



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **188055** | Service: **LPD** | Call **KNPG-LD** | Channel:  
ID: | Sign:  
**9 (High VHF)** | File **0000089461**  
Number:  
FRN: **0021454004** | Eligibility **Eligible** | Date **06/10**  
Status: | Submitted: **/2021**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>News-Press TV, LLC</b> Doing Business As: News-Press TV, LLC	825 Edmond Street St. Joseph, MO 65401 United States	+1 (816) 271-8504	tim. hannan@npgco. com	Limited Liability Company

## 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.	Yes
Briefly describe transition plan	Please see Transition Plan Description Exhibit

## Transmitters

Section	Question	Response
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?	Yes

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	AT71K0
	Year	2012
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1.8 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?	No
	Manufacturer	
	Model	VAXTE-4R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3200 W
	Justification for New Transmitter	Please see 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	Yes

	Description	Labor and material for electrical work to install new manual transfer switch split with KNPG and KCJO
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No

**Primary Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
<b>Transmitter Building Improvement</b>	Transmitter Building Improvement
<b>Mask Filter System</b>	Mask Filter System
<b>KNPG Install and Commissioning of Transmitter</b>	KNPG Install and Commissioning of Transmitter

**Antennas**

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

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	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?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
<b>Existing Antenna Manufacturer and Type</b>	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	SFN-2030- B-12 (E/P)
	Year	2013

**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	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
<b>New Antenna Manufacturer and Types</b>	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	Type	Other
	Other Antenna Type	Panel
	ERP: (Effective Radiated Power)	3.0 kW
	Manufacturer	
	Model	THV-6
	Year	2018
	Justification for New Antenna	Please see Transition Plan Description Exhibit

**Primary  
Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No



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

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Name		Description
Transmission Line		Transmission Line
Antenna Sweep - KNPN-KNPG-KCJO		Antenna Sweep - KNPN-KNPG-KCJO

**Transmission Line**

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

Primary  
Transmission Line

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	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	
	Type	Flexible Foam
	Diameter	1 5/8 inches
	Number of parallel runs	0
	Length	240 feet per run

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

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Type	Flexible Air
	Diameter	1 5/8 inches
	Number of parallel runs	0
	Length	240 feet per run
	Justification for New Transmission Line	The new line and antenna allowed KNPG-LD to attach the new transmitter in an overnight switch, and provide a permanent facility in the new VHF residency.
<b>Interior RF Systems</b>	Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators?	No

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

Information not provided.

**Tower Equipment And Rigging Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	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	1006991
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	39° 45' 02.8" N-
	Longitude (NAD83)	094° 50' 25.8" W-
	Overall Structure Height	259.84 feet
	Support Structure Height	239.50 feet
	Ground Elevation Above Mean Sea Level (AMSL)	973.09 feet

	Structure Type	LTOWER - Lattice Tower
	Tower Owner	MIDWEST MOBILE RADIO SERVICE
	Date Constructed	07/01/2019

**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
188056	KNPN-LD	LPD
188057	KCJO-LD	LPD

## Primary Tower

### Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	No 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
KNPN and KNPG Antenna Installation	KNPN and KNPG Antenna Installation

**Outside  
Professional**

Section	Question	Response
<b>Services Costs</b> <b>Outside Project</b> <b>Management Services</b>	Do you require outside project management services?	No
<b>Outside RF consulting</b> <b>Engineering Services</b>	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	No
<b>Attorney and Other</b> <b>Outside Consulting</b> <b>Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	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



<b>RF Field Engineering Services</b>	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
<b>Additional Displacement Legal Services Not Otherwise Specified in Form 399</b>	Additional Displacement Legal Services Not Otherwise Specified in Form 399
<b>Project Management Services</b>	Project Management Services

