



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID:	64981	Service:	LPA	Call Sign:	KTLO-LP	Channel:	29 (UHF)
File Number:	0000089504						
FRN:	0014920581	Eligibility Status:	Eligible	Date Submitted:	11/19	/2020	

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
Pikes Peak Television, Inc. Doing Business As: Pikes Peak Television, Inc.	825 Edmond Street Saint Joseph, MO 64501 United States	+1 (816) 271-8505	tim.hannan@npgco.com	Corporation

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
The Preparer is same as the reimbursement contact.			

Broadcaster Information and Transition Plan

Question	Response
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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	Please see Transition Plan Description Exhibit; please also see Revised Transition Plan Exhibit.

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)
	Ownership	Owned
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	AT725P
	Year	2012
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	25 W

**Primary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	UAXTE- 4R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	2400 W
	Justification for New Transmitter	Please see Revised Transition Plan Description Exhibit

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	No
HVAC Service	Does the replacement transmitter require HVAC Service?	No

Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
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**Primary
Transmitter**

Other Transmitter Cost Not Listed

Name	Description
RF Accessories	RF Accessories
Electrical and Mechanical Parts and Installation for Transmitter Building	Electrical and Mechanical Parts and Installation for Transmitter Building
Mask Filter System	Mask Filter System
Commissioning and Sweep	Commissioning and Sweep
Miscellaneous Items for Preparation of Transmitter Building	Miscellaneous Items for Preparation of Transmitter Building
Transmitter Building	Transmitter Building
Documentation and RF Proof	Documentation and RF Proof

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)
	Ownership	Owned
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Other
	Other Antenna Type	Panel
	ERP: (Effective Radiated Power)	0.14 kW
	Manufacturer	
	Model	B8UA
	Year	2012

**Primary
Antenna**

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Change Type	Purchase New
	Ownership	Owned
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna Manufacturer and Types	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	4DR-16-2HW
	Year	2012
	Justification for New Antenna	Please See Revised Transition Plan Exhibit

**Primary
Antenna**

Other Antenna Costs

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	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?	No

**Primary
Antenna**

Other Antenna Cost Not Listed

Name	Description
Coax Andrew, hangers, standoffs, EIA connectors	Coax Andrew, hangers, standoffs, EIA connectors
Tower rigging, removal of existing panel antenna, and installation of new panel antenna	Tower rigging, removal of existing panel antenna, and installation of new panel antenna

Transmission Line

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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	Move Equipment
	Tower Use	Primary (Main)
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1012530
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	38° 49' 43.0" N-
	Longitude (NAD83)	104° 50' 22.0" W-
	Overall Structure Height	464.89 feet

Support Structure Height	459.97 feet
Ground Elevation Above Mean Sea Level (AMSL)	5961.87 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	PIKES PEAK TELEVISION INC
Date Constructed	07/01/1953

**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
66250	KRDO	AM

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Ice Bridge	Ice Bridge
Rigging Services including freight, travel, per diem, labor on site and at plant	Rigging Services including freight, travel, per diem, labor on site and at plant

**Kintronics 150 Complete Isocoupler to
avoid impairment of AM signal**

Kintronics 150 Complete Isocoupler to
avoid impairment of AM signal

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	No
Outside RF consulting Engineering Services	Perform engineering study for displacement application	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
	Prepare Form 601	No
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
	Negotiation of Lease and other Matter for Shared Locations	No

	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Form 399 assistance or other program management costs	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Additional Displacement Legal Services Not Otherwise Specified in Form 399	Additional Displacement Legal Services Not Otherwise Specified in Form 399

**Other
Expenses**

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Permit and Filing Costs	FCC Construction Permit Major Change	No
	FCC Construction Permit Minor Change	No
	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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
Point to Point Microwave (STL/ICR)	Frequency Coordination for Unidirection System	No
	Frequency Coordination for Bi-Direction System	No
	New Point to Point Microwave System	No

