This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
08/29/2017	\$ ALLOCATION NUMBER

Return completed workbook by email to:

### coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting	2017/1										
Period											
B Owner	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation  List any other name or names under which the owner conducts the business of the cable system  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.										
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	CoBridge Broadband, LLC										
	Fidelity Cablevision, Inc.										
				1096920171							
				10969 2017/1							
	64 N Clark										
	Sullivan, MO 63080										
	INSTRUCTIONS: In line 1, give any business or trade names used to id	dentify the busines	ss and operation of the syste	em unless these							
С	names already appear in space B. In line 2, give the mailing address of										
System	1 IDENTIFICATION OF CABLE SYSTEM:										
	MAILING ADDRESS OF CABLE SYSTEM:										
	2   (Number, street, rural route, apartment, or suite number)										
	(City, town, state, zip code)										
D	Instructions: For complete space D instructions, see page 1b. Identify	only the fret comp	nunity served below and rel	ist on nage 1h							
_	with all communities.	only the list com	numity served below and ref	of page 15							
Area Served	CITY OR TOWN	STATE									
First	Benton	AR									
Community	Below is a sample for reporting communities if you report multiple cha		pace G								
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#							
Samala	Alda	MD	Α	1							
Sample	Alliance	MD	В	2							
	Gering	MD	В	3							

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

FORM SA3E. PAGE 1b.										
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
CoBridge Broadband, LLC			10969							
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.  Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses										
below the identified city or town.  If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).  When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a										
channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber grou									
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#							
Benton	AR			First						
Shannon Hills	AR			Community						
Alexander	AR									
Bauxite	AR									
Bryant	AR									
Bryant Haskell	AR			See instructions for						
Saline County (Portion)	AR			additional information						
Wrightsville	AR			on alphabetization.						
Pulaski (SE) County	AR									
Pulaski (W) County	AR									
				Add rows as necessary.						


Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

COBridge Broadband, LLC

SYSTEM ID#

10969

## Ε

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

**In General:** The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

**Number of Subscribers:** Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

**Rate:** Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

**Block 1:** In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

**Block 2:** If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLO	OCK 1			BLOCK 2			
0.475.0001/.05.0501//.05	NO. OF		5.475		0.4750.000//.05.0500//.05	NO. OF	D.4.T.F
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Ш	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
<ul> <li>Service to first set</li> </ul>	3,970	\$	30.99				
<ul> <li>Service to additional set(s)</li> </ul>							
<ul> <li>FM radio (if separate rate)</li> </ul>							
Motel, hotel	9	\$	10.00				
Commercial	19	\$	15.00				
Converter							
Residential							
<ul> <li>Non-residential</li> </ul>							
				1 ľ		1	T

## F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

**Block 1:** Give the standard rate charged by the cable system for each of the applicable services listed.

**Block 2:** List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

	BLO	CK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RAT	CATEGORY OF SERVICE	F	RATE	
Continuing Services:		Installation: Non-residential					
Pay cable	рр	Motel, hotel	\$8	80/hr	Tier	\$	45.00
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial	\$8	80/hr	Digital Basic	\$	12.00
Fire protection		Pay cable			Digital Tier	\$	7.99
Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>				<u>†                                     </u>	
Installation: Residential		Fire protection					
First set	\$80/hr	Burglar protection					
Additional set(s)		Other services:					
FM radio (if separate rate)		Reconnect	\$ 2	5.00		Ť	
Converter		Disconnect				Ť	
		Outlet relocation				<u> </u>	
		Move to new address				1	
						1	

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CoBridge Broadband, LLC 10969 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **KARK** 32 Ν NO LITTLE ROCK, AR **KARZ** 44 NO LITTLE ROCK, AR See instructions for additional information **KASN** 39 ı NO PINE BLUFF, AR on alphabetization. **KATV** 22 Ν NO LITTLE ROCK, AR 7 Ε **KETS** NO LITTLE ROCK, AR **KKAP** 36 ı NO LITTLE ROCK, AR **KMYA-DT** 49 NO LITTLE ROCK, AR **KLRT** 30 Ν NO LITTLE ROCK, AR **KTHV** 12 Ν NO LITTLE ROCK, AR **KVTN** 24 1 NO PINE BLUFF, AR

**ACCOUNTING PERIOD: 2017/1** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CoBridge Broadband, LLC 10969 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3 TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER STATION (If Distant) **KLTS** #N/A #N/A NO #N/A KLTS-DT2 #N/A #N/A NO #N/A KLTS-DT3 #N/A #N/A NO #N/A #N/A **KMSS** #N/A #N/A NO **KPXJ-HD** NO #N/A #N/A #N/A **KPXJ-DT** #N/A #N/A NO #N/A **KPXJ-DT2** NO #N/A #N/A #N/A **KPXJ-DT3** #N/A #N/A NO #N/A **KSHV** #N/A #N/A NO #N/A **KSLA** #N/A NO #N/A #N/A KTAL #N/A #N/A NO #N/A KAQC-LP #N/A #N/A NO #N/A KTBS-DT2 #N/A #N/A NO #N/A KTBS-DT3 #N/A #N/A NO #N/A