**Other  
Expenses**

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Permit and Filing Costs</b>	FCC Construction Permit Major Change	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	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
<b>Point to Point Microwave (STL/ICR)</b>	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
<b>Primary Transmitter VAXTE-4R37</b>	<b>\$126,926.62</b>	<b>\$95,986.69</b>		<b>\$95,986.69</b>	
Other Electrical Service: Labor and material for electrical work to install new manual transfer switch split with KNPG and KCJO	<i>\$3,067.12</i>	\$3,067.12	N/A	\$3,067.12	N/A
Mask Filter System	<i>\$13,243.85</i>	\$13,243.85	N/A	\$13,243.85	N/A
Transmitter Building Improvement	<i>\$2,126.00</i>	\$2,126.00	N/A	\$2,126.00	N/A
KNPG Install and Commissioning of Transmitter	<i>\$7,489.65</i>	\$7,489.65	N/A	\$7,489.65	N/A
High VHF - Air Cooled Solid State Transmitter 1.1 - 4.4 kW	\$101,000.00	\$70,060.07	N/A	\$70,060.07	N/A
<b>Sub-total</b>	<b>\$126,926.62</b>	<b>\$95,986.69</b>	<b>N/A</b>	<b>\$95,986.69</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$236,153.47</b>	<b>\$154,753.49</b>	<b>N/A</b>	<b>\$142,152.38</b>	<b>N/A</b>

### Components

Actual Information		
Description	File Name	
Other Electrical Service: Labor and material for electrical work to install new manual transfer switch split with KNPG and KCJO	<b>Component Description:</b>	Labor and material for electrical work to install new manual transfer switch
	<b>Amount:</b>	\$3,067.12
Mask Filter System	<b>Component Description:</b>	Mask Filter
	<b>Amount:</b>	\$13,243.85
Transmitter Building Improvement	<b>Component Description:</b>	Transmitter Building Improvement
	<b>Amount:</b>	\$2,126.00
KNPG Install and Commissioning of Transmitter	<b>Component Description:</b>	GatesAir Comminssioning split with KCJO-LD
	<b>Amount:</b>	\$689.65
	<b>Component Description:</b>	KNPG Transmitter install and commissioning
	<b>Amount:</b>	\$6,800.00
High VHF - Air Cooled Solid State Transmitter 1.1 - 4.4 kW	<b>Component Description:</b>	GatesAir Transmitter Freight
	<b>Amount:</b>	\$1,875.00
	<b>Component Description:</b>	GatesAir Transmitter
	<b>Amount:</b>	\$68,185.07

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 THV-6	\$25,071.55	\$20,446.55		\$20,446.55	
Side Mount antenna brackets	\$4,625.00	\$0.00	N/A	N/A	N/A
Transmission Line	\$0.00	\$0.00	N/A	\$0.00	N/A
Antenna Sweep - KNPN-KNPG-KCJO	\$700.00	\$700.00	N/A	\$700.00	N/A
High VHF-Low Power, Side Mount, Other, 3.0kW input, Circular	\$19,746.55	\$19,746.55	N/A	\$19,746.55	N/A
Sub-total	\$25,071.55	\$20,446.55	N/A	\$20,446.55	N/A
Total for all systems	\$236,153.47	\$154,753.49	N/A	\$142,152.38	N/A

Components

Actual Information	
Description	File Name
Side Mount antenna brackets	Information not provided.
Transmission Line	Component Description: Transmission Line Amount: N/A

Antenna Sweep - KNPN-KNPG-KCJO	<div> <div>Component Description:</div> <div>Antenna sweep split with KNPG-KNPN-KCJO</div> <div>Amount:</div> <div>\$700.00</div> </div>
High VHF-Low Power, Side Mount, Other, 3.0kW input, Circular	<div> <div>Component Description:</div> <div>Antenna</div> <div>Amount:</div> <div>\$18,375.00</div> </div> <div> <div>Component Description:</div> <div>Antenna freight charges</div> <div>Amount:</div> <div>\$1,371.55</div> </div>

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	\$0.00	\$3,710.39		\$3,710.39	
Flexible Air Transmission Line - dielectric, 1 5/8"	\$0.00	\$3,710.39	N/A	\$3,710.39	N/A
Sub-total	\$0.00	\$3,710.39	N/A	\$3,710.39	N/A
Total for all systems	\$236,153.47	\$154,753.49	N/A	\$142,152.38	N/A

Components

Actual Information Description	File Name
Flexible Air Transmission Line - dielectric, 1 5/8"	<div><div>Component Description:</div><div>Amount:</div><div>Component Description:</div><div>Amount:</div></div> <div>Deposit on new transmission line \$1,829.58  Final payment on new transmission line \$1,880.81</div>