**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 UAXTE-4R37	\$167,783.65	\$129,413.46		\$0.00	
Documentation and RF Proof	<i>\$1,000.00</i>	\$1,000.00	N/A	N/A	N/A
Transmitter Building	<i>\$48,985.00</i>	\$48,985.00	N/A	N/A	N/A
Miscellaneous Items for Preparation of Transmitter Building	<i>\$6,100.00</i>	\$6,100.00	N/A	N/A	N/A
Commissioning and Sweep	<i>\$3,500.00</i>	\$3,500.00	N/A	N/A	N/A
Mask Filter System	<i>\$3,380.00</i>	\$3,380.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$84,000.00	\$45,629.81	N/A	N/A	N/A
Electrical and Mechanical Parts and Installation for Transmitter Building	<i>\$20,000.00</i>	\$20,000.00	N/A	N/A	N/A
RF Accessories	<i>\$818.65</i>	\$818.65	N/A	N/A	N/A
Sub-total	\$167,783.65	\$129,413.46	N/A	\$0.00	N/A
Total for all systems	\$384,788.73	\$291,337.54	N/A	\$15,401.58	N/A

Components

Information not provided.

Cost
Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna 4DR-16-2HW	\$18,157.48	\$18,157.48		\$2,351.48	
Tower rigging, removal of existing panel antenna, and installation of new panel antenna	\$2,351.48	\$2,351.48	N/A	\$2,351.48	N/A
UHF-Low Power, Top Mount, Slotted Coaxial, 15.0 kW input, Horizontal	\$11,208.00	\$11,208.00	N/A	N/A	N/A
Coax Andrew, hangers, standoffs, EIA connectors	\$4,598.00	\$4,598.00	N/A	N/A	N/A
Sub-total	\$18,157.48	\$18,157.48	N/A	\$2,351.48	N/A
Total for all systems	\$384,788.73	\$291,337.54	N/A	\$15,401.58	N/A

Components

Actual Information Description	File Name
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Tower rigging, removal of existing panel antenna, and installation of new panel antenna	<div> <div>Component Description:</div> <div>Labor to remove existing single panel antenna</div> <div>Amount:</div> <div>\$2,351.48</div> </div>
UHF-Low Power, Top Mount, Slotted Coaxial, 15.0kW input, Horizontal	Information not provided.
Coax Andrew, hangers, standoffs, EIA connectors	Information not provided.

Cost Information **Transmission Line**
Information not provided.

Cost Information	Tower Equipment and Rigging Costs					
	Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).					
	Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
	Primary Tower TOWER	\$179,609.00	\$123,419.00		\$0.00	
	Tower Rigging Short Tower (less than 500')	\$56,190.00	\$0.00	N/A	N/A	N/A
	Rigging Services including freight, travel, per diem, labor on site and at plant	\$109,329.00	\$109,329.00	N/A	N/A	N/A
	Kintronics 150 Complete Isocoupler to avoid impairment of AM signal	\$9,250.00	\$9,250.00	N/A	N/A	N/A
	Ice Bridge	\$4,840.00	\$4,840.00	N/A	N/A	N/A
	Sub-total	\$179,609.00	\$123,419.00	N/A	\$0.00	N/A
	Total for all systems	\$384,788.73	\$291,337.54	N/A	\$15,401.58	N/A

Components
Information not provided.

**Cost
Information**

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$18,598.60	\$19,707.60		\$13,050.10	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$2,235.00	\$1,769.00	Additional expenses were incurred as indicated in the attached invoices.	\$1,769.00	Additional expenses were incurred as indicated in the attached invoices.
Additional Displacement Legal Services Not Otherwise Specified in Form 399	\$3,816.10	\$3,816.10	Additional expenses were incurred as indicated in the attached invoices.	\$3,816.10	Additional expenses were incurred as indicated in the attached invoices.
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,577.50	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$3,025.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$1,052.50	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$2,102.50	N/A	\$1,100.00	N/A
Prepare request for Special Temporary Authorization	\$1,280.00	\$510.70	N/A	\$510.70	N/A
Perform engineering study for displacement application	\$1,800.00	\$2,475.00	Additional expenses were incurred as indicated in the attached invoices.	\$2,475.00	Additional expenses were incurred as indicated in the attached invoices.
Prepare/ Review 399 reimbursement form	\$1,710.00	\$3,379.30	Additional expenses were incurred as indicated in the attached invoices.	\$3,379.30	Additional expenses were incurred as indicated in the attached invoices.
Sub-total	\$18,598.60	\$19,707.60	N/A	\$13,050.10	N/A
Total for all systems	\$384,788.73	\$291,337.54	N/A	\$15,401.58	N/A

