

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

**70612** Service: **LPA** Call Channel: 29 (UHF) Facility **WAMS-LD** ID:

Sign:

0000089727

Number:

File

FRN: 0018282269 Eligibility **Eligible** Date 04/19 /2021

Status: Submitted:

#### **Applicant** Information

#### **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
WEST CENTRAL OHIO BROADCASTING, INC.	Keith Wilkowski 405 Madison Avenue, Suite 2100 Toledo, OH 43604 United States	+1 (419) 724- 7276	kwilkowski@blockcommunications.	Corporation

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### **Preparer Contact** Information

#### **Preparer Contact Name and Information**

Applicant	Address	Phone	Email
Sam Hariton Widelity	Sam Hariton 4031 University Dr Suite 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.	Yes
Briefly describe transition plan	WAMS-LP is planning to upgrade its transmitter, upgrade its antenna, use an existing transmission line, and move to a different tower.

#### **Transmitters**

S 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	FMS
	Year	2004
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1 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	ULXTE-4
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	2.88 kW
	Justification for New Transmitter	WAMS-LD cannot retune the transmitter due to manufacturer bankruptcy. WAMS-LD is not seeking reimbursement for the second exciter required for this new transmitter to function.

## 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)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No

	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	150.0 feet
	Other Electrical Service	Yes
	Description	Wire, breakers, switches, and lighting
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 leashold improvement?	Yes
	Size	240.0 square feet

## Primary Transmitter

#### **Other Transmitter Cost Not Listed**

Name	Description
Primary Transmitter Installation	Cost of installing primary transmitter
Mask Filter	Costs associated with mask filter
Transmitter-Demodulator	Transmitter-Demodulator
Primary Transmitter - Remote Control System	Primary Transmitter - Remote Control System
Primary Transmitter-Transmitter Building Permit	Local permit required for work on transmitter building
Primary Transmitter - Other Parts	Other parts required for operation of primary transmitter

#### **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?	Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna	Mounting	Side Mount
Manufacturer and Type	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	2
	Number of Panels	4
	Design power capacity in use	50.0 %
	Lower Limit	470.00 MHz
	Upper Limit	862.00 MHz
	ERP: (Effective Radiated Power)	5.3 kW
	Manufacturer	
	Model	4X1KBBU
	Year	2004

Facility ID's and Call Signs of all stations with whom the antenna is shared.

Facility ID	Call Sign
21476	WPNM-LD

#### 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?	Yes
New Antenna	Mounting	Side Mount
Manufacturer and Types	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Туре	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	ATC- BCE512C1R- V3-29
	Year	2018
	Justification for New Antenna	The previous antenna would not fit on the new tower.

#### Primary Antenna

#### **Other Antenna Costs**

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

Information not provided.

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

#### Primary Transmission

#### **Existing Transmission Line**

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Primary (Main)
	Ownership	Owned
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	Andrew
	Туре	Flexible Foam
	Diameter	7/8 inches
	Number of parallel runs	1
	Length	600 feet per run

Facility ID's and Call Signs of all stations with whom the transmission line is shared.

Facility ID	Call Sign
21476	WPNM-LD

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Description

Primarv	Line -	Other	<b>Parts</b>
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Parts required to reuse existing transmission line already present at new WAMS transmission location

# 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)
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	No
	Others Types of Users	Yes
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1222849
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	40° 23' 19.2" N-
	Longitude (NAD83)	084° 21' 26.4" W-
	Overall Structure Height	299.87 feet
	Support Structure Height	299.87 feet
	Ground Elevation Above Mean Sea Level (AMSL)	957.01 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	SBA Properties, LLC
Date Constructed	05/09/2001

#### Other Types of Users

Users	
Sprint Cellular	

#### Primary Tower

#### **Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Tower mapping and report for structural engineer
Tower Reinforcements	Please select whether tower reinforcements are needed:	Major Reinforcements needed

## Primary Tower

#### **Tower Rigging Costs**

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

#### Primary Tower

#### Other Tower Expenses Not Listed

Name	Description
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Towar	Structural	Δnal	reie
104461	Juliuciulai	Allais	<i>1</i> 313

Tower Structural Analysis

#### Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	254
	Explanation	WAMS-LP does not have sufficient resource capacity and expertise in house to handle all of the reimbursement activities necessary to facilitate on- time completion of the station's build. WAMS- LP will hire an outside firm to support WAMS-LP in these tasks.
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	No
	Prepare Form 601	Yes

Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Negotiation of Lease and other Matter for Shared Locations	Yes
	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

