



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **69450** | Service: **LPD** | Call **WGCB-LD** | Channel: **36 (UHF)** |
ID:
File **0000089827**
Number:
FRN: **0032881088** | Eligibility **Eligible** | Date **10/16**
Status: Submitted: **/2020**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email |
|------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------|------------------------------------------|
| MARQUEE BROADCASTING INC. | Patricia R Lane 4400 BROOKEVILLE RD As: MARQUEE BROADCASTING INC. | +1 (301) 661- 9610 | PATRICIA_LANE@MARQUEEBROADCASTING COM |

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 |
|----------|----------|
|----------|----------|

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| 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 | T Mobile requested we get off Channel. We were displaced from Channel 41 to 36. We moved to 36 with no financial assistance from T Mobile. |

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 | TLU-1KE |
| | Year | 1990 |
| | Type | 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? | No |
| | Manufacturer | |
| | Model | TRN-5X-U-18-C |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 1.2 kW |
| | Justification for New Transmitter | The old Transmitter could not be retuned to new channel. |

**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? | Yes |
| | Type | Cooling Only |

| | | |
|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--------|
| | Size | Other |
| | Other Size | 1 tons |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leashold improvement? | No |

Primary Transmitter

Other Transmitter Cost Not Listed

| Name | | Description |
|--------|--|----------------------|
| Filter | | Filter & re-tune fee |

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 | Middle |
| | Polarization | Horizontal |
| | Type | Other |
| | Other Antenna Type | Dish Dipole |
| | ERP: (Effective Radiated Power) | 15.0 kW |
| | Manufacturer | |
| | Model | Paraflectors |
| | Year | 1990 |

**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? | No |
| | Will antenna be located on or in close proximity to an antenna farm? | No |
| New Antenna Manufacturer and Types | Mounting | Side Mount |
| | Antenna position in stack | Top |
| | Polarization | Horizontal |
| | Type | Other |
| | Other Antenna Type | Omniode |
| | ERP: (Effective Radiated Power) | 15.0 kW |
| | Manufacturer | |
| | Model | PSILP12OI-36 |
| | Year | 2018 |
| | Justification for New Antenna | Old antennas were Channel 41 only; could not be used for new channel. |

**Primary
Antenna**

Other Antenna Costs

| Section | Question | Response |
|---------|----------|----------|
|---------|----------|----------|

| | | |
|---------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------|
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes |
| | Broadband or Single Channel? | Single Channel |
| | Feed Line Size | 1 5/8 inches inches |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for a high power antenna? | No |
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | No |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

**Primary
Antenna**

Other Antenna Cost Not Listed

| Name | | Description |
|--------|--|----------------------------|
| Filter | | Purchase of Channel Filter |

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 | Modify Existing |
| | Tower Use | Primary (Main) |
| | Ownership | Leased |
| | Is this tower consider Complex? | No |
| | Is this tower currently shared with any other stations? | No |
| | Is tower documented for structural analysis? | Yes |
| | Is tower compliant with Rev G? | Yes |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1033736 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 31° 49' 53.0" N- |
| | Longitude (NAD83) | 081° 47' 20.0" W- |
| | Overall Structure Height | 200.13 feet |
| | Support Structure Height | 200.13 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 89.89 feet |

| | |
|------------------|------------------------------------------|
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | Rocket Dog, LLC |
| Date Constructed | 03/01/1995 |

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: | 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

Information not provided.

**Outside
Professional
Services
Costs**

| Section | Question | Response |
|-------------------------------------------------------|-------------------------------------------------------------------------|----------|
| 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 | 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 | 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 | Yes |
| 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 |
|-----------------------|---------------------|
| Davina Sashkin | FCC Lawyer Fees |
| Don Adams | Engineering |
| Jeff Winemiller | Engineering |
| Jim Myers | Engineering |
| Larry Will | PE Engineer |
| Larry Winemiller | Engineering |
| CTA Media Productions | Form 399 Assistance |
| Chuck Britt | Engineering |

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 | 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 TRN-5X-U-18-C | \$89,234.00 | \$44,234.00 | | \$43,709.00 | |
| Filter | <i>\$2,975.00</i> | \$2,975.00 | N/A | \$2,450.00 | N/A |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | \$84,000.00 | \$39,000.00 | N/A | \$39,000.00 | N/A |
| Other -- HVAC Service Type: C Size:1 (Other) | <i>\$2,259.00</i> | \$2,259.00 | N/A | \$2,259.00 | N/A |
| Sub-total | \$89,234.00 | \$44,234.00 | N/A | \$43,709.00 | N/A |
| Total for all systems | \$253,321.25 | \$127,730.85 | N/A | \$74,993.35 | N/A |