Components

Actual Information**Description****File Name**

Attorney Fees - Prepare
and File request for Special
Temporary Authorization

Component Description:

Prepare and file
interim operations
STA request

Amount:

\$73.50

Component Description:

Prepare and file
interim operations
STA request

Amount:

\$1,061.00

Component Description:

Prepare and file
interim operations
STA extension
request

Amount:

\$634.50

Additional Displacement
Legal Services Not
Otherwise Specified in
Form 399

Component Description:

Additional
Displacement
Legal Services Not
Otherwise
Specified in Form
399

Amount:

\$788.80

Component Description:

Additional
Displacement
Legal Services Not
Otherwise
Specified in Form
399

Amount:

\$1,224.00

Component Description:	Additional Displacement Legal Services Not Otherwise Specified in Form 399
Amount:	\$105.50

Component Description:	Additional Displacement Legal Services Not Otherwise Specified in Form 399
Amount:	\$153.00

Component Description:	Additional Displacement Legal Services Not Otherwise Specified in Form 399
Amount:	\$49.00

Component Description:	Additional Displacement Legal Services Not Otherwise Specified in Form 399
Amount:	\$98.00

Component Description:	Additional Displacement Legal Services Not Otherwise Specified in Form 399
Amount:	\$49.00

	Component Description: Additional Displacement Legal Services Not Otherwise Specified in Form 399 Amount: \$51.00
	Component Description: Additional Displacement Legal Services Not Otherwise Specified in Form 399 Amount: \$1,275.00
	Component Description: Additional Displacement Legal Services Not Otherwise Specified in Form 399 Amount: \$22.80
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 engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.

<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="702 100 1101 324"> <p>Component Description:</p> </td><td data-bbox="1101 100 1426 324"> <p>Prepare engineering portion of displacement application</p> </td></tr> <tr> <td data-bbox="702 324 1101 436"> <p>Amount:</p> </td><td data-bbox="1101 324 1426 436"> <p>\$50.00</p> </td></tr> <tr> <td data-bbox="702 436 1101 660"> <p>Component Description:</p> </td><td data-bbox="1101 436 1426 660"> <p>Prepare engineering portion of displacement application</p> </td></tr> <tr> <td data-bbox="702 660 1101 728"> <p>Amount:</p> </td><td data-bbox="1101 660 1426 728"> <p>\$1,050.00</p> </td></tr> </table>	<p>Component Description:</p>	<p>Prepare engineering portion of displacement application</p>	<p>Amount:</p>	<p>\$50.00</p>	<p>Component Description:</p>	<p>Prepare engineering portion of displacement application</p>	<p>Amount:</p>	<p>\$1,050.00</p>
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<p>Component Description:</p>	<p>Prepare engineering portion of displacement application</p>								
<p>Amount:</p>	<p>\$1,050.00</p>								
<p>Prepare request for Special Temporary Authorization</p>	<table> <tr> <td data-bbox="702 728 1101 952"> <p>Component Description:</p> </td><td data-bbox="1101 728 1426 952"> <p>Engineering for STA request for Channel 29</p> </td></tr> <tr> <td data-bbox="702 952 1101 1064"> <p>Amount:</p> </td><td data-bbox="1101 952 1426 1064"> <p>\$250.00</p> </td></tr> <tr> <td data-bbox="702 1064 1101 1288"> <p>Component Description:</p> </td><td data-bbox="1101 1064 1426 1288"> <p>Prepare request for Special Temporary Authorization</p> </td></tr> <tr> <td data-bbox="702 1288 1101 1272"> <p>Amount:</p> </td><td data-bbox="1101 1288 1426 1272"> <p>\$260.70</p> </td></tr> </table>	<p>Component Description:</p>	<p>Engineering for STA request for Channel 29</p>	<p>Amount:</p>	<p>\$250.00</p>	<p>Component Description:</p>	<p>Prepare request for Special Temporary Authorization</p>	<p>Amount:</p>	<p>\$260.70</p>
<p>Component Description:</p>	<p>Engineering for STA request for Channel 29</p>								
<p>Amount:</p>	<p>\$250.00</p>								
<p>Component Description:</p>	<p>Prepare request for Special Temporary Authorization</p>								
<p>Amount:</p>	<p>\$260.70</p>								