				0)/07514 ID#	
					Name
system during the country of the cou	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting th referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	<b>G</b> Primary Transmitters:
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		·	•	onamormo ap.	
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	dband, LLC  ERS: TELEVISIO G, identify even system during the ions in effect or 6.61(e)(2) and ( sis, as explaine Stations: With a CC rules, regular in here in space only on a subs and also in space formation concorned the station's call associated with a-2". Simulcast e channel numb se. For example system carried the in each case w or entering the le cast), "E" (for no see terms, see p ation is outside ice area, see p ave entered "Y the distant static cition on a part-tir sion of a distant the entered into or a primary trans simulcasts, also aree categories e location of ea Canadian statio ng multiple char  2. 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The in each case whether the station is a network of the carried the local service area, i.e. "Go (cast), "E" (for noncommercial educational), or each case energy (v) of the general instruction is outside the local service area, i.e. "Go (cast), "E" (for noncommercial educational), or each case energy (v) of the general instruction is outside the local service area, i.e. "Go (cast), "E" (for noncommercial educational), or each case the local service area, i.e. "Go (cast), "E" (for noncommercial educational), or the distant station during the accounting periodic area, see page (v) of the general instruction on a part-time basis because of lack of a sion of a distant multicast stream that is not statemer energy (continuous energy), and the process of the carried the order categories, see page (v) of the general instruction of each station. For U.S. stations, Canadian stations, if any, give the name of the gmultiple channel line-ups, use a separate CHANNEL LINE-UP  2. B'CAST 3. TYPE 4. DISTANT? (Yes or No)	ERS: TELEVISION  G, identify every television station (including translator stations system during the accounting period, except (1) stations carrier ions in effect on June 24, 1981, permitting the carriage of certs (5.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your of CC rules, regulations, or authorizations: In here in space G—but do list it in space I (the Special Stateme only on a substitute basis.  and also in space I, if the station was carried both on a substitute formation concerning substitute basis stations, see page (v) on form.  In the station's call sign. Do not report origination program service: associated with a station according to its over-the-air designary.  A-2". Simulcast streams must be reported in column 1 (list each end channel number the FCC has assigned to the television stating end carried the station.  In each case whether the station is a network station, an index of entering the letter "N" (for network), "N-M" (for network multice cast), "E" (for noncommercial educational), or "E-M" (for noncomme	ERS: TELEVISION  G. identify every television station (including translator stations and low power television stations) system during the accounting period. except (1) stations carried only on a part-time basis under ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections 5.61(e)(2) and (4)), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph.  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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CoBridge Broa	dband, LLC	; 			10969	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consistence of	he accounting n June 24, 194, or 76.63 (red in the next) respect to any attions, or auth G—but do listitute basis. ace I, if the state or in a station acceptance of the state	g period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried cute basis station report origination coording to its over be reported in our	(1) stations carried to carriage of certal (e)(2) and (4))]; as carried by your one Special Statement of both on a substitutions, see page (v) on program service er-the-air designal column 1 (list each the television stati	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						•		
LEGAL NAME OF OWNE	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
CoBridge Broad	dband, LLC				10969			
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its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, gi								
		CHANN	EL LINE-UP	AE				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN					SYSTEM ID#	Name
CoBridge Broa	dband, LLC				10969	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
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Note: If you are utilizing	ig multiple chai	•	·	•	channer inte-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CoBridge Broa	dband, LLC				10969	Traine
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
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FCC. For Mexican or 0	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	
Note: If you are utilizing	ng multiple char		<u> </u>	·	cnannei line-up.	
		CHANN	EL LINE-UP	AG		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
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FORM SA3E. PAGE 3.					Accoonti	NG 1 EMOD: 2017/1	
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Nome	
CoBridge Broad	dband, LLC				10969	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	)N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,61(e)(2) and (4), or 76,63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations:  10 not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  1 List the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  1 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  1 Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  1 Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  2 Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for							
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1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
SIGN	NUMBER	STATION	(Tes or No)	(If Distant)			
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FURINI SAJE. PAGE 3.					OVOTEM ID#	
CoBridge Broa					SYSTEM ID# 10969	Name
PRIMARY TRANSMITTE						
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the ons in effect or i.61(e)(2) and (sis, as explaine	he accounting n June 24, 198 (4), or 76.63 (red in the next p	g period, except 81, permitting th referring to 76.6° paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program	G Primary Transmitters: Television
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		CHANN	EL LINE-UP	Al		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CoBridge Broa	dband, LLC				10969	rano	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
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•	he distant statio	on during the	accounting perio	od. Indicate by ent	tering "LAC" if your cable system		
For the retransmiss	ion of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject		
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Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the		
Note: If you are utilizing				•	which the station is identifed. channel line-up.		
-		CHANN	EL LINE-UP	AJ			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN					SYSTEM ID#	Name
CoBridge Broa	dband, LLC				10969	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space ( carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you he cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For e explanation of these th Column 6: Give the	G, identify even by stem during the cons in effect on a 6.61(e)(2) and (6.61(e)(2) and (6.61(e	y television standard y television	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried that the station was carried to the period of the station was assigned to the station is a network etwork), "N-M" (I educational), one general instruction of the station was assigned to the station with the station was assigned to the station was assigned to the station was assigned to the station with the station was assigned to the station was assi	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of t	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	- Inditiple ondi		•	•	onamer inte up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	EL LINE-UP 4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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CoBridge Broa					SYSTEM ID# 10969	Name			
PRIMARY TRANSMITT									
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  **Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  **Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the bas									
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
CoBridge Broad	dband, LLC				10969			
PRIMARY TRANSMITTERS: TELEVISION  In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in								
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		CHANN	EL LINE-UP	AM				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN					SYSTEM ID#	Name
CoBridge Broa	dband, LLC				10969	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
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Note: If you are utilizing	ig multiple chai		•		channer inte-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
CoBridge Broa	dband, LLC	; 			10969			
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consine of the consine of the consistency of the con	he accounting n June 24, 194, or 76.63 (red in the next) respect to any attions, or auth G—but do listitute basis. ace I, if the state or in a station acceptance of the state	g period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried cute basis station report origination coording to its over be reported in our	(1) stations carried to carriage of certal (e)(2) and (4))]; as carried by your one Special Statement of both on a substitutions, see page (v) on program service er-the-air designal column 1 (list each the television stati	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television		
on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.  Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.								
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
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FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN					SYSTEM ID#	Name
CoBridge Broa	dband, LLC				10969	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pa	G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television state he accounting in June 24, 196 (4), or 76.63 (red) in the next prespect to any attions, or auth G—but do list titute basis. ace I, if the state erning substitions in the station account of the station account of the station. Whether the station. Whether the station. Whether the station account on during the account of the station on during the account of the station or before Junitter or an account of the station. The station is a count of the station. The station is a count of the station or before Junitter or an account of the station. For the station. For the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried that the station was carried to the period of the station was assigned to the station is a network etwork), "N-M" (I educational), one general instruction of the station was assigned to the station with the station was assigned to the station was assigned to the station was assigned to the station with the station was assigned to the station was assi	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of t	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing			EL LINE-UP	·	опатно што ир.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CoBridge Broa	dband, LLC	; 			10969		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consistence of	he accounting n June 24, 194, or 76.63 (red in the next) respect to any attions, or auth G—but do listitute basis. ace I, if the state or in a station acceptance of the state	g period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried cute basis station report origination coording to its over be reported in our	(1) stations carried to carriage of certal (e)(2) and (4))]; as carried by your one Special Statement of both on a substitutions, see page (v) on program service er-the-air designal column 1 (list each the television stati	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television	
on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.							
		CHANN	EL LINE-UP	AQ			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWNER OF CABI	E SYSTEM:			SYSTEM ID#	Name			
CoBridge Broadband, L	.LC			10969				
PRIMARY TRANSMITTERS: TELEVISION  In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel								
on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community with which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.  Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.								
	CHANN	EL LINE-UP	AR					
1. CALL 2. B'CAST SIGN CHANN NUMBE	IEL OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name		
CoBridge Broa	dband, LLC				10969	- Tunio		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for noncommercial educational), or "E-M" (for independent),								
carried the distant stat	ion on a part-tir	ne basis beca	ause of lack of a	ectivated channel	capacity.			
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FCC. For Mexican or 0	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.			
Note: If you are utilizing	ng multiple char		<u>'</u>	<u>'</u>	cnannei line-up.			
		CHANN	EL LINE-UP	AS				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
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FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN					SYSTEM ID#	Name
CoBridge Broa	dband, LLC				10969	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space ( carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you he cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For e explanation of these th Column 6: Give the	G, identify even by stem during the cons in effect on a 6.61(e)(2) and (6.61(e)(2) and (6.61(e	y television standard y television y te	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the stion was carried the period of the stion was carried to the stion was carried to the period of the stion was station to the period of the stion was assigned to the stion is a network of the stion was assigned to the stion of the stions, it was assigned to the stion of the stions, it was assigned to the stion of the	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the second of the Special Statement of the second	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ig multiple chai		·	•	channer inte-up.	
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						T	
LEGAL NAME OF OWN					SYSTEM ID#	Name	
CoBridge Broa	dband, LLC				10969		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4),76,616(e)(2) and (4),0 or 76,63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (V) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as sociated with a station according to its over-the-air designation for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational particular in each case whether the station is one of the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "d							
Note. If you are utilizing	ig multiple chai		•		channer inte-up.		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CoBridge Broa	dband, LLC				10969	- Namo
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis is basis under specific FC bo not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast).  Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiful For the meaning of the Column 4: If the st planation of local service Column 5: If you have	G, identify every system during the constructions in effect or Scholler (Scholler) (Scho	y television strans accounting in June 24, 194, or 76.63 (r d in the next prespect to any ations, or auth G—but do list titute basis. In the state of the state o	period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: to the station was carried ute basis station to the period of the reported in comparison of the station is a network ation is a network ation is a network of the stational, of the general instructive area, (i.e. "or general instructive, and to 76.0 permitting to the stational), of the general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, you must contact the permitting the stational or the s	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your constant of the Special Statement of both on a substitution, see page (v) on program services er-the-air designation of the television statistington, D.C. This work station, an indefer network multic or "E-M" (for noncontrions located in the station, on the station, on the station of the station	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your	G Primary Transmitters: Television
carried the distant stat	ion on a part-tir	ne basis beca	ause of lack of a	ctivated channel		
					payment because it is the subject stem or an association representing	
the cable system and	a primary trans	mitter or an as	ssociation repre	senting the primar	ry transmitter, enter the designa- her basis, enter "O." For a further	
explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	d in the paper SA3 form.	
				•	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AV		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
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FORM SA3E. PAGE 3.						. [	
LEGAL NAME OF OWN					SYSTEM ID#	Name	
CoBridge Broa	dband, LLC				10969		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4),76.63 (referring to 76,61(e)(2) and (4)),76.63 (referring to 76,61(e)(2) and (4)). and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent),							
Note. If you are utilizing	ig multiple chai			<u> </u>	chaine ine-up.	1	
4.001	O DICAGE		EL LINE-UP	I	O LOCATION OF STATION	-	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
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ACCOUNTING PERIOD: 2017/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 10969 CoBridge Broadband, LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2017/1
LEGAL NAME OF OWNER OF		EM:				S	YSTEM ID#	Name
CoBridge Broadband,	LLC						10969	Nume
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	IT AND PROGRAM LOG					
In General: In space I, identi substitute basis during the ad explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or autl	norizations. I	or a further	Substitute
1. SPECIAL STATEMENT						' '		Carriage:
During the accounting per broadcast by a distant stat		r cable system	carry, on a substitute basi	s, any nonne	twork televis	on program		Special Statement and Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is "	'Yes," you mι	ust complete	the progran	ı	r rogram Log
log in block 2.  2. LOG OF SUBSTITUTE	BBOCBA	Me						
In General: List each subst			te line. Use abbreviations v	wherever pos	sible, if their	meaning is		
clear. If you need more spa	ce, please a	attach addition	al pages.					
period, was broadcast by a			ision program (substitute p ur cable system substitute				on	
under certain FCC rules, re	gulations, o	r authorization	s. See page (vi) of the gen	eral instructio	ns located in	the paper		
SA3 form for futher informa titles, for example, "I Love L				"basketball".	List specific	program		
Column 2: If the program	n was broad	lcast live, ente	r "Yes." Otherwise enter "N					
			isting the substitute prograine community to which the		nsed by the	FCC or in		
the case of Mexican or Can	adian static	ns, if any, the	community with which the	station is iden	ntified).			
<b>Column 5:</b> Give the monfirst. Example: for May 7 given		when your sys	tem carried the substitute p	orogram. Use	numerals, w	ith the mon	th	
Column 6: State the time	es when the		gram was carried by your o				y	
to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	program carri	ed by a system from 6:01:1	5 p.m. to 6:2	:8:30 p.m. sh	ould be		
Column 7: Enter the lette			was substituted for progra					
to delete under FCC rules a								
gram was substituted for pr effect on October 19, 1976.		that your syste	em was permitted to delete	under FCC n	ules and reg	ulations in		
,							1	
s	UBSTITUT	E PROGRAM	1		EN SUBSTIT IAGE OCCL		7. REASON	
TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	I	MES	FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	- TO		
						-		
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**ACCOUNTING PERIOD: 2017/1** FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 10969 CoBridge Broadband, LLC PART-TIME CARRIAGE LOG J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

