------------------------------------------------------------------|----------------|----------------|-----|--------------|-----|
| Perform<br>engineering<br>study for new<br>channel<br>assignment<br>and antenna<br>development            | \$7,360.00     | \$7,000.00     | N/A | N/A          | N/A |
| Prepare and<br>or review<br>reimbursement<br>form                                                         | \$2,630.00     | \$2,500.00     | N/A | N/A          | N/A |
| Sub-total                                                                                                 | \$116,360.00   | \$120,925.00   | N/A | \$411.25     | N/A |
| Total for all systems                                                                                     | \$1,784,995.00 | \$1,707,730.00 | N/A | \$169,079.38 | N/A |

### Components

| Actual Information<br>Description                                                               | File Name                         |                                   |
|-------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|
| Project management of the transition                                                            | Component Description:<br>Amount: | Project<br>Management<br>\$411.25 |
| Attorney Fees -Prepare and<br>File FCC Form 2100 (main),<br>License to Cover Application        | Information not provided.         |                                   |
| Attorney Fees - Prepare and<br>File FCC Form 2100 (main),<br>Construction Permit<br>Application | Information not provided.         |                                   |
| Prepare engineering section<br>of FCC Form 2100 (main),<br>License to Cover Application         | Information not provided.         |                                   |

| Prepare engineering section<br>of FCC Form 2100 (main),<br>Construction Permit<br>Application | Information not provided. |
|-----------------------------------------------------------------------------------------------|---------------------------|
| Perform engineering study<br>for new channel assignment<br>and antenna development            | Information not provided. |
| Prepare and or review reimbursement form                                                      | Information not provided. |

#### **Other Expenses**

#### Cost Information

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

| Description                                                            | Predetermined<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification                                                          | Actual Cost | Actual Cost<br>Justification |
|------------------------------------------------------------------------|--------------------------------|-------------------|---------------------------------------------------------------------------------------------|-------------|------------------------------|
| Other<br>Expenses                                                      | \$34,205.00                    | \$33,605.00       |                                                                                             | \$0.00      |                              |
| Develop and<br>air<br>announcement<br>of upcoming<br>channel<br>change | \$5,000.00                     | \$5,000.00        | N/A                                                                                         | N/A         | N/A                          |
| DTV Medical<br>Facility<br>Notification                                | \$11,550.00                    | \$11,000.00       | N/A                                                                                         | N/A         | N/A                          |
| FCC Filing<br>Fees - Form<br>2100 minor<br>change CP<br>application    | \$1,110.00                     | \$1,070.00        | 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                          |
| MVPD<br>Notification of<br>Channel<br>Change                           | \$5,000.00                     | \$5,000.00        | N/A                                                                                         | N/A         | N/A                          |
| Equipment<br>Delivery and<br>Handling<br>Charges                       | \$11,210.00                    | \$11,210.00       | Freight<br>expenses<br>for delivery<br>of Dielectric<br>antenna and<br>transmission<br>line | N/A         | N/A                          |
| Sub-total                                                              | \$34,205.00                    | \$33,605.00       | N/A                                                                                         | \$0.00      | N/A                          |

| Total for all | \$1,784,995.00 | \$1,707,730.00 | N/A | \$169,079.38 | N/A |
|---------------|----------------|----------------|-----|--------------|-----|
| systems       |                |                |     |              |     |

#### Components

| Cost        | Grand Total           |                                |                |              |  |
|-------------|-----------------------|--------------------------------|----------------|--------------|--|
| Information |                       | Predetermined<br>Cost Estimate | Estimated Cost | Actual Cost  |  |
|             | Total for all systems | \$1,784,995.00                 | \$1,707,730.00 | \$169,079.38 |  |

| Reimbursem | entestiatus                                                                                                                                                                                                                    | Response |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
|            | The facility has ceased operating on its pre-<br>auction channel.                                                                                                                                                              | No       |
|            | Construction of final facilities or all necessary modifications are complete.                                                                                                                                                  | No       |
|            | All receipts for reimbursement have been<br>submitted no further costs are expected to<br>be incurred. Note this will lock the Form 399<br>from further editing and begin close-out<br>procedures with the Fund Administrator. | No       |

