



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **7908** | Service: **DTV** | Call **WDTI** | Channel: **23 (UHF)**
ID: | Sign:
File **0000028085**
Number:
FRN: **0011053717** | Date **01/22**
Submitted: **/2021**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
INDIANAPOLIS COMMUNITY TELEVISION, INC.	Arnold Torres 3901 HIGHWAY 121 SOUTH BEDFORD, TX 76021 United States	+1 (817) 571- 1229	ARNOLD. TORRES@DAYSTAR. COM	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
Samuel Hariton <i>Engineer</i> <i>INDIANAPOLIS COMMUNITY TELEVISION, INC.</i>	Samuel Hariton 4031 University Drive Ste 100 Fairfax, VA 22030 United States	+1 (339) 222-8107	sam. hariton@widelity. com

**Broadcaster
Information
and
Transition
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	Coordinate with tower owner and other Broadcasters; transition during assigned phase. WDTI will transition by changing its antenna and transmitter, remaining at the same transmitter site.

Transmitters

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

**Primary
Transmitter**

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	PA10KVA
	Year	2008
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	3.5 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	ELETXUD3600AC
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3.6 kW
	Justification for New Transmitter	Current transmitter cannot be returned to new antenna at allotted power level. Banding issues and unavailability of parts are the determining factors.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	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	Minimal electric services will be needed to implement new facility.
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold 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

Primary Transmitter

Other Transmitter Cost Not Listed

Name	Description
Mask Filter	Mask Filter
Primary Transmitter - Site Survey and Installation	Primary Transmitter - Site Survey and Installation

Antennas

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

**Primary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	28.0 kW

Manufacturer	
Model	SWCD16OMF /44-DT
Year	2008

**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?	No
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	18.2 kW
Manufacturer		

Model	SWCDS8OI /23-EP
Year	2017
Justification for New Antenna	Existing antenna is non-tunable to new channel.

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	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
Antenna**

Other Antenna Cost Not Listed

Name	Description
Primary Antenna - Custom Mount	Custom mounting assembly for antenna

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

Primary Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	SWR
	Type	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1050 feet per run

Primary **Other Transmission Line Expenses Not Listed**

Transmission Line

Name	Description
Transmission Line - Reducer, Connectors, Other Equipment	Reducer, Connectors, and Other Equipment required to utilize existing line.

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	Leased
	Is this tower consider Complex?	Candelabra
	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	Yes
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1253064
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	39° 53' 39.2" N-
	Longitude (NAD83)	086° 12' 20.5" W-
	Overall Structure Height	1009.83 feet
	Support Structure Height	849.73 feet
	Ground Elevation Above Mean Sea Level (AMSL)	829.06 feet

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Tower, LLC
Date Constructed	07/24/2006

**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
37102	WHMB-TV	DTV
69115	WICR	FM

Other Types of Users

Users
W248AW
W236CR
WECY-LD
WIPX-LD
WQDE-LD
WSDI-LD
WUDM-LD
WUDP-LD
WUDZ-LD

Primary Tower

Tower Modification Costs

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

Primary Tower

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	Candelabra
Helicopter Services Required	Are helicopter services required?	No

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Construction Project Management, tower modifications.	Tower modification supervision.
Tower Permit Drawing Package	Generation of construction drawings.
Ground and Building A and E Permit Drawing Package	Ground and Building A and E Permit Drawing Package.
Tower Load Study	Tower load study for a documented tower with candelabra

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	595
	Explanation	WDTI does not have sufficient resource capacity and expertise in house to handle all activities necessary for completion of the station's build by the construction deadline. WDTI will hire an outside firm to facilitate a timely transition.
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes

	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	Yes
	Environmental Assessment	Yes
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
Prepare or Review FCC Form 399 for Reimbursement	Yes	
Address transition timing and coordination issues w/ other stations and wireless providers	Yes	
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes

Number of Days	7
Justification	Installation of transmitter and supervision of antenna installation.

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**

Name	Description
Site Coordination Meeting	Site coordination meeting with broadcasters, contractors and vendors involved with site deliveries and construction.

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	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

Information not provided.