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 	<b>-</b>		 	 
				Form SA3E Long

U.S. Co

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
	Bridge Broadband, LLC			10969	Name				
Inst all a (as	OSS RECEIPTS  tructions: The figure you give in this space determines the form you fle and the amount imounts (gross receipts) paid to your cable system by subscribers for the system's second identified in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s)	ondary tran ompute thi	nsmissi	on service unt, see	<b>K</b> Gross Receipts				
IMP	during the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.	<b>\$</b> (Amo	ount of gr	809,847.00 oss receipts)					
<ul><li>Con</li><li>Con</li><li>If you</li><li>If you</li><li>If you</li></ul>	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  Complete block 1, showing your minimum fee.  Complete block 2, showing whether your system carried any distant television stations.  If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should back 3 below.	e entered o	on line	1 of					
-	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered on	line 2	in block					
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be ente	ered on	line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	e is 1.064 ¡		of the					
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064								
	Enter the result here. This is your minimum fee.	\$		8,616.77					
Block 2	, ,								
Block	Line 1. <b>BASE RATE FEE</b> : Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$							
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00					
	Line 3. Add lines 1 and 2 and enter here	\$		-					
Block 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE</b> : Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$		8,616.77	Cable systems				
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter			0.00	submitting additional				
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)			0.00	deposits under Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE	_\$_		725.00	additional fees. Division for the appropriate				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$		9,341.77	form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (	(i) of the	e					

	FUNNIONAL FACE O.										
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969										
	CHANNELS										
М											
IVI	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.										
Channels	to its subscribers and (2) the cable systems total number of activated drainless, during the accounting period.										
	1. Enter the total number of channels on which the cable										
	system carried television broadcast stations										
	2. Enter the total number of activated channels										
	on which the cable system carried television breadcast stations										
	and nonbroadcast services										
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual										
Individual to	we can contact about this statement of account.)										
Be Contacted											
for Further	Name Melinda Lahmann Telephone 573-468-1216										
Information											
	Address 64 N Clark										
	Address 04 N Clark (Number, street, rural route, apartment, or suite number)										
	Sullivan, MO 63080 (City, town, state, zip)										
	Email melinda.lahmann@fidelitycommunications.com Fax (optional)										
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.										
0											
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)										
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or										
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or										
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system										
	in line 1 of space B.										
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein										
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.  [18 U.S.C., Section 1001(1986)]										
	/s/ Carla Cooper										
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.										
1	(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the										
	"F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.										
	Typed or printed name: Carla Cooper										
,											
,											
	Title: VP of Finance										
1	(Title of official position held in corporation or partnership)										
,	Date: August 28, 2017										

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CoBridge Broadband, LLC	10969	
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by add lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall not scribers and amounts collected from subscribers receiving secondary transmissions pursuant to sec For more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners?  X NO	the basic include sub- tion 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address  Name Mailing Address		
INTEREST ASSESSMENTS		
INTEREST ASSESSMENTS  You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	<b>-</b> 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	est charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assis contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright C please list below the owner, address, first community served, accounting period, and ID number as given in filing.		
Owner Address		
First community served Accounting period ID number		

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2017/1

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

#### FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

# BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

**Step 1**: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of accoun (page 3), a distant station is:

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DCEs	

Note that local stations are not counted at all in computing DSEs.

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number or hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

**Step 3:** Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

# SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3E (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particula station's DSE for the accounting period.

### TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment

The 3.75 Fee. If a cable system located in whole or in part within  $\varepsilon$  television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, ir whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems fling SA3E (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any statior that it was authorized to carry or was lawfully carrying prior to March 31 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate but is subject to the Base Rate, and where applicable, the Syndicatec Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

## COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuan to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/o part-time basis only and complete the log to determine the portion of the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

#### COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE— PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100
  major television market as defined by the FCC rules and regulations in
  effect on June 24, 1981. If no portion of the cable system is located ir
  a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

## COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distant—that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable.
 First DSE 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
  - 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule; or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

- Calculate a separate base rate fee for each subscriber group, using
   the rates given above;
   the total number of DSEs for that group's complement of stations;
   and
   the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

**Rounding Off DSEs.** In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

### **EXAMPLE**:

### COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



	Distant Stations Carried		Identification o	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
6	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
-	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		<b>40,0000</b>			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

**Total Base Rate Fee:** \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

**ACCOUNTING PERIOD: 2017/1** 

DSE SCHEDULE. PAG	E 11. (CONTINUED)										
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#					
1	CoBridge Broadband, L	LC				10969					
	SUM OF DSEs OF CATEGOR		NS:								
	Add the DSEs of each station										
	Enter the sum here and in line	1 of part 5 of this	s schedule.		0.00						
	Instructions:										
2	In the column headed "Call S	Sign": list the ca	II signs of all distant stations	identified by t	the letter "O" in column 5						
	of space G (page 3).										
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-										
of DSEs for	mercial educational station, give the DSE as ".25."  CATEGORY "O" STATIONS: DSEs										
Category "O"	CALLOION	DOE			CALL CION	DOE					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as		<u> </u>									
necessary.											
Remember to copy											
all formula into new											
rows.											
10W3.											
						***************************************					
						•					
						***************************************					
						·····					

Name	CoBridge Bro	NER OF CABLE SYSTEM:  adband, LLC					S	10969
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: I figure should co Column 3: I Column 4: I be carried out a Column 5: I give the type-va Column 6: I	the call sign of all dista For each station, give the station of the information of the i	the number of hours mation given in spathe total number of I imm 2 by the figure nal point. This is the station, give the "typlumn 4 by the figure	your cable syster ce J. Calculate on nours that the stati in column 3, and ge "basis of carriague-value" as "1.0."	n carried the statuly one DSE for ending broadcast over give the result in the evalue" for the status of the statu	ion during the accounting ach station. er the air during the acco decimals in column 4. Th	unting period. is figure must cational station,	
Capacity		С	ATEGORY LAG	STATIONS:	COMPUTATION	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS C ED BY S M C	UMBER OF HOURS TATION ON AIR	4. BASIS OF CARRIAG VALUE	E VALUE		
						<u>x</u>		
						<u>x</u>		
						x x		
						x		
						x		
			÷	=		x	=	
	Add the DSEs of Enter the sum	DF CATEGORY LAC S each station. here and in line 2 of pa		e,	<b>&gt;</b>	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried be tions in effect     Broadcast one space I).     Column 2: Fo at your option. The Column 3: Er Column 4: Di	on October 19, 1976 ( e or more live, nonnetwo or each station give the his figure should corres her the number of days vide the figure in colum	itution for a progran as shown by the let ork programs during number of live, nor spond with the infor in the calendar ye in 2 by the figure in	n that your system ter "P" in column i that optional carri inetwork program- mation in space I. ar: 365, except in column 3, and giv	was permitted to 7 of space I); and age (as shown by s carried in subst a leap year. we the result in co	delete under FCC rules	of were deleted	m).
		SU	BSTITUTE-BAS	SIS STATIONS	S: COMPUTA	TION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=		÷		=
		÷		=		÷		=
	l	÷		=		÷		Ī
		÷		=		÷		=
	Add the DSEs of	oF SUBSTITUTE-BASI each station. here and in line 3 of pa		e,	<b>&gt;</b>	0.00		
5		OF DSEs: Give the am applicable to your systen		s in parts 2, 3, and	4 of this schedule	and add them to provide	the tota	
Total Number	1. Number of D	OSEs from part 2 ●				·	0.00	
of DSEs	2. Number of D	OSEs from part 3 ●			<b>:</b>	·	0.00	
	3. Number of D	OSEs from part 4 ●				·	0.00	
	TOTAL NUMBER	OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2017/1

LEGAL NAME OF C		SYSTEM:					S'	YSTEM ID#	Name		
CoBridge Bro								10969			
Instructions: Block A:									•		
schedule.				7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	the	6		
If your answer if	"No," complete blo			ELEVISION M.	ARKETS				Computation of		
Is the cable system						ection 76.5 of	FCC rules and re	gulations in	3.75 Fee		
effect on June 24,  Yes—Com		schedule—[	OO NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7					
	olete blocks B and										
BLOCK B: CARRIAGE OF PERMITTED DSEs											
Column 1:	List the call signs						tem was permitte	d to carry			
Column 1: List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)											
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station  BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to CARRIAGE 76.61(b)(c)]											
O/WWW.	B Specialty stati C Noncommeric D Grandfathered	al educational data	al station [76.5 65) (see parag	76.59(d)(1), 76.61( 9(c), 76.61(d), 76. graph regarding su	63(a) referrin	g to 76.61(d)					
	•	ant to individ	ual waiver of Fed on a part-tin	ne or substitute ba	•		orring to 76 61(a)	(E)			
	M Retransmission			contour, [76.59(d)( eam.	(3), 76.61(e)(	o), 76.63(a) lei	erring to 76.61(e)	(5)			
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
								0.00			
		В	LOCK C: CO	MPUTATION OF	3.75 FEE						
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule							
Line 2: Enter the	sum of permitte	ed DSEs fro	m block B ab	ove							
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.					
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent		
Line 5: Multiply I	ine 4 by 0.0375	and enter s	um here					-	partially permited/ partially		
Line 6: Enter tota	al number of DS	Es from line	: 3				Х		nonpermitted carriage? If yes, see part		
									9 instructions.		
Line 7: Multiply I	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969										
	1	BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			_	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6	
									Computation of 3.75 Fee	
									0.10100	
								••••••		
		• • • • • • • • • • • • • • • • • • • •						••••••		
								••••••		
		• • • • • • • • • • • • • • • • • • • •						•••••		
		•								
		• • • • • • • • • • • • • • • • • • • •			••••••			••••••		
								••••••		
								••••••		
								•••••		