Perform engineering study for displacement application	<table> <tr> <td data-bbox="708 98 1015 224">Component Description:</td><td data-bbox="1150 98 1426 224">Perform study of competitor applications</td></tr> <tr> <td data-bbox="708 224 1015 349">Amount:</td><td data-bbox="1150 224 1426 349">\$225.00</td></tr> <tr> <td data-bbox="708 349 1015 474">Component Description:</td><td data-bbox="1150 349 1426 474">TPO calculations for displacement</td></tr> <tr> <td data-bbox="708 474 1015 600">Amount:</td><td data-bbox="1150 474 1426 600">\$125.00</td></tr> <tr> <td data-bbox="708 600 1015 725">Component Description:</td><td data-bbox="1150 600 1426 725">Perform study of Channel 34 analog and digital</td></tr> <tr> <td data-bbox="708 725 1015 851">Amount:</td><td data-bbox="1150 725 1426 851">\$325.00</td></tr> <tr> <td data-bbox="708 851 1015 976">Component Description:</td><td data-bbox="1150 851 1426 976">Search for displacement channel</td></tr> <tr> <td data-bbox="708 976 1015 1102">Amount:</td><td data-bbox="1150 976 1426 1102">\$1,500.00</td></tr> <tr> <td data-bbox="708 1102 1015 1227">Component Description:</td><td data-bbox="1150 1102 1426 1227">Evaluate competitor filings</td></tr> <tr> <td data-bbox="708 1227 1015 1352">Amount:</td><td data-bbox="1150 1227 1426 1352">\$300.00</td></tr> </table>	Component Description:	Perform study of competitor applications	Amount:	\$225.00	Component Description:	TPO calculations for displacement	Amount:	\$125.00	Component Description:	Perform study of Channel 34 analog and digital	Amount:	\$325.00	Component Description:	Search for displacement channel	Amount:	\$1,500.00	Component Description:	Evaluate competitor filings	Amount:	\$300.00
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Amount:	\$325.00																				
Component Description:	Search for displacement channel																				
Amount:	\$1,500.00																				
Component Description:	Evaluate competitor filings																				
Amount:	\$300.00																				
Prepare/ Review 399 reimbursement form	<table> <tr> <td data-bbox="708 1352 1015 1478">Component Description:</td><td data-bbox="1150 1352 1426 1478">Prepare/ Review 399 reimbursement form</td></tr> <tr> <td data-bbox="708 1478 1015 1603">Amount:</td><td data-bbox="1150 1478 1426 1603">\$473.50</td></tr> <tr> <td data-bbox="708 1603 1015 1729">Component Description:</td><td data-bbox="1150 1603 1426 1729">Prepare/ Review 399 reimbursement form</td></tr> <tr> <td data-bbox="708 1729 1015 1845">Amount:</td><td data-bbox="1150 1729 1426 1845">\$73.50</td></tr> </table>	Component Description:	Prepare/ Review 399 reimbursement form	Amount:	\$473.50	Component Description:	Prepare/ Review 399 reimbursement form	Amount:	\$73.50												
Component Description:	Prepare/ Review 399 reimbursement form																				
Amount:	\$473.50																				
Component Description:	Prepare/ Review 399 reimbursement form																				
Amount:	\$73.50																				

Component Description:	Additional expenses were incurred as indicated in the attached invoices.
Amount:	\$671.50

Component Description:	Prepare/ Review 399 reimbursement form
Amount:	\$171.50

Component Description:	Prepare/ Review 399 reimbursement form
Amount:	\$73.50

Component Description:	Prepare/ Review 399 reimbursement form
Amount:	\$170.40

Component Description:	Prepare/ Review 399 reimbursement form
Amount:	\$1,654.20

Component Description:	Prepare/review Form 399
Amount:	\$91.20

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	\$640.00	\$640.00		\$0.00	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$305.00	\$305.00	N/A	N/A	N/A
Sub-total	\$640.00	\$640.00	N/A	\$0.00	N/A
Total for all systems	\$384,788.73	\$291,337.54	N/A	\$15,401.58	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$384,788.73	\$291,337.54
			\$15,401.58

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

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 	

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

<p>8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>James W. DeChant <i>VP of Technology</i></p> <p>11/19/2020</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	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).	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 	

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

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>James W. DeChant <i>VP of Technology</i></p> <p>11/19/2020</p>

Attachments