# Other Professional Services Expenses Not Listed

al Services Costs	Description
FAA consultation	FAA consultation

# 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	Yes
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	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

Name	Description
Receive Antenna	Receive Antenna required due to repack channel change

#### **Transmitters**

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

Description Primary Transmitter	Predetermined Cost Estimate \$277,068.40	Estimated Cost \$277,068.40	Estimated Cost Justification	Actual Cost \$117,769.70	Actual Cost Justification
Primary Transmitter Installation	\$30,423.75	\$30,423.75	Please see GatesAir quote Q- 80869 (Upgraded equipment cost). Like for like costs referenced on Q-89238.	\$22,712.91	N/A
Mask Filter	\$11,445.02	\$11,445.02	Please see GatesAir quote Q- 80869 (Upgraded equipment cost).Like for like costs referenced on Q-89238.	\$7,019.58	x
Primary Transmitter- Transmitter Building Permit	\$348.33	\$348.33	Please see SBA Network Services, LLC quotation dated 11-21- 19, plus tax costs on invoice JC292890	\$348.33	N/A

Primary Transmitter - Other Parts	\$1,591.44	\$1,591.44	Please see WAMS Heartland Video Systems quote WISQ64073, plus actual tax and shipping on invoice 71983	\$0.00	N/A
Transmitter- Demodulator	\$918.67	\$918.67	Please see Heartland Video Systems quote WISQ63262	\$918.67	N/A
Primary Transmitter - Remote Control System	\$8,971.85	\$8,971.85	Please see Burke Technology quote 00003774, Heartland Video Systems quote WISQ63262, and Heartland Video Systems quote WISQ64073, plus freight and tax on Heartland invoice 71983	\$4,338.57	N/A
Other Building Addition Size: 240.0	\$25,125.24	\$25,125.24	Estimated Cost Justification WAMS-LD- 110-Primary Transmitter - Building Addition, 240 sq. ft. v0	\$25,125.23	N/A

Total for all systems	\$825,728.50	\$838,019.68	N/A	\$230,212.61	N/A
UHF - Liquid Cooled Solid State Transmitter 2.88 kW	\$121,359.80 \$277,068.40	\$121,359.80 \$277,068.40	Please see GatesAir quote Q- 80869 (Upgraded equipment cost) plus electrical costs. Like for like costs referenced on Q-89238. WAMS will not seek reimbursement for the second exciter on this quote.	\$36,922.11 \$117,769.70	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$14,400.00	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$3,900.00	\$3,900.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$38,200.00	N/A	N/A	N/A
Other Electrical Service: Wire, breakers, switches, and lighting	\$20,384.30	\$20,384.30	see Estimated Cost Justification WAMS-LD- 110-Primary Transmitter - Other Electrical Service V0	\$20,384.30	N/A

Actual Information Description	File Name	
Primary Transmitter Installation	Component Description: Amount:	Installation \$4,209.45
	Component Description: Amount:	Installation \$13,493.39
	Component Description: Amount:	Installation \$4,209.45
	Component Description:	Fabrication and installation, heat exchanger filter rack
	Amount:	\$800.62

Mask Filter		
	Component Description: Amount:	Mask Filter \$416.63
	Component Description:	Comb Invoice WAMS-LD-110- Primary Transmitter - Mask Filter Bauman Mechanical Inc. 23092
	Amount:	\$1,894.81
	Component Description: Amount:	Mask Filter \$1,468.77
	Component Description: Amount:	Mask Filter \$1,468.77
	Component Description: Amount:	Mask Filter \$1,770.60
Primary Transmitter- Transmitter Building Permit	Component Description: Amount:	Commercial Permit Application \$348.33
Primary Transmitter - Other Parts	Component Description: Amount:	Invoice to be moved to correct budget category. N/A
Transmitter-Demodulator	Component Description: Amount:	Demodulator \$918.67

Primary Transmitter -		
Remote Control System	Component Description:	Remote Control
	Amount:	System \$4,338.57
	Amount.	ψ <del>1</del> ,550.57
	Component Description:	Invoice moved to
		correct budget
	Amount:	category. N/A
	Amount.	IV/A
Other Building Addition		
Size: 240.0	<b>Component Description:</b>	Mobilization and
		General
		Conditions
	Amount:	\$24,751.26
	Component Description:	Additional
	Component Description.	grounding
	Amount:	\$373.97
Other Electrical Service:		
Wire, breakers, switches,	Component Description:	WAMS-LD-110-
and lighting		Primary
		Transmitter -
		Other Electrical
		Service
	Amount:	\$20,384.30
Switchgear - industrial 800	Information not provided.	
amp		
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Service entrance 3 phase	Information not provided.	
800 amp/208 volt		