Cost  
Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower LTOWER	\$67,686.41	\$11,496.41		\$5,748.20	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$0.00	N/A	N/A	N/A
KNPN and KNPG Antenna Installation	\$11,496.41	\$11,496.41	N/A	\$5,748.20	N/A
Sub-total	\$67,686.41	\$11,496.41	N/A	\$5,748.20	N/A
Total for all systems	\$236,153.47	\$154,753.49	N/A	\$142,152.38	N/A

Components

Actual Information	
Description	File Name
Tower Rigging Short Tower (less than 500')	Information not provided.
KNPN and KNPG Antenna Installation	<div>Component Description:KNPN and KNPG Antenna Installation</div> <div>Amount:\$5,748.20</div>



## Cost Information

### Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$16,133.89</b>	<b>\$22,778.45</b>		<b>\$16,260.55</b>	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$3,025.00	N/A	\$1,009.90	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	\$1,600.00	N/A	\$1,600.00	N/A
Perform engineering study for displacement application	\$1,800.00	\$2,791.66	Additional expenses were incurred as indicated in the attached invoices.	\$2,791.66	Additional expenses were incurred as indicated in the attached invoices.

Prepare/ Review 399 reimbursement form	\$1,710.00	\$7,865.40	Additional expenses were incurred as indicated in the attached invoices.	\$7,865.40	Additional expenses were incurred as indicated in the attached invoices.
Project Management Services	<b>\$2,366.39</b>	\$2,366.39	N/A	\$2,366.39	N/A
Additional Displacement Legal Services Not Otherwise Specified in Form 399	<b>\$2,500.00</b>	\$2,500.00	N/A	\$627.20	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
<b>Sub-total</b>	\$16,133.89	\$22,778.45	N/A	\$16,260.55	N/A
<b>Total for all systems</b>	\$236,153.47	\$154,753.49	N/A	\$142,152.38	N/A

## Components

**Actual Information**  
**Description**

**File Name**

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="702 174 1015 210"><b>Component Description:</b></td><td data-bbox="1147 174 1307 286">Prepare displacement application</td></tr> <tr> <td data-bbox="702 297 815 327"><b>Amount:</b></td><td data-bbox="1147 297 1246 327">\$211.00</td></tr> <tr> <td data-bbox="702 434 1015 470"><b>Component Description:</b></td><td data-bbox="1147 434 1337 546">Prepare and file displacement application</td></tr> <tr> <td data-bbox="702 557 815 586"><b>Amount:</b></td><td data-bbox="1147 557 1246 586">\$277.10</td></tr> <tr> <td data-bbox="702 694 1015 730"><b>Component Description:</b></td><td data-bbox="1147 694 1337 806">Prepare and file displacement application</td></tr> <tr> <td data-bbox="702 817 815 846"><b>Amount:</b></td><td data-bbox="1147 817 1246 846">\$521.80</td></tr> </table>	<b>Component Description:</b>	Prepare displacement application	<b>Amount:</b>	\$211.00	<b>Component Description:</b>	Prepare and file displacement application	<b>Amount:</b>	\$277.10	<b>Component Description:</b>	Prepare and file displacement application	<b>Amount:</b>	\$521.80
<b>Component Description:</b>	Prepare displacement application												
<b>Amount:</b>	\$211.00												
<b>Component Description:</b>	Prepare and file displacement application												
<b>Amount:</b>	\$277.10												
<b>Component Description:</b>	Prepare and file displacement application												
<b>Amount:</b>	\$521.80												
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>												

Prepare engineering  
section of FCC Form 2100  
(main), Construction Permit  
Application

**Component Description:**

Prepare  
engineering for  
increase to  
antenna height  
minor modification

**Amount:**

\$375.00

**Component Description:**

TPO calculations  
for construction  
permit

**Amount:**

\$125.00

**Component Description:**

Prepare  
engineering section  
of displacement  
application

**Amount:**

\$50.00

**Component Description:**

Prepare  
engineering section  
of displacement  
application

**Amount:**

\$1,050.00

Perform engineering study for displacement application	<b>Component Description:</b>	Replacement
	<b>Amount:</b>	Channel search \$2,000.00
	<b>Component Description:</b>	Determine FCC
	<b>Amount:</b>	displacement for DISH \$83.33
	<b>Component Description:</b>	Initial displacement
	<b>Amount:</b>	studies \$625.00
	<b>Component Description:</b>	Restudy allocation
	<b>Amount:</b>	/TPO for KCJO- KNPN-KNPG \$83.33
Prepare/ Review 399 reimbursement form	<b>Component Description:</b>	Prepare/ Review
	<b>Amount:</b>	399 reimbursement form \$710.50
	<b>Component Description:</b>	Prepare/ Review
	<b>Amount:</b>	399 reimbursement form \$490.00
	<b>Component Description:</b>	Prepare/ Review
	<b>Amount:</b>	399 reimbursement form \$833.00
	<b>Component Description:</b>	Prepare/ Review
	<b>Amount:</b>	399 reimbursement form \$735.00