Components

| Actual Information Description | File Name |
|-----------------------------------|-----------|
|-----------------------------------|-----------|

| | | | | | | | |
|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------|-------------------------------------------------|-----------------------------------------------------|-------------------------------------------------|---------------------------------------------|
| Filter | <table> <tr> <td data-bbox="751 174 1059 248">Component Description: Amount:</td><td data-bbox="1193 174 1404 248">Filter & retune fee \$2,450.00</td></tr> <tr> <td data-bbox="751 353 1059 472">Component Description: Amount:</td><td data-bbox="1193 353 1404 472">retune fee 1500 watt filter 41 to 36 \$350.00</td></tr> <tr> <td data-bbox="751 577 1059 696">Component Description: Amount:</td><td data-bbox="1193 577 1404 696">Retune Fee - 250 Watt Filter \$175.00</td></tr> </table> | Component Description: Amount: | Filter & retune fee \$2,450.00 | Component Description: Amount: | retune fee 1500 watt filter 41 to 36 \$350.00 | Component Description: Amount: | Retune Fee - 250 Watt Filter \$175.00 |
| Component Description: Amount: | Filter & retune fee \$2,450.00 | | | | | | |
| Component Description: Amount: | retune fee 1500 watt filter 41 to 36 \$350.00 | | | | | | |
| Component Description: Amount: | Retune Fee - 250 Watt Filter \$175.00 | | | | | | |
| UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW | <table> <tr> <td data-bbox="751 824 1059 898">Component Description: Amount:</td><td data-bbox="1193 824 1326 898">Transmitter \$39,000.00</td></tr> <tr> <td data-bbox="751 1003 1059 1077">Component Description: Amount:</td><td data-bbox="1193 1003 1398 1077">Included Delivery \$39,000.00</td></tr> </table> | Component Description: Amount: | Transmitter \$39,000.00 | Component Description: Amount: | Included Delivery \$39,000.00 | | |
| Component Description: Amount: | Transmitter \$39,000.00 | | | | | | |
| Component Description: Amount: | Included Delivery \$39,000.00 | | | | | | |
| Other -- HVAC Service Type: C Size:1 (Other) | <table> <tr> <td data-bbox="751 1216 1059 1335">Component Description: Amount:</td><td data-bbox="1193 1216 1366 1335">Needed more cooling for unit \$2,259.00</td></tr> </table> | Component Description: Amount: | Needed more cooling for unit \$2,259.00 | | | | |
| Component Description: Amount: | Needed more cooling for unit \$2,259.00 | | | | | | |

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 PSILP12OI-36 | \$27,386.00 | \$18,985.60 | | \$12,310.60 | |
| Elbow complex, single channel, 1 5/8" input (if needed) | \$6,900.00 | \$2,029.60 | Myatt parts and 1 5/8" adapter and line | \$529.60 | N/A |
| Filter | <i>\$2,975.00</i> | \$2,975.00 | N/A | \$0.00 | N/A |
| Sweep test of transmission line and antenna | \$5,730.00 | \$2,200.00 | Engineer on site for day | \$0.00 | N/A |
| UHF-Low Power, Side Mount, Other, 15.0kW input, Horizontal | <i>\$11,781.00</i> | \$11,781.00 | Antenna cost without frieght | \$11,781.00 | N/A |
| Sub-total | \$27,386.00 | \$18,985.60 | N/A | \$12,310.60 | N/A |
| Total for all systems | \$253,321.25 | \$127,730.85 | N/A | \$74,993.35 | N/A |