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 ELETXUD3600AC	\$170,947.13	\$142,882.13		\$93,675.58	
Mask Filter	<i>\$8,411.50</i>	\$8,411.50	N/A	\$6,729.20	N/A
Primary Transmitter - Site Survey and Installation	<i>\$1,935.63</i>	\$1,935.63	Please see WDTI Primary Transmitter - Site Survey and Installation Budget Revision Justification Letter	\$1,935.63	N/A
Other Electrical Service: Minimal electric services will be needed to implement new facility.	<i>\$5,000.00</i>	\$5,000.00	N/A	\$988.75	N/A
UHF - Air Cooled Solid State Transmitter 2.501 - 3.999 kW	\$155,600.00	\$127,535.00	Per Elektronica estimate 5971 plus \$10,000 (estimated tax and freight)	\$84,022.00	N/A
Sub-total	\$170,947.13	\$142,882.13	N/A	\$93,675.58	N/A
Total for all systems	\$1,090,818.79	\$640,837.79	N/A	\$285,867.60	N/A

Components

Actual Information	
Description	File Name
Mask Filter	<p>Component Description: WDTI-110-1st Primary Transmitter - Mask Filter</p> <p>Amount: \$6,729.20</p>
Primary Transmitter - Site Survey and Installation	<p>Component Description: Repack travel expenses and supplies</p> <p>Amount: \$1,935.63</p>
Other Electrical Service: Minimal electric services will be needed to implement new facility.	<p>Component Description: Drive to Indianapolis</p> <p>Amount: \$988.75</p>
UHF - Air Cooled Solid State Transmitter 2.501 - 3.999 kW	<p>Component Description: EKA TXUD3600AC D UHF Digital TV Transmitter</p> <p>Amount: \$84,022.00</p> <p>Component Description: Invoice moved to correct budget category.</p> <p>Amount: N/A</p>

Cost Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna SWCDS8OI /23-EP	\$68,597.40	\$68,267.40		\$54,667.40	
Primary Antenna - Custom Mount	<i>\$3,919.10</i>	\$3,919.10	Please see WDTI SWR quote 17416-05, plus shipping on invoice 19156-1	\$3,919.10	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power, Side Mount, basic slot antenna, 18 kW input, elliptically or circularly polarized	<i>\$57,948.30</i>	\$57,948.30	see Estimated Cost Justification WDTI-210-Primary Antenna - UHF High Power Side Mount, E-POL v0	\$50,748.30	N/A
Sub-total	\$68,597.40	\$68,267.40	N/A	\$54,667.40	N/A
Total for all systems	\$1,090,818.79	\$640,837.79	N/A	\$285,867.60	N/A

Components

Actual Information Description	File Name
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<p>Primary Antenna - Custom Mount</p>	<p>Component Description: WDTI-210-Primary Antenna - Custom Mount</p> <p>Amount: \$3,919.10</p>
<p>Sweep test of existing antenna</p>	<p>Information not provided.</p>
<p>UHF - High Power, Side Mount, basic slot antenna, 18 kW input, elliptically or circularly polarized</p>	<p>Component Description: Antenna Nomenclature</p> <p>Amount: \$50,748.30</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
Primary Transmission Line	\$1,323.26	\$1,323.26		\$1,323.26	
Transmission Line - Reducer, Connectors, Other Equipment	<i>\$1,323.26</i>	\$1,323.26	Please see WDTI SWR quote 17416-05	\$1,323.26	N/A
Sub-total	\$1,323.26	\$1,323.26	N/A	\$1,323.26	N/A
Total for all systems	\$1,090,818.79	\$640,837.79	N/A	\$285,867.60	N/A

Components

Actual Information	
Description	File Name
Transmission Line - Reducer, Connectors, Other Equipment	<p>Component Description: WDTI-310-Primary Transmission Line - Reducer, Connectors, Other Equipment</p> <p>Amount: \$1,323.26</p>

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 GTOWER	\$630,700.00	\$228,667.00		\$71,612.00	
Tower Load Study	<i>\$6,500.00</i>	\$6,500.00	Please see American Tower Customer Project Cost Estimation List of invoices present on this category and their status	\$6,500.00	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$8,267.00	N/A	\$8,267.00	N/A
Ground and Building A and E Permit Drawing Package	<i>\$4,700.00</i>	\$4,700.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$45,000.00	N/A	N/A	N/A

Construction Project Management, tower modifications.	\$9,500.00	\$9,500.00	N/A	\$2,500.00	N/A
Tower Permit Drawing Package	\$4,700.00	\$4,700.00	N/A	N/A	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$150,000.00	N/A	\$54,345.00	N/A
Sub-total	\$630,700.00	\$228,667.00	N/A	\$71,612.00	N/A
Total for all systems	\$1,090,818.79	\$640,837.79	N/A	\$285,867.60	N/A

Components

Actual Information	
Description	File Name
Tower Load Study	<p>Component Description: Broadcast Structural-Indianapolis TI IN</p> <p>Amount: \$6,500.00</p>
Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	<p>Component Description: Broadcast Tower Mapping-Indianapolis TI IN</p> <p>Amount: \$8,267.00</p>
Ground and Building A and E Permit Drawing Package	Information not provided.
Minor tower reinforcement /modifications	Information not provided.