<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
<b>Amount:</b>	\$566.00

<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
<b>Amount:</b>	\$1,791.00

<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
<b>Amount:</b>	\$104.00

<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
<b>Amount:</b>	\$122.50

<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
<b>Amount:</b>	\$272.40

<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
<b>Amount:</b>	\$294.00

<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
<b>Amount:</b>	\$269.50

	<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
	<b>Amount:</b>	\$434.00
	<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
	<b>Amount:</b>	\$775.50
	<b>Component Description:</b>	Prepare/ Review 399 reimbursement form
	<b>Amount:</b>	\$468.00
Project Management Services	<b>Component Description:</b>	Project Management split with KNPN; KNPN will be requesting \$936.09 of the \$1872.17 on its Form 399
	<b>Amount:</b>	\$936.08
	<b>Component Description:</b>	Please note the exhibit attached with this invoice. The invoice total is \$2860.63. KNPN is requesting reimbursement of \$1430.31 and the Form 399 for KNPN will be requesting reimbursement of \$1430.32 for a total of \$2860.63.
	<b>Amount:</b>	\$1,430.31

<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p>	<table> <tr> <td data-bbox="702 174 1114 405"> <p><b>Component Description:</b></p> </td><td data-bbox="1145 174 1428 405"> <p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p> </td></tr> <tr> <td data-bbox="702 405 1114 472"> <p><b>Amount:</b></p> </td><td data-bbox="1145 405 1428 472"> <p>\$397.20</p> </td></tr> <tr> <td data-bbox="702 539 1114 770"> <p><b>Component Description:</b></p> </td><td data-bbox="1145 539 1428 770"> <p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p> </td></tr> <tr> <td data-bbox="702 770 1114 837"> <p><b>Amount:</b></p> </td><td data-bbox="1145 770 1428 837"> <p>\$51.00</p> </td></tr> <tr> <td data-bbox="702 904 1114 1135"> <p><b>Component Description:</b></p> </td><td data-bbox="1145 904 1428 1135"> <p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p> </td></tr> <tr> <td data-bbox="702 1135 1114 1202"> <p><b>Amount:</b></p> </td><td data-bbox="1145 1135 1428 1202"> <p>\$73.50</p> </td></tr> <tr> <td data-bbox="702 1270 1114 1500"> <p><b>Component Description:</b></p> </td><td data-bbox="1145 1270 1428 1500"> <p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p> </td></tr> <tr> <td data-bbox="702 1500 1114 1568"> <p><b>Amount:</b></p> </td><td data-bbox="1145 1500 1428 1568"> <p>\$105.50</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p>	<p><b>Amount:</b></p>	<p>\$397.20</p>	<p><b>Component Description:</b></p>	<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p>	<p><b>Amount:</b></p>	<p>\$51.00</p>	<p><b>Component Description:</b></p>	<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p>	<p><b>Amount:</b></p>	<p>\$73.50</p>	<p><b>Component Description:</b></p>	<p>Additional Displacement Legal Services Not Otherwise Specified in Form 399</p>	<p><b>Amount:</b></p>	<p>\$105.50</p>
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<p><b>Amount:</b></p>	<p>\$105.50</p>																
<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>																



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	\$335.00	\$335.00		\$0.00	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	N/A	N/A
Sub-total	\$335.00	\$335.00	N/A	\$0.00	N/A
Total for all systems	\$236,153.47	\$154,753.49	N/A	\$142,152.38	N/A

Components

Information not provided.

**Cost  
Information**

**Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$236,153.47	\$154,753.49	\$142,152.38

**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.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

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

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

<p>8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>James W. DeChant</b>  <i>VP of Technology</i></p> <p>06/10/2021</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"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>James W. DeChant</b>  <i>VP of Technology</i></p> <p>06/10/2021</p>

## Attachments