Components

| Actual Information | |
|--------------------|-----------|
| Description | File Name |

| | | |
|---------------------------------------------------------|-------------------------------|------------------------------------------------------|
| Elbow complex, single channel, 1 5/8" input (if needed) | Component Description: | 1 5/8" to 7/8" 1 5/8" Elbows and connectors and line |
| | Amount: | \$1,500.00 |
| | Component Description: | RF Adapters |
| | Amount: | \$529.60 |
| | Component Description: | 1 5/8" to 7/8" 1 5/8" Elbows and connectors and line |
| Filter | Amount: | \$1,500.00 |
| | Component Description: | RF Adapters |
| | Amount: | \$529.60 |
| | Component Description: | Filter |
| | Amount: | N/A |
| Sweep test of transmission line and antenna | Component Description: | Tune Fee |
| | Amount: | N/A |
| Sweep test of transmission line and antenna | Component Description: | Sweep Line |
| | Amount: | \$2,108.86 |

| | | |
|---------------------------------------------------------------|-------------------------------|-----------------------------------|
| UHF-Low Power, Side Mount, Other, 15.0kW input, Horizontal | | |
| | Component Description: | Antenna |
| | Amount: | \$11,781.00 |
| | | |
| | Component Description: | Balance due for Antenna |
| | Amount: | \$5,890.50 |
| | | |
| | Component Description: | 50% Down Payment on Antenna |
| | Amount: | \$5,890.50 |
| | | |

| | |
|------------------|---------------------------|
| 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 | \$77,190.00 | \$5,000.00 | | \$4,200.00 |
| | Tower mapping and report for structural engineer | \$21,000.00 | \$2,000.00 | N/A | \$1,200.00 N/A |
| | Tower Rigging Short Tower (less than 500') | \$56,190.00 | \$3,000.00 | N/A | \$3,000.00 N/A |
| | Sub-total | \$77,190.00 | \$5,000.00 | N/A | \$4,200.00 N/A |
| | Total for all systems | \$253,321.25 | \$127,730.85 | N/A | \$74,993.35 N/A |

Components

| Actual Information Description | File Name |
|--------------------------------------------------|----------------------------------------|
| Tower mapping and report for structural engineer | Component Description: Tower Study |
| | Amount: \$1,200.00 |
| | Component Description: Tower Study |
| | Amount: \$1,200.00 |
| Tower Rigging Short Tower (less than 500') | Component Description: Change antennas |
| | Amount: \$3,000.00 |

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 | \$52,801.25 | \$52,801.25 | | \$14,773.75 | |
| Chuck Britt | <i>\$2,200.00</i> | \$2,200.00 | N/A | \$0.00 | N/A |
| CTA Media Productions | <i>\$3,000.00</i> | \$3,000.00 | Assistance with Form 399 - Vendor Management, Paperwork, Invoice & Payment Follow-up, Etc | \$3,000.00 | N/A |
| Larry Winemiller | <i>\$3,500.00</i> | \$3,500.00 | N/A | \$0.00 | N/A |
| Larry Will | <i>\$10,000.00</i> | \$10,000.00 | N/A | \$5,503.75 | N/A |
| Jim Myers | <i>\$2,476.25</i> | \$2,476.25 | N/A | \$2,476.25 | N/A |
| Jeff Winemiller | <i>\$5,000.00</i> | \$5,000.00 | N/A | \$0.00 | N/A |
| Don Adams | <i>\$2,000.00</i> | \$2,000.00 | N/A | \$0.00 | N/A |
| Davina Sashkin | <i>\$6,087.50</i> | \$6,087.50 | Lawyer fees | \$3,793.75 | N/A |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$2,235.00 | \$2,235.00 | N/A | \$0.00 | N/A |

| | | | | | |
|-----------------------------------------------------------------------------------------------------------|-------------------|------------|-----|--------|-----|
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$1,577.50 | \$1,577.50 | N/A | \$0.00 | N/A |
| Prepare Form 601 | \$755.00 | \$755.00 | N/A | \$0.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$3,025.00 | \$3,025.00 | N/A | \$0.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,052.50 | \$1,052.50 | N/A | \$0.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$2,102.50 | \$2,102.50 | N/A | \$0.00 | N/A |
| Perform engineering study for displacement application | \$1,800.00 | \$1,800.00 | N/A | \$0.00 | N/A |
| Form 399 assistance or other Program Management costs | \$3,000.00 | \$3,000.00 | N/A | \$0.00 | N/A |

| | | | | | |
|-----------------------------------------------------------------|--------------|--------------|-----|-------------|-----|
| Prepare/ Review 399 reimbursement form | \$1,710.00 | \$1,710.00 | N/A | \$0.00 | N/A |
| Prepare request for Special Temporary Authorization | \$1,280.00 | \$1,280.00 | N/A | \$0.00 | N/A |
| Sub-total | \$52,801.25 | \$52,801.25 | N/A | \$14,773.75 | N/A |
| Total for all systems | \$253,321.25 | \$127,730.85 | N/A | \$74,993.35 | N/A |