<p>Construction Project Management, tower modifications.</p>	<p>Component Description: Capital Contribution- Indianapolis TI IN</p> <p>Amount: \$2,500.00</p>
<p>Tower Permit Drawing Package</p>	<p>Information not provided.</p>
<p>Complex Tower (includes, for example, those with candelabras and/or stacked antennas)</p>	<p>Component Description: Antenna installation</p> <p>Amount: \$13,586.25</p> <p>Component Description: Antenna installation</p> <p>Amount: \$40,758.75</p>

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$185,520.00	\$167,425.00		\$53,114.90	
Site Coordination Meeting	<i>\$2,500.00</i>	\$2,500.00	N/A	\$2,500.00	N/A
Additional Field Engineering Service, 7 Days	<i>\$12,000.00</i>	\$12,000.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$10,000.00	N/A	N/A	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$500.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$200.00	N/A	N/A	N/A
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00	\$10,000.00	N/A	N/A	N/A

NEPA Section 106 environmental review, if needed	\$6,310.00	\$1,800.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	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	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$786.00	N/A
Project management of the transition	\$94,010.00	\$99,675.00	see Estimated Cost Justification WDTI-510-Project Management v0	\$49,116.90	N/A

Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	\$712.00	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
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Prepare 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
Sub-total	\$185,520.00	\$167,425.00	N/A	\$53,114.90	N/A
Total for all systems	\$1,090,818.79	\$640,837.79	N/A	\$285,867.60	N/A

Components

Actual Information Description	File Name
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Site Coordination Meeting	<p>Component Description: WDTI-590-Site Coordination Meeting</p> <p>Amount: \$2,500.00</p>
Additional Field Engineering Service, 7 Days	Information not provided.
RF Exposure Measurements	Information not provided.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
ASR modification (prepare FCC Form 854)	Information not provided.
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.
NEPA Section 106 environmental review, if needed	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.
Perform engineering study for new channel assignment and antenna development	Information not provided.
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.

Prepare and or review reimbursement form	<table> <tr> <td data-bbox="715 174 1023 208">Component Description:</td> <td data-bbox="1157 174 1369 241">Total Professional Services</td> </tr> <tr> <td data-bbox="715 255 826 288">Amount:</td> <td data-bbox="1157 255 1252 288">\$786.00</td> </tr> </table>	Component Description:	Total Professional Services	Amount:	\$786.00																												
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Amount:	\$786.00																																
Project management of the transition	<table> <tr> <td data-bbox="715 432 1023 465">Component Description:</td> <td data-bbox="1157 432 1311 499">Project Management</td> </tr> <tr> <td data-bbox="715 512 826 546">Amount:</td> <td data-bbox="1157 512 1275 546">\$1,519.30</td> </tr> <tr> <td data-bbox="715 649 1023 683">Component Description:</td> <td data-bbox="1157 649 1311 716">Project Management</td> </tr> <tr> <td data-bbox="715 730 826 763">Amount:</td> <td data-bbox="1157 730 1275 763">\$4,660.95</td> </tr> <tr> <td data-bbox="715 866 1023 900">Component Description:</td> <td data-bbox="1157 866 1311 934">Project Management</td> </tr> <tr> <td data-bbox="715 947 826 981">Amount:</td> <td data-bbox="1157 947 1275 981">\$1,620.15</td> </tr> <tr> <td data-bbox="715 1084 1023 1117">Component Description:</td> <td data-bbox="1157 1084 1311 1151">Project Management</td> </tr> <tr> <td data-bbox="715 1164 826 1198">Amount:</td> <td data-bbox="1157 1164 1275 1198">\$3,356.20</td> </tr> <tr> <td data-bbox="715 1301 1023 1335">Component Description:</td> <td data-bbox="1157 1301 1311 1368">Project management</td> </tr> <tr> <td data-bbox="715 1382 826 1415">Amount:</td> <td data-bbox="1157 1382 1275 1415">\$2,687.90</td> </tr> <tr> <td data-bbox="715 1518 1023 1552">Component Description:</td> <td data-bbox="1157 1518 1311 1585">Project Management</td> </tr> <tr> <td data-bbox="715 1599 826 1632">Amount:</td> <td data-bbox="1157 1599 1275 1632">\$5,181.70</td> </tr> <tr> <td data-bbox="715 1736 1023 1769">Component Description:</td> <td data-bbox="1157 1736 1311 1803">Project Management</td> </tr> <tr> <td data-bbox="715 1816 826 1850">Amount:</td> <td data-bbox="1157 1816 1275 1850">\$2,269.85</td> </tr> <tr> <td data-bbox="715 1953 1023 1986">Component Description:</td> <td data-bbox="1157 1953 1311 2020">Project Management</td> </tr> <tr> <td data-bbox="715 2033 826 2067">Amount:</td> <td data-bbox="1157 2033 1275 2067">\$4,007.30</td> </tr> </table>	Component Description:	Project Management	Amount:	\$1,519.30	Component Description:	Project Management	Amount:	\$4,660.95	Component Description:	Project Management	Amount:	\$1,620.15	Component Description:	Project Management	Amount:	\$3,356.20	Component Description:	Project management	Amount:	\$2,687.90	Component Description:	Project Management	Amount:	\$5,181.70	Component Description:	Project Management	Amount:	\$2,269.85	Component Description:	Project Management	Amount:	\$4,007.30
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Component Description: Project
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Amount: \$1,288.65