UHF - Liquid Cooled Solid State Transmitter 2.88 kW	Component Description:	Transmitter
	Amount:	\$12,974.99
	Component Description:	Transmitter
	Amount:	\$3,749.68
	On many and Department on a	T
	Component Description:	Transmitter
	Amount:	\$12,974.99

**Component Description:** 

Amount:

Transmitter \$7,222.45

#### **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 ATC- BCE512C1R- V3-29	\$16,676.00	\$16,676.00		\$10,946.00	
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Elliptical	\$10,946.00	\$10,946.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***Please see Alive Telecom antenna proposal ATC- BCE512C1R- V3-29	\$10,946.00	N/A
Sweep test of transmission line and antenna	\$5,730.00	\$5,730.00	N/A	N/A	N/A
Sub-total	\$16,676.00	\$16,676.00	N/A	\$10,946.00	N/A
Total for all systems	\$825,728.50	\$838,019.68	N/A	\$230,212.61	N/A

Actual Information	
Description	File Name

UHF-Low Power, Side Mount, Slotted Coaxial, 15.0kW input, Elliptical	Component Description: Amount:	Antenna \$1,125.00
	Component Description: Amount:	Antenna \$5,221.00
	Component Description: Amount:	Antenna \$4,600.00
Sweep test of transmission line and antenna	Information not provided.	

#### **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	\$2,510.32	\$2,510.32		\$2,510.32	
Primary Line - Other Parts	\$2,510.32	\$2,510.32	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time.	\$2,510.32	N/A
Sub-total	\$2,510.32	\$2,510.32	N/A	\$2,510.32	N/A
Total for all systems	\$825,728.50	\$838,019.68	N/A	\$230,212.61	N/A

Actual Information Description	File Name	
Primary Line - Other Parts	Component Description: Amount:	Connector 1-5/8" \$1,520.65
	Component Description:	Ohio sales tax, 2- hole ground kit for 1-5/8" coax
	Amount:	\$109.40
	Component Description: Amount:	Hoisting Grip \$880.27

#### **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	\$479,690.00	\$441,671.93		\$20,671.93	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$18,171.93	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time	\$18,171.93	N/A
Tower mapping and report for structural engineer	\$21,000.00	\$21,000.00	N/A	\$0.00	N/A
Major tower reinforcement /modifications	\$400,000.00	\$400,000.00	Per full-power catalog of costs (this cost is not listed in LPTV catalog), pending quote	N/A	N/A
Tower Structural Analysis	\$2,500.00	\$2,500.00	Please see BLOCK WAMS-LD Structural Analysis Budget Justification Letter	\$2,500.00	N/A
Sub-total	\$479,690.00	\$441,671.93	N/A	\$20,671.93	N/A
Total for all systems	\$825,728.50	\$838,019.68	N/A	\$230,212.61	N/A

Actual Information Description	File Name	
Tower Rigging Short Tower (less than 500')	Component Description:	Mount, antenna quad UHF
	Amount:	receive antenna \$587.12
	Component Description: Amount:	Re-added N/A
	Component Description:	LABOR ON 1-2 20 THRU 1-23- 20, 1-27-20, 1-2
	Amount:	20, AND 1-31-2 \$17,584.81
Tower mapping and report for structural engineer	Information not provided.	
Major tower reinforcement /modifications	Information not provided.	
Tower Structural Analysis		
	Component Description:	Location Name- Structural
	Amount:	\$2,500.00

#### **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	\$42,386.50	\$92,695.75		\$77,322.38	
Prepare Form 601	\$755.00	\$755.00	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	N/A	N/A
Perform engineering study for displacement application	\$1,800.00	\$36,822.75	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time.	\$36,822.75	Please see submitted invoices.
Prepare/ Review 399 reimbursement form	\$1,710.00	\$1,883.50	The estimated cost has been adjusted to include all invoices submitted for reimbursement at this time.	\$1,409.83	Please see submitted invoices.
Project management of the transition	\$26,797.00	\$41,910.00	Please see WAMS-LP- LPTV strategic support quote	\$37,930.50	N/A

Sub-total  Total for all systems	\$42,386.50 \$825,728.50	\$92,695.75 \$838,019.68	N/A N/A	\$77,322.38 \$230,212.61	N/A N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$1,052.50	N/A	\$854.80	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
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 - Negotiation of lease and other matters for shared locations	\$3,262.50	\$3,262.50	N/A	N/A	N/A
FAA consultation	\$304.50	\$304.50	Please see BLOCK WAMS-LD FAA Consultation Budget Justification Letter	\$304.50	N/A