Components

| Actual Information | |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Description | File Name |
| Chuck Britt | Information not provided. |
| CTA Media Productions | <div> <div> Component Description: </div> <div> CtA Media Productions - September 2020 399 assistance </div> </div> <div> Amount: </div> <div> \$787.50 </div> <div> Component Description: </div> <div> CTA Media Productions - Form 399 Assistance - July/Aug 2020 </div> <div> Amount: </div> <div> \$2,212.50 </div> |

Larry Winemiller

Component Description:

Engineering
service with tower
work and
installation and
tower mapping

Amount:

\$3,500.00

Component Description:

Engineering
service with tower
work and
installation and
tower mapping

Amount:

\$3,500.00

| | | |
|-----------------|-------------------------------|------------------------------|
| Larry Will | Component Description: | PE work for new Channel |
| | Amount: | \$185.00 |
| | Component Description: | PE work for new Channel |
| | Amount: | \$832.50 |
| | Component Description: | PE work for new Channel |
| | Amount: | \$3,145.00 |
| | Component Description: | PE work for new Channel |
| | Amount: | \$1,341.25 |
| | Component Description: | PE work for new Channel |
| | Amount: | N/A |
| | Component Description: | PE work for new Channel |
| | Amount: | \$5,496.25 |
| Jim Myers | Component Description: | Work on 41 to 36 |
| | Amount: | \$2,476.25 |
| | Component Description: | Field work- Work on 41 to 36 |
| | Amount: | \$2,476.25 |
| Jeff Winemiller | Component Description: | Work to move from 41 to 36 |
| | Amount: | \$4,500.00 |

| | |
|----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Don Adams | Information not provided. |
| Davina Sashkin | <div> <div> Component Description: Amount: </div> <div> Lawyer Fees \$375.00 </div> </div> <div> <div> Component Description: Amount: </div> <div> Lawyer Fees \$168.75 </div> </div> <div> <div> Component Description: Amount: </div> <div> lawyer fees \$1,125.00 </div> </div> <div> <div> Component Description: Amount: </div> <div> Credit memo for invoice 201560 (\$495.00) </div> </div> <div> <div> Component Description: Amount: </div> <div> Lawyer fees \$2,370.00 </div> </div> <div> <div> Component Description: Amount: </div> <div> Lawyer Fees \$250.00 </div> </div> <div> <div> Component Description: Amount: </div> <div> Lawyer Bills to Date \$6,087.50 </div> </div> |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | Information not provided. |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Prepare Form 601 | 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. |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Perform engineering study for displacement application | Information not provided. |
| Form 399 assistance or other Program Management costs | <div> <div> Component Description: </div> <div> Prepare all documents and 399 </div> </div> <div> <div> Amount: </div> <div> \$2,500.00 </div> </div> |
| Prepare/ Review 399 reimbursement form | Information not provided. |
| Prepare request for Special Temporary Authorization | Information not provided. |

Cost Information

Other Expenses

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|-----------------------------------------------------------------------|-----------------------------|---------------------|------------------------------|--------------------|---------------------------|
| Other Expenses | \$6,710.00 | \$6,710.00 | | \$0.00 | |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$335.00 | N/A | \$0.00 | N/A |
| FCC Filing Fees - Form 2100 minor change CP application | \$1,110.00 | \$1,110.00 | N/A | \$0.00 | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$305.00 | \$305.00 | N/A | \$0.00 | N/A |
| FCC Filing Fees - Form 2100 Major change CP application | \$4,960.00 | \$4,960.00 | N/A | \$0.00 | N/A |
| Sub-total | \$6,710.00 | \$6,710.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$253,321.25 | \$127,730.85 | N/A | \$74,993.35 | N/A |

Components

Information not provided.

| | | | |
|------------------|-----------------------|-----------------------------|----------------|
| Cost Information | Grand Total | | |
| | | Predetermined Cost Estimate | Estimated Cost |
| | | | Actual Cost |
| | Total for all systems | \$253,321.25 | \$127,730.85 |
| | | | \$74,993.35 |

| 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"> 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 above-named applicant for the Authorization(s) specified above.

**Jeff
Winemiller**
Manager

10/16/2020

| Certification | Section | Question | Response |
|---------------|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| | Submission of Actual Cost Documentation Statements | <p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p> | |
| | | <ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. | |

5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.
8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <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>Jeff Winemiller <i>Manager</i></p> <p>10/16/2020</p> |

Attachments