| Certification | Section                                        | Question                                                                                                                                                                                                                                                                                                                                                                                                            | Response |
|---------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
|               | Submission of Estimated<br>Expenses Statements | WILLFUL FALSE STATEMENTS ON THIS<br>FORM ARE PUNISHABLE BY FINE AND<br>/OR IMPRISONMENT (U.S. CODE, TITLE<br>18, SECTION 1001), AND/OR<br>REVOCATION OF ANY STATION<br>LICENSE OR CONSTRUCTION PERMIT<br>(U.S. CODE, TITLE 47, SECTION 312(a)<br>(1), AND/OR FORFEITURE (U.S. CODE,<br>TITLE 47, SECTION 503), AND ANY<br>FALSE STATEMENTS COULD SUBJECT<br>THIS ENTITY TO LIABILITY UNDER THE<br>FALSE CLAIMS ACT. |          |
|               |                                                | <ol> <li>The Authorized<br/>Person signing<br/>below certifies that he<br/>/she is authorized to<br/>submit this TV<br/>Broadcaster<br/>Relocation Fund<br/>Reimbursement<br/>Form on behalf of<br/>the above-named<br/>entity.</li> <li>The above-named</li> </ol>                                                                                                                                                 |          |
|               |                                                | entity acknowledges<br>that all certifications<br>and attached<br>documentation are<br>considered material<br>representations.                                                                                                                                                                                                                                                                                      |          |
|               |                                                | 3. The above-named<br>entity acknowledges<br>the submission of the<br>information herein<br>creates no obligation<br>on the part of the<br>government to pay<br>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).
- 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<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 pre-requisite 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.                                                                                                | Ralph<br>Lameti<br>CFO<br>07/18/2019 |

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| Certification | Section                                                  | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Response |
|---------------|----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
|               | Submission of Actual<br>Cost Documentation<br>Statements | WILLFUL FALSE, FRAUDULENT, OR<br>FICTITIOUS STATEMENTS ON THIS<br>FORM ARE PUNISHABLE BY FINE AND<br>/OR IMPRISIONMENT (U.S. CODE, TITLE<br>18, SECTION 1001), AND/OR<br>REVOCATION OF ANY STATION<br>LICENSE OR CONSTRUCTION PERMIT<br>(U.S. CODE, TITLE 47, SECTION 312(a)<br>(1), AND/OR FORFEITURE (U.S. CODE,<br>TITLE 47, SECTION 503), AND ANY<br>FALSE AND/OR FRAUDULENT<br>STATEMENTS COULD SUBJECT THIS<br>ENTITY TO LIABILITY UNDER THE<br>FALSE CLAIMS ACT (U.S. CODE, TITLE<br>31, SECTIONS 3729-3733). |          |
|               |                                                          | <ol> <li>The Authorized<br/>Person signing<br/>below certifies and<br/>represents that he<br/>/she is authorized to<br/>submit this TV<br/>Broadcaster<br/>Relocation Fund<br/>Reimbursement<br/>Form on behalf of<br/>the above-named<br/>entity.</li> </ol>                                                                                                                                                                                                                                                        |          |
|               |                                                          | 2. The above-named<br>entity certifies that<br>the statements in this<br>form and attached<br>documentation are<br>true, complete, and<br>correct.                                                                                                                                                                                                                                                                                                                                                                   |          |
|               |                                                          | 3. The above-named<br>entity acknowledges<br>that all certifications<br>and attached<br>documentation are<br>considered material<br>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).
- 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.

|               | <ul> <li>The above-named<br/>entity acknowledges<br/>that overpayments or<br/>payments in error<br/>must be promptly<br/>refunded to the<br/>Commission.</li> <li>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</li> </ul> |                                                        |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| an au<br>name | requested.<br>are, under penalty of perjury, that I am<br>thorized representative of the above-<br>d applicant for the Authorization(s)<br>fied above.                                                                                                                                                                                                                                                                           | Ralph<br>Gregory<br>Lameti<br><i>CFO</i><br>07/18/2019 |

#### Attachments