Actual Information	
Description	File Name

Prepare Form 601	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Perform engineering study		
for displacement application	Component Description:	Professional Services
	Amount:	\$959.10
	Component Description:	Consulting
		Engineering Services
	Amount:	\$883.90
	Component Description:	Consulting
		engineering services
	Amount:	\$1,270.35
	Component Description:	Consulting
		engineering
	Amount:	services \$7,637.60
	Component Description:	Consulting
	Component 2000 phone	engineering
	Amount:	services \$2,275.42
	Component Description:	Consulting
	Component Description.	engineering
	Amount:	services \$3,178.15
	Component Description:	Professional
		Services
	Amount:	\$3,134.50

Component Description: Professional

Services \$3,283.80

Amount:

Component Description: Consulting

Engineering Services

**Amount:** \$4,997.33

Component Description: Consulting

Engineering Services

**Amount:** \$307.90

Component Description: Consulting and

Engineering services

**Amount:** \$637.50

Component Description: Professional

Services

**Amount:** \$1,915.10

Component Description: Consulting

engineering services

**Amount:** \$6,342.10

Prepare/ Review 399 reimbursement form

**Component Description:** 

Amount:

Fees

\$985.50

**Component Description:** 

Amount:

Fees

\$424.33

Project management of the transition

Component Description:

Project

Management

\$309.80

**Component Description:** 

Project Management

Amount:

Amount:

\$905.25

**Component Description:** 

Project

Amount:

management \$1,816.50

Project

**Component Description:** 

management

Amount:

\$643.00

**Component Description:** 

Project

Amount:

Management \$4,580.90

**Component Description:** 

**Project** 

Amount:

Management \$553.00

**Component Description:** 

**Project** 

Amount:

Management \$126.45

**Component Description:** 

Project

Amount:

management \$6,139.55

**Component Description:** 

Project

Amount:

Management

\$3,081.55

**Component Description:** 

Amount:

**Project** 

Management \$2,508.90

**Component Description:** 

**Project** 

Management

\$428.45

**Component Description:** 

**Project** 

Amount:

Amount:

Management \$2,120.60

**Project** 

**Component Description:** 

Management

Amount:

\$1,227.75

**Component Description:** 

Project

Amount:

Management

\$118.75

**Component Description:** 

**Project** 

Amount:

Management \$7,320.95

**Component Description:** 

**Project** 

Amount:

Management \$907.55

**Component Description:** 

Project

Amount:

Management

\$692.85

**Component Description:** 

**Project** 

Amount:

management

\$4,448.70

FAA consultation		
	Component Description:	WAMS-LD-550- Attorney - FAA Consultation
	Amount:	\$304.50
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	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	Component Description:	Consulting engineering
	Amount:	services \$854.80

## **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	\$7,397.28	\$7,397.28		\$992.28	
Receive Antenna	\$992.28	\$992.28	Please see Heartland Video Systems quote WISQ64563- 02, plus actual shipping and tax on invoice 72301	\$992.28	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 Major change CP application	\$4,960.00	\$4,960.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,110.00	N/A	N/A	N/A
Sub-total	\$7,397.28	\$7,397.28	N/A	\$992.28	N/A
Total for all systems	\$825,728.50	\$838,019.68	N/A	\$230,212.61	N/A

## Components

Actual Information Description	File Name	
Receive Antenna		
	Component Description: Amount:	4' Parabolic UHF Broadband \$992.28
FCC Filing Fees - Form 2100 license to cover application	Information not provided.	
FCC Filing Fees - Form 2100 Major change CP application	Information not provided.	
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.	

# Cost Information

### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$825,728.50	\$838,019.68	\$230,212.61

Reimbursem	envestiarus	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

Section Question Response

#### Submission of Estimated Expenses Statements

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.

- 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.

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 abovenamed applicant for the Authorization(s) specified above. Keith Wilkowski VP, Legal & Governmental Affairs

04/19/2021

Section Question Response

# Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).

- 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 certifies that the statements in this form and attached documentation are true, complete, and correct.
- 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 abovenamed applicant for the Authorization(s) specified above. Keith Wilkowski VP, Legal & Governmental Affairs

04/19/2021

Section Question Response

Submission of Final Allocation or Accounting Information Statements 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.

- 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 abovenamed entity acknowledges that all certifications and attached documentation are considered material representations.
- 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 abovenamed applicant for the Authorization(s) specified above. Keith Wilkowski VP, Legal & Governmental Affairs

04/19/2021

#### **Attachments**