	LEGAL NAME OF OWN	IER OF CABLE	SYSTEM:								S	YSTEM ID:	#	
Name	CoBridge Broa	dband, LL0	3									10969	9	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.  Column 1: List the call sign for each distant station identified by the letter "F" in column 2 of part 6 of the DSE schedule  Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981  Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1)  Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters  (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, section: 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).  B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)).  S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form.  Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule  Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station.  IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designater statement of account on fle in the Licensing Division.													
	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS													
	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS  1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED													
	SIGN	DSE			ERIOD			CARRIAGE		DSE		DSE		
													Т	
							•••••						••••	
							•••••						••••	
													••••	
													••••	
												•••••		
												•••••		
													••••	
													••••	
													••••	
							•••••						••••	
							•••••							
<b>7</b> Computation of the	Instructions: Block A In block A: If your answer is If your answer is	"Yes," comple	ete blocks B			е ра	art 8	8 of the DSE sched	ule.					
Syndicated			E	BLOCK	( A: MAJOR	TI	EL	EVISION MARK	ET					
Exclusivity														
Surcharge	Is any portion of the or	cable system v	vithin a top 1	100 majo	r television ma	rke	t as	defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?		
	Yes—Complete	blocks B and	IC.				Ī	No—Proceed to	part 8					
									•					
	BLOCK B: C:	arriage of VHI	F/Grade B (	Contour	Stations			BI OCK	C: Compu	tation of Exem	nt DSF	:		
						┪							_	
	Is any station listed in commercial VHF stati or in part, over the ca	on that places	•	•			nit	as any station listed y served by the cab former FCC rule 76	le system p					
	Yes—List each s	tation below wi	th its appropr	riate pern	nitted DSE		lr	Yes—List each st	ation below	with its appropria	ate permi	tted DSE		
	X No—Enter zero a			·				X No—Enter zero a			•			
						_								
	CALL SIGN	DSE	CALL S	IGN	DSE			CALL SIGN	DSE	CALL SIG	iN	DSE	l	
													,	
													ı	
													ı	
													, I	
													, I	
													ı	
			TOTAL [	OSEs	0.00	]				TOTAL DS	Es	0.00	ı	
i l	i					- 1	1							

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC	SYSTEM ID# 10969	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	809,847.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      \( \text{\text{X}} \) No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	SF	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	,_	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule.  X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

	LEGAL NAN	ME OF OWNER OF CABLE SYSTEM: SYSTEM ID
Name		CoBridge Broadband, LLC 1096
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.  F. Multiply line D by line E and enter here.  G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge.
8 Computation of Base Rate Fee	6 was of In bloom of If you of If you blank.  What is were lo	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?
		Yes—Complete part 9 of this schedule.  X No—Complete the following sections.
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _ \$ 809,847.00
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts (the amount in section 1).  B. Enter 0.00701 of gross receipts (the amount in section 1).  \$\begin{array}{c} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
		(the figure in section 2) and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee.  \$\times\$

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2017/1

LEGAL NAME OF OW	NER OF CABLE SYSTEM:	SYSTEM ID# 10969	Name
	n section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		
	0.01064 of gross receipts mount in section 1)▶\$		8
B. Enter	0.00701 of gross receipts mount in section 1)		Computation of
C. Multip	ly line B by 3.000 and enter here	_	Base Rate Fee
D. Enter (the a	0.00330 of gross receipts mount in section 1)		
	act 4.000 from total DSEs gure in section 2) and enter here		
F. Multip	ly line D by line E and enter here <b>&gt;</b> \$		
Enter	nes A, C, and F. This is your base rate fee. here and in block 3, line 1, space L (page 7)  Rate Fee	0.00	
instead be reported	no longer necessary to report television signals on a system-wide basis. Carriage of television broadcad on a community-by-community basis (subscriber groups) if the cable system reported multiple channels.	•	Q
Space G. In General: If any	of the stations you carried were partially distant, the statute allows you, in computing your base rate feet cribers located within the station's local service area, from your system's total gross receipts. To take a	e, to exclude	Computation of Base Rate Fee
station or the same	your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to a group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine ion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for esparate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
also compute a Syr	on of your cable system is located within the top 100 television market and the station is not exempt in producated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B been is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
•	Subscriber Group for Partially Distant Stations ommunity served, determine the local service area of each wholly distant and each partially distant stamunity.	tion you	for Partially Permitted Stations
outside the station'	wholly distant and each partially distant station you carried, determine which of your subscribers were lost local service area. A subscriber located outside the local service area of a station is distant to that state station is distant to the subscriber.)		
subscriber group m	r subscribers into subscriber groups according to the complement of stations to which they are distant. nust consist entirely of subscribers who are distant to exactly the same complement of stations. Note that one subscriber group when the distant stations it carried have local service areas that coincide.		
Computing the bagroups.	se rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
In each section: • Identify the comm	nunities/areas represented by each subscriber group.  for each of the stations in the subscriber group's complement—that is, each station that is distant to al group.	I of the	
<ul><li>If:</li><li>1) your system is loand 4 of this sched</li></ul>	ocated wholly outside all major and smaller television markets, give each station's DSE as you gave it i lule; or,	n parts 2, 3,	
2) any portion of your part 6 of this sol	our system is located in a major or smaller televison market, give each station's DSE as you gave it in bedule.	olock B,	
Add the DSEs for	each station. This gives you the total DSEs for the particular subscriber group.		
Calculate gross re in the paper SA3	eceipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general i form.	nstructions	
page. In making th	rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the his computation, use the DSE and gross receipts figure applicable to the particular subscriber group (th p's complement of stations and total gross receipts from the subscribers in that group). You do not need on the form.	at is, the total	

## SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 10969 CoBridge Broadband, LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWN CoBridge Broads						S	YSTEM ID# 10969	Name
[	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO	)UP		JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						 		and
			<u>.</u>					Syndicated
			····					Exclusivity Surcharge
				······				for
						-		Partially
								Distant
								Stations
	<u></u>					H		
	····					-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	)UP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>						<u></u>	
	<u></u>						<u></u>	
	••••							
						<del> </del>	••••	
		-						
	<u></u>						<u>.</u>	
	····			l		-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
	<b>~</b>   <b>~</b>	<u>·</u>			P	<u> </u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$	0.00	

TH SUBSCRIBER GROUP  0 Computation		TE FEES FOR EACH	BASE RA	COMPLITATION OF	DI COICA						
Computation	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  FIFTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O										
		COMMUNITY/ AREA	0		A	COMMUNITY/ AREA					
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
Base Rate Fe											
Syndicated				<b>-</b>							
Exclusivity											
Surcharge for											
Partially				H	·····						
Distant											
Stations					·····						
······································					<u>.</u>						
·····											
0.00	•	Total DSEs	0.00	-	•	Total DSEs					
ş <b>0.00</b>	d Group	Gross Receipts Secon	0.00								
		Base Rate Fee Secon	0.00	\$		Base Rate Fee First					
HTH SUBSCRIBER GROUP  0	EIGHTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GRO		COMMUNITY/ AREA					
						COMMONIT IT AREA					
CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
······											
<u>-</u>	-										
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······					·····						
0.00		Total DSEs	0.00			Total DSEs					
<u>\$</u> 0.00	Group	Gross Receipts Fourth	0.00	\$	rd Group	Gross Receipts Third					
\$ 0.00	ı Group	Base Rate Fee Fourt	0.00	\$	d Group	Base Rate Fee Third					

	EGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID#										
CoBridge Broadba	ına, LLC	•					10969	Name			
BL				ATE FEES FOR EAC							
COMMUNITY/ AREA	NINTH	SUBSCRIBER GRO		COMMUNITY/ AREA		SUBSCRIBER GROU	JP <b>0</b>	9			
COMMUNITY AREA			0	COMMUNITY AREA	······································			Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
								Base Rate Fee			
								and			
								Syndicated			
								Exclusivity Surcharge			
						-		for			
								Partially			
								Distant			
								Stations			
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00				
EL	EVENTH	SUBSCRIBER GRO	JP		TWELVTH	SUBSCRIBER GROU	JP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
				·		-					
		-									
	ļ										
						-					
Total DSEs	1		0.00	Total DSEs			0.00				
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00				
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00				
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$					

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID#  10969										
				TE FEES FOR EACH		BER GROUP SUBSCRIBER GROU				
THIR COMMUNITY/ AREA	TEENTH	SUBSCRIBER GROU	JP <b>0</b>	FOU COMMUNITY/ AREA	P 0	9				
						Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
							<u></u>	Base Rate Fee		
								and Syndicated		
		-						Exclusivity		
								Surcharge		
							<u></u>	for Partially		
							<u> </u>	Distant		
								Stations		
							<u></u>			
		-								
					<u> </u>					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00			
	TEENTH	SUBSCRIBER GROU		İ	IXTEENTH	SUBSCRIBER GROU	P 0			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
							<u> </u>			
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		-								
							<u>-</u>			
							<u></u>			
Total DSEs			0.00	Total DSEs	1		0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00			
Base Rate Fee Third G	Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$				

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID#  10969										
				ATE FEES FOR EAC							
COMMUNITY/ AREA		SUBSCRIBER GRO	<b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GRO	JP <b>0</b>	9			
								Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee			
				-				and			
								Syndicated			
	····		·					Exclusivity			
								Surcharge			
								for			
								Partially			
								Distant			
		-	<u>.</u>					Stations			
	····		<u>.</u>								
		-									
Total DSEs			0.00	Total DSEs		-	0.00				
Gross Receipts First (	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00				
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00				
N	INTEENTH	SUBSCRIBER GRO	UP	1	WENTIETH	I SUBSCRIBER GRO	JP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	<mark></mark>		<mark>.</mark>								
			<del> </del>								
	····	-	<u>-</u>								
	····		<u> </u>								
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			<u>.</u>								
	····		<u>.</u>		····						
	····		<u> </u>								
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00				
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00				
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$					

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROU	UP	9
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant Stations
								Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
						-		
					<u></u>			
		-						
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACI		RIBER GROUP I SUBSCRIBER GROI	UP	
COMMUNITY/ AREA	<del></del>		0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
				-				Exclusivity Surcharge
		-						for
								Partially Distant
								Stations
					<u></u>			
Total DSEs	!	!	0.00	Total DSEs		-	0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
TWENTY COMMUNITY/ AREA		SUBSCRIBER GROU	)P <b>0</b>	TWEN COMMUNITY/ AREA		I SUBSCRIBER GRO	UP <b>0</b>	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969									
				ATE FEES FOR EACH					
COMMUNITY/ AREA	Y-INIIN I IT	SUBSCRIBER GROU	0	COMMUNITY/ AREA	HIKITETH	SUBSCRIBER GROUP	0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
OALL GIGIT	DOL	OALL GIGIT	DOL	O'ALE GIGIT	BOL	CALLE GIGIN	DOL	Base Rate Fee	
								and	
								Syndicated	
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								Distant	
								Stations	
		-				_			
					<u> </u>				
Total DSEs	<del>                                     </del>		0.00	Total DSEs		<del>! !</del>	0.00		
Gross Receipts First Group \$ 0.00				Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00		
THIRT	Y-FIRST	SUBSCRIBER GROU	JP	THIRTY	'-SECOND	SUBSCRIBER GROUP	)		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
							<u> </u>		
		-				_			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID#  10969								
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
		<u> </u>			····			Distant Stations
								1
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00	l
								1
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	1
THIF COMMUNITY/ AREA	RTY-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA		1 SUBSCRIBER GROU	JP <b>0</b>	İ
								1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
								1
								1
			<u></u>					1
								1
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								1
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								1
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CoBridge Broadba						S	YSTEM ID# 10969	Name
-							10303	
		COMPUTATION OF SUBSCRIBER GROUND		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
					·····			Syndicated
								Exclusivity
								Surcharge
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								Partially
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T / I DOE			0.00	T		Ц	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
THIRT	ΓY-NINTH	SUBSCRIBER GRO	JP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
						-		
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
		_						
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID#	Name
COBINGE BIOAUD	and, LLC						10969	
				TE FEES FOR EAC			ID.	
COMMUNITY/ AREA	TY-FIRST	SUBSCRIBER GRO	<u>0</u>	COMMUNITY/ ARE		SUBSCRIBER GRO	0	9
OOMINIONIT IT AREA				COMMONT IT AIRE				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
								Syndicated
	<u></u>			·		-	<u> </u>	Exclusivity Surcharge
	<u>-</u>	-			•••••	-		for
								Partially
		<u> </u>						Distant
						<u> </u>		Stations
					·····	<b>-</b>		
	··	<b></b>			•••••		·····	
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	IY-THIRD	SUBSCRIBER GRO		ii .		SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	<mark></mark>		<u> </u>		·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	17				P	<u>·</u>		
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		
						L		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	١		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
		-						Syndicated
								Exclusivity Surcharge
								for
							<u></u>	Partially
					····			Distant Stations
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					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	and Group	\$	0.00	
<u>-</u>					·			
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
FORT COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA		1 SUBSCRIBER GRO	UP <b>0</b>	
OOMINIONIT IT AIRE				- AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			<u></u>		<mark></mark>			
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Total DSEs		ı	0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
			criber group	as shown in the boxes	s above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID#  10969								
				ATE FEES FOR EAC			ID.	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		1 SUBSCRIBER GROU	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122 0.011	202	0.122 0.0.1	502	37.22 3.3.1	202	37.122.31311	332	Base Rate Fee
	<u></u>							and
	····		······································					Syndicated Exclusivity
								Surcharge
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								Partially Distant
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00	ı
								ı
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	1
	FTY-FIRST	SUBSCRIBER GRO	UP <b>0</b>	iii —		SUBSCRIBER GROU		ı
COMMUNITY/ AREA			U	COMMUNITY/ AREA			0	ı
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	1
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	l
Base Rate Fee: Add t Enter here and in bloo			criber group	as shown in the boxes	s above.	\$		l

LEGAL NAME OF OWN CoBridge Broadb						S	YSTEM ID# 10969	Name
В	LOCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	TY-THIRD	SUBSCRIBER GRO		H		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
Of the ofoly	DOL	ONLE CICIV	BOL	O/ LEE GIGIT	BOL	O'NEE O'O'N	DOL	Base Rate Fee
			····					and
								Syndicated
								Exclusivity
						-		Surcharge
								for
	···		<del></del>		·····	-		Partially Distant
		H				-		Stations
		=				-		
			<mark></mark>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIF	TY-FIFTH	SUBSCRIBER GRO	UP		FIFTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>		<mark>.</mark>	-		
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Total DSEs	1	_	0.00	Total DSEs	1		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 10969	Name
-					o=	IDED 65 21/2	10303	
		COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION OF SUBSCRIBER GROUND COMPUTATION COM		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u> </u>		<u></u>			Base Rate Fee and
	<u></u>				·····	-		Syndicated
	<u> </u>		·		•••••			Exclusivity
								Surcharge
	<u> </u>							for
	<u></u>				<u>.</u>			Partially
	<u></u>		<u>.</u>		·····			Distant Stations
			······································			-		Stations
					•••••		••••	
	<u></u>		<b></b>					
			<u>.</u>					
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
FIF	TY-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>		<u></u>			
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		-						
			<u>.</u>		·····		····	
	<u> </u>		······································		•••••	-		
	<u>.</u>							
			<u> </u>		<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
-	•							
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969									
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACI		RIBER GROUP SUBSCRIBER GROU	UP	0	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	<b>9</b> Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
								Syndicated	
				-			<u> </u>	Exclusivity Surcharge	
		-						for	
								Partially Distant	
		-						Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
S	IXTY-THIRD	SUBSCRIBER GROU	JP	SIXT	Y-FOURTH	I SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				-					
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  COBridge Broadband, LLC  SYSTEM ID# 10969								
				ATE FEES FOR EACH			10	
COMMUNITY/ AREA	I Y-FIF I H	SUBSCRIBER GRO	<b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GROU	)P 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
		<u> </u>	-					and
								Syndicated
								Exclusivity
		<u> </u>						Surcharge
			<b></b>					for
		<b>-</b>	<u>.</u>				····	Partially Distant
	·		<u> </u>		-			Stations
								l
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			<b></b>					l
			<b>.</b>					l
Total DSEs	-		0.00	Total DSEs	_	11	0.00	İ
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00	İ
								İ
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	1
	SEVENTH	SUBSCRIBER GRO		11		I SUBSCRIBER GROU	JP -	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
			<u>.</u>					l
			<b></b>				····	l
	·	<del>-</del>	······		<u></u>			l
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			<u>.</u>					l
			<b></b>					l
	·	<b></b>	<u>.</u>					l
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			<u>.</u>		<u></u>			l
			<b></b>					İ
Total DSEs			0.00	Total DSEs		H	0.00	İ
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	1
					,			1
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	1
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		1

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
В	LOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	TY-NINTH	SUBSCRIBER GRO		11		I SUBSCRIBER GROU	JP <b>0</b>	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<b></b>					and
	···		<u>.</u>		<u></u>			Syndicated Exclusivity
								Surcharge
								for
								Partially
		<u> </u>						Distant Stations
		-						
			<mark>.</mark>		<u></u>			
	···		<u>-</u>		<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs	·		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ITY-FIRST	SUBSCRIBER GRO	UP <b>0</b>	11		SUBSCRIBER GROU	JP <b>0</b>	
COMMUNITY/ AREA			U	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>	-				
			<u>-</u>					
	···		<u>.</u>					
			<u> </u>					
		<b>-</b>	<b></b>					
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	h Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add to			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
SEVE	NTY-THIRD	COMPUTATION OF SUBSCRIBER GROU	JP	11	ΓY-FOURTH	RIBER GROUP I SUBSCRIBER GROI	JP 0	9
COMMUNITY/ AREA	<i></i>		0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
					<u></u>			Syndicated
								Exclusivity
					<u></u>			Surcharge for
								Partially
					<u></u>			Distant Stations
					<u></u>			Stations
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		11		H SUBSCRIBER GROU		
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
						-		
					<u></u>			
					<u></u>			
	·····				<del></del>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID#  10969									
SEVENTY-		COMPUTATION OF SUBSCRIBER GRO	JP	Ħ	ITY-EIGHTH	RIBER GROUP I SUBSCRIBER GROU	JP 0	9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
					<u></u>			Syndicated	
								Exclusivity	
								Surcharge for	
								Partially	
								Distant	
		<b>-</b>			<u></u>			Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
	TY-NINTH	SUBSCRIBER GRO		ii —		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					<u></u>				
				-					
		<b></b>			····				
					<u></u>				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$			

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID#  10969									
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP				
	Y-FIRST	SUBSCRIBER GROU		Ti .	Y-SECOND	SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
					<u>-</u>			Surcharge for		
					·	-		Partially		
		-						Distant		
								Stations		
		-								
					<u>.</u>					
Total DSEs	<u> </u>		0.00	Total DSEs		Ц	0.00			
						_				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00			
	Y-THIRD	SUBSCRIBER GROU	JP	11	Y-FOURTH	SUBSCRIBER GROU	Р			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
					<u>.</u>		<u></u>			
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					·	-	<u></u>			
						-	<u></u>			
			 		<u>.</u>					
					<u>-</u>		<u></u>			
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00			
			<del>_</del>							
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROI	JP	
COMMUNITY/ AREA	·		0	COMMUNITY/ AREA	0	<b>9</b> Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
								Syndicated
				-		-	<u> </u>	Exclusivity Surcharge
								for
								Partially Distant
								Stations
								ı
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	1
		SUBSCRIBER GROU		ii		I SUBSCRIBER GRO		1
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	ı
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
								ı
								ı
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								ı
								ı
								ı
								ı
								ı
								ı
Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Third	1 Group	\$	0.00	Gross Receipts Fourt	n Group	\$	0.00	1
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	1
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		l

LEGAL NAME OF OWN CoBridge Broadb						S	YSTEM ID# 10969	Name
				TE FEES FOR EAC				
	ITY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU	UP <b>0</b>	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
	····	<u> </u>		·				Exclusivity
								Surcharge
								for
								Partially Distant
	···	<del> </del>	····					Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GRO	DUP	NINE	TY-SECONE	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>							
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	···	<u> </u>	····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	<b>\$</b>	0.00	Gross Receipts Fou	rth Group	<b>\$</b>	0.00	
	•				r			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN CoBridge Broadb						S	YSTEM ID# 10969	Name	
В	LOCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP			
NINE	TY-THIRD	SUBSCRIBER GRO		NINE	TY-FOURTH	SUBSCRIBER GROU	JP	9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	_				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
07.122.01011	202	07.122.01.01.1	332	07.122 07011	202	0.122.0.0.1	302	Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
						-		Surcharge	
			···					for Partially	
			···					Distant	
	···	-				+		Stations	
						-			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
NINE	TY-FIFTH	SUBSCRIBER GRO	UP	NI	NETY-SIXTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						<u> </u>			
						<u> </u>	<u></u>		
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add to Enter here and in bloc			criber group	as shown in the boxe	es above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
NINETY		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
								Syndicated
								Exclusivity
	<u></u>				<u></u>			Surcharge for
								Partially
	<u></u>	-						Distant Stations
								Stations
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROU		III		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			riber group	o as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
ONE HUND	RED FIRST	COMPUTATION OF SUBSCRIBER GROU		11	D SECONE	RIBER GROUP SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	١		0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
					<u></u>			Syndicated
								Exclusivity
					<u></u>			Surcharge for
								Partially
								Distant Stations
					<u></u>			Stations
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		SUBSCRIBER GRO		
COMMUNITY/ AREA	١		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
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					<u></u>			
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CoBridge Broadb						S	YSTEM ID# 10969	Name
				TE FEES FOR EAC				
	RED FIFTH	SUBSCRIBER GRO	OUP <b>0</b>	ONE HUN COMMUNITY/ ARE	UP <b>0</b>	9		
COMMUNITY/ AREA					Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	···							and Syndicated
	···	H	···					Exclusivity
								Surcharge
								for
								Partially Distant
	···							Stations
								ı
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								ı
Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts First (	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	ı
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	l
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	DUP	ONE HUND	RED EIGHTH	SUBSCRIBER GROU	UP	ı
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	l
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	ı
·					•			ı
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	l
Base Rate Fee: Add t Enter here and in bloc			scriber group	as shown in the boxe	es above.	\$		l

LEGAL NAME OF OWNER OF CABL CoBridge Broadband, LLC					SY	STEM ID# 10969	Name
BLOCK A: C			TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUI	0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate Fee
							and
							Syndicated
							Exclusivity
							Surcharge
	-						for
							Partially
	-						Distant Stations
							Stations
	-				-		
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED ELEVENTH	SUBSCRIBER GROU	P	ONE HUNDRED	TWELVTH	SUBSCRIBER GROUI	)	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-						
	-						
						<b></b>	
	-				-		
	-						
Total DSEs		0.00	Total DSEs			0.00	
	•	0.00		Group	¢	0.00	
Gross Receipts Third Group	Ψ	0.00	Gross Receipts Fourth	Gloup	\$	0.00	
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the base rat Enter here and in block 3, line 1, s		riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER  CoBridge Broadba						SI	STEM ID# 10969	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
ONE HUNDRED THIR	TEENTH	SUBSCRIBER GROL		Ti .		SUBSCRIBER GROU	Р	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<del>  </del>		<u></u>	Syndicated Exclusivity
								Surcharge
		-				-		for
								Partially
						 		Distant
		-					<u></u>	Stations
							<u></u>	   
		-			<u></u>	•	<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED S	SIXTEENTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<del></del>		<u></u>	
						-	<u> </u>	
					···	-		
						-	<u> </u>	
		-			···		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 10969	Name
				ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GRO	JP	H .		I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u> </u>		<u>.</u>					and
	<u> </u>		<u>.</u>		·····			Syndicated Exclusivity
	<u></u>	<del> </del>	<u>-</u>					Surcharge
								for
								Partially
		-						Distant
	<u> </u>		<u>.</u>					Stations
	···				·····		····	
	<u></u>		······································		••••		····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Froup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED NI	NTEENTH	SUBSCRIBER GRO	JP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u>.</u>		·····			
	···	-	<u>.</u>					
		-						
	<u> </u>		<u>.</u>					
	<u> </u>		<u>.</u>		·····			
	···				•••••			
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNI CoBridge Broadb						S	YSTEM ID# 10969	Name
В	LOCK A: (	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>					Base Rate Fe
				1				Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
	···	<b></b>						Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEE	NTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA		0		COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		<del> </del>		·····			
			<del></del>	1				
		-						
	···		<del>  </del>					
				1				
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
<b>Base Rate Fee:</b> Add to Enter here and in bloc			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN CoBridge Broadb						S	YSTEM ID# 10969	Name
В	LOCK A: (	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROU	Р	ONE HUNDRED T	WENTY-SIXTH	I SUBSCRIBER GROUP	)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>	.				Base Rate Fe
		-						Syndicated
		<b></b>						Exclusivity
								Surcharge
		-						for
	···	<u> </u>						Partially Distant
								Stations
		<b>-</b>						
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First G	-roup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Cross receipts i list c	лоир	<u>"</u>	0.00	Cross receipts occ	она Огоар	<u>*</u>	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NE HUNDRED TWENTY	'-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TWI	ENTY-EIGHTH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<del> </del>	···					
		-						
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
							<del></del>	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN CoBridge Broadb						S	YSTEM ID# 10969	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROUP	)	ONE HUNDRE	D THIRTIETH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Commutation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O'NEE GIGIT	BOL	O/ IEE GIGIT	DOL	ONEE GIGIT	DOL	O'ALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
							<u></u>	Partially
						-		Distant Stations
	···		······································	·	·····	-		Stations
					•••••			
			•					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROUP	)	ONE HUNDRED THI	RTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<del></del>				·····		<del></del>	
	···	-	·		•••••			
			<u> </u>			<del> </del>	····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN CoBridge Broadl						S	YSTEM ID# 10969	Name
	BLOCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDRED TH	IRTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TH	IRTY-FOURTH	I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						<u> </u>		Exclusivity
	<u></u>							Surcharge
								for
						<u> </u>		Partially
	····	-				-		Distant Stations
	····		<del></del>			-		Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU	Р	ONE HUNDRED	THIRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	NITY/ AREA	0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u></u>					
		-	<del></del>		·····			
	<del></del>		<del></del>		······	H	·	
	····		···			+		
							<u></u>	
			<del></del>			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	•	-			•	-		
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW CoBridge Broad						S	YSTEM ID# 10969	Name
ONE HUNDRED THIR	TY-SEVENTH	COMPUTATION OF SUBSCRIBER GROUP		H	RTY-EIGHTH	RIBER GROUP		9
COMMUNITY/ AREA	<del></del>		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fee
					<u>-</u>			and Syndicated
								Exclusivity
					<u></u>			Surcharge for
								Partially
								Distant
		-			<u> </u>			Stations
					-			
			ļ		<u></u>			
					<u>-</u>			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	Gross Receipts Second Group \$ 0.00			
<b>5.5</b> 55	•		0.00				2.22	
Base Rate Fee First		\$	0.00	Base Rate Fee Secon		\$	0.00	
ONE HUNDRED THE		SUBSCRIBER GROUP	0	ONE HUNDRED  COMMUNITY/ AREA		I SUBSCRIBER GROU	JP <b>0</b>	
OCIVIMONT IT AREA	`			OOMMONT IT AIREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
					<u>-</u>			
					<u></u>			
					<mark></mark>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CoBridge Broad						S	YSTEM ID# 10969	Name
		COMPUTATION OF SUBSCRIBER GROUP		ONE HUNDRED FOR		RIBER GROUP  SUBSCRIBER GROUF	)	•
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
					<u></u>			Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	Gross Receipts Second Group \$ 0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-FOURTH	SUBSCRIBER GROUP	,	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

		TE FEES FOR EACH	BASE RA	COMPUTATION OF	1 001/ 1. /	
TY/ AREA 0	ORTY-SIXTH			017111011	LUCK A: (	В
	ORTH-OIXTH	ONE HUNDRED F	)	SUBSCRIBER GROUP	RTY-FIFTH	
Computation		COMMUNITY/ AREA	0			COMMUNITY/ AREA
GN DSE CALL SIGN DSE of	1	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe	<del></del>					
Syndicated	<del></del>		······································		<u></u>	
Exclusivity	<del></del>				···	
Surcharge						
for					<u> </u>	
Partially	<u></u>				<u></u>	
Distant Stations	<del></del>				<u></u>	
Stations	<del></del>				···	
					<u> </u>	
0.00_		Total DSEs	0.00			Total DSEs
eipts Second Group \$ 0.00	nd Group	Gross Receipts Seco	0.00	\$	iroup	Gross Receipts First G
Fee Second Group \$ 0.00	nd Group	Base Rate Fee Seco	0.00	\$	roup	<b>Base Rate Fee</b> First G
IDRED FORTY-EIGHTH SUBSCRIBER GROUP	RTY-EIGHTH	ONE HUNDRED FO	)	SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FORTY
TY/ AREA 0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
GN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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			-			
	<del></del>				···	
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<u> </u>	<del></del>		-		··	
	<del>"</del>				<u>-</u>	
	<u></u>					
0.00		Total DSEs	0.00			Total DSEs
	h 0			_	<b>3</b>	
eipts Fourth Group \$ 0.00	n Group	Gross Receipts Fourt	0.00	\$	∍roup	Gross Receipts Third (
Fee Fourth Group \$ 0.00	h Group	Base Rate Fee Fourt	0.00	\$	Group	Base Rate Fee Third (

LEGAL NAME OF OWNE						S	YSTEM ID# 10969	Name
Bl	LOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GