



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **188771** | Service: **LPD** | Call **KLHO-LD** | Channel: **26 (UHF)**
ID:
File **0000092729**
Number:
FRN: **0021084082** | Eligibility **Eligible** | Date **11/19**
Status: | Submitted: **/2020**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TV ALABANZA MINISTRIES INC. Doing Business As: TV ALABANZA MINISTRIES INC.	Rachel Ramirez 1145 SW 240 Service Rd Ste C-100 OKLAHOMA, OK 73139 United States	+1 (405) 634-4021	rachel@tdaock.com	Not-for-Profit

Reimbursement Contact Information

Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
Jacqueline Fajardo <i>FCC Liaison and TV Consultant</i> <i>JD Enterprises</i>	Jacqueline Fajardo 106 South Airport Dr WESLACO, TX 78599 United States	+1 (956) 970-9561	Jackiefdj@yahoo.com

**Broadcaster
Information
and
Transition
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	Current transmitter was be retuned. Purchase a new antenna, current antenna cannot be retuned to the new channel. Remove old broadcast antenna and mounted new antenna.

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	Retune Existing
	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	E. L. Marsden Wireless Inc
	Model	1KTTTU

Year	2012
Type	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	1000 kW

**Primary
Transmitter**

Retuning Transmitter Costs

Section	Question	Response
New Mask Filter	Does the transmitter require a new mask filter?	Yes
	Mask Filter Type	Stringent
	Power	Other
	Other Power	1200 W
New Exciter	Is a new exciter needed?	No

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	No
HVAC Service	Does the replacement transmitter require HVAC Service?	No
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No

Primary	Other Transmitter Cost Not Listed
Transmitter	Information not provided.

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?	No
	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	Top
	Polarization	Elliptical
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	ATC- BCE416O- V0-26
	Year	2019

**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	Elliptical
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	ATC-BCE416O-V0-26
	Year	2019
	Justification for New Antenna	Frequency change

**Primary
Antenna**

Other Antenna Costs

Section	Question	Response
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

Name	Description
Tower Maintenance	Revomed previous antenna to mount new antenna
Tower Maintenance	Revomed previous antenna to mount new antenna

Transmission Line

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

Tower Equipment And Rigging Costs

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

Primary Tower**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	No
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1011122
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	35° 22' 10.0" N-
	Longitude (NAD83)	097° 27' 37.0" W-
	Overall Structure Height	345.80 feet
	Support Structure Height	339.89 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1309.70 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	TV ALABANZA MINISTRIES INC
	Date Constructed	01/01/1975

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

Information not provided.

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	No
Outside RF consulting Engineering Services	Perform engineering study for displacement application	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	No
	Prepare request for Special Temporary Authority	No
	Prepare Form 601	No
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	No
	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
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

Services Costs

Name	Description
Borsari and Paxson	Professional Services KLHO-LD displacement application reviews

**Other
Expenses**

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Permit and Filing Costs	FCC Construction Permit Major Change	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	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

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 1KTTTU	\$17,500.00	\$10,000.00		\$10,000.00	
Other 1200 w mask filter Stringent	\$6,500.00	\$6,500.00	N/A	\$6,500.00	N/A
Retune - UHF and VHF - minor re-channel issues	\$11,000.00	\$3,500.00	N/A	\$3,500.00	N/A
Sub-total	\$17,500.00	\$10,000.00	N/A	\$10,000.00	N/A
Total for all systems	\$153,945.00	\$84,387.50	N/A	\$62,012.50	N/A

Components

Actual Information Description	File Name
Other 1200 w mask filter Stringent	<div>Component Description: RF 1kW Mask Filter, tuned to channel 26</div> <div>Amount: \$6,500.00</div>
Retune - UHF and VHF - minor re-channel issues	<div>Component Description: Transmitter Tune to Channel 26</div> <div>Amount: \$3,500.00</div>

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 ATC-BCE416O-V0-26	\$70,480.00	\$69,250.00		\$46,875.00	
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Elliptical	<i>\$22,375.00</i>	\$22,375.00	KLHO- Oklahoma City-OK Facility ID#188771 Original Invoice did not include shipping cost	\$22,375.00	N/A
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Horizontal	<i>\$22,375.00</i>	\$22,375.00	***System Notice: Estimate adjusted and locked because line has been superseded. ***	\$0.00	Final cost exceeds estimated cost because it did not include shipping.
Tower Maintenance	<i>\$20,000.00</i>	\$20,000.00	N/A	\$20,000.00	N/A
Sweep test of transmission line and antenna	\$5,730.00	\$4,500.00	N/A	\$4,500.00	N/A
Sub-total	\$70,480.00	\$69,250.00	N/A	\$46,875.00	N/A
Total for all systems	\$153,945.00	\$84,387.50	N/A	\$62,012.50	N/A

Components

Actual Information	
Description	File Name
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Elliptical	Component Description: KLHO- Oklahoma City, OK Facility ID # 188771 ATC-BCE416O-V0-26 CH26 E-Pol Coaxial Slot Antenna, 16 Bay Omni Azimuh - Side Mount 1.00 Beam Tilt Mounts Included Amount: \$11,750.00
	Component Description: KLHO- Oklahoma City, OK Facility ID # 188771 ATC-BCE416O-V0-26 CH26 E-Pol Coaxial Slot Antenna, 16 Bay Omni Azimuh - Side Mount 1.00 Beam Tilt Mounts Included Amount: \$10,625.00
	Component Description: Down payment on antenna balance paid at delivery Amount: N/A
	Component Description: KLHO Antenna ATC-BCE416O-V0-26 Final payment and shipping cost Amount: N/A
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Horizontal	

Tower Maintenance	<div data-bbox="719 174 1023 210">Component Description:</div> <div data-bbox="1158 174 1374 483">Tower Rigging Plum Tower and Tension guy wires needed Removal of channel 31 antenna Mounting new antenna for channel 26</div> <div data-bbox="719 495 826 526">Amount:</div> <div data-bbox="1158 495 1294 526">\$20,000.00</div>
Sweep test of transmission line and antenna	<div data-bbox="719 665 1023 701">Component Description:</div> <div data-bbox="1158 665 1374 739">Sweep and tested transmission line</div> <div data-bbox="719 748 826 779">Amount:</div> <div data-bbox="1158 748 1278 779">\$4,500.00</div>

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	\$56,190.00	\$0.00		\$0.00	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$0.00	N/A	\$0.00	N/A
Sub-total	\$56,190.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$153,945.00	\$84,387.50	N/A	\$62,012.50	N/A

Components

Actual Information Description	File Name
Tower Rigging Short Tower (less than 500')	Component Description: N/A Amount: N/A

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	\$9,775.00	\$5,137.50		\$5,137.50	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$0.00	N/A	\$0.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$2,000.00	N/A	\$2,000.00	N/A
Perform engineering study for displacement application	\$1,800.00	\$1,000.00	N/A	\$1,000.00	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$1,000.00	N/A	\$1,000.00	N/A
Borsari and Paxson	\$1,137.50	\$1,137.50	N/A	\$1,137.50	N/A
Sub-total	\$9,775.00	\$5,137.50	N/A	\$5,137.50	N/A
Total for all systems	\$153,945.00	\$84,387.50	N/A	\$62,012.50	N/A

Components

Actual Information	
Description	File Name
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<div> Component Description: Professional Services </div> <div> Amount: \$1,137.50 </div>
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<div> Component Description: Performed Channel search and or alternate channel search for facility 188771 </div> <div> Amount: \$2,000.00 </div> <div> Component Description: Alternate Channel Check </div> <div> Amount: \$2,000.00 </div>
Perform engineering study for displacement application	<div> Component Description: ER Reduction Studies </div> <div> Amount: \$1,000.00 </div>
Prepare/ Review 399 reimbursement form	<div> Component Description: Prepared From 399 Eligibilty Prepared form 399 Prepared Cores Form 1876 </div> <div> Amount: \$1,000.00 </div>
Borsari and Paxson	<div> Component Description: Professional Services itemized invoice </div> <div> Amount: \$1,137.50 </div>

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	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$153,945.00	\$84,387.50	N/A	\$62,012.50	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$153,945.00	\$84,387.50
			\$62,012.50

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.	Yes

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

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

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

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.

<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>Jacqueline Fajardo <i>TV consultant</i></p> <p>11/19/2020</p>

Attachments