Component Description: Project
Management
Amount: \$26.40

Component Description: Project
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Amount: \$1,710.15

Component Description: Project
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Amount: \$1,721.70

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Amount: \$1,563.20

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Amount: \$1,528.75

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Component Description: Project
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Amount: \$4,075.25

Component Description: Project
Management
Amount: \$1,962.25

Component Description: Project
Management
Amount: \$1,803.40

Component Description: Project
Management
Amount: \$1,514.90

Attorney Fees - Negotiation of lease and other matters for shared locations	<p>Component Description: Total Professional Services</p> <p>Amount: \$223.50</p>
	<p>Component Description: Total Professional Services</p> <p>Amount: \$69.50</p>
	<p>Component Description: Total Professional Services</p> <p>Amount: \$69.50</p>
	<p>Component Description: Total Professional Services</p> <p>Amount: \$74.50</p>
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	<p>Component Description: Total Professional Services</p> <p>Amount: \$74.50</p>
	<p>Component Description: Total Professional Services</p> <p>Amount: \$131.00</p>
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	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.

Cost Information

Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$33,731.00	\$32,273.00		\$11,474.46	
MVPD Notification of Channel Change	<i>\$3,291.00</i>	\$3,291.00	see Estimated Cost Justification WDTI-610-MVPD Notification v0	\$3,291.00	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
Non-zoning permits	<i>\$750.00</i>	\$750.00	N/A	N/A	N/A
Local Zoning	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A

DTV Medical Facility Notification	\$11,550.00	\$10,147.00	Estimated Cost Justification WDTI-610-Medical Facility Notification v0	\$6,856.00	N/A
Develop and air announcement of upcoming channel change	\$500.00	\$500.00	N/A	N/A	N/A
Equipment Storage	\$3,500.00	\$3,500.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$5,000.00	\$5,000.00	N/A	\$1,327.46	N/A
Sub-total	\$33,731.00	\$32,273.00	N/A	\$11,474.46	N/A
Total for all systems	\$1,090,818.79	\$640,837.79	N/A	\$285,867.60	N/A

Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	<p>Component Description: MVPD Notification Services</p> <p>Amount: \$3,291.00</p>
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
Non-zoning permits	Information not provided.
Local Zoning	Information not provided.

FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.
DTV Medical Facility Notification	<p>Component Description: DTV Notification Service</p> <p>Amount: \$6,856.00</p>
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	Information not provided.
Equipment Delivery and Handling Charges	<p>Component Description: Freight</p> <p>Amount: \$1,327.46</p>

Cost Information **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,090,818.79	\$640,837.79	\$285,867.60

Reimbursement Status

Question	Response
The facility has ceased operating on its pre-auction channel.	Yes
Construction of final facilities or all necessary modifications are complete.	Yes
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
	<p>Submission of Estimated Expenses Statements</p>	<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 data-bbox="758 784 1045 1176">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 data-bbox="758 1198 1029 1444">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. <li data-bbox="758 1467 1045 1758">3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 	

4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Arnold
Torres**
*Business
Administrator*

01/22/2021

Certification	Section	Question	Response
	<p>Submission of Actual Cost Documentation Statements</p>	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 	

4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

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.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Arnold
Torres**
*Business
Administrator*

01/22/2021

Certification	Section	Question	Response
	<p>Submission of Final Allocation or Accounting Information Statements</p>	<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 data-bbox="758 772 1029 1456">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. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. <li data-bbox="758 1478 1029 1758">2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 	

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
4. 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.
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
6. 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.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Arnold
Torres**
*Business
Administrator*

01/22/2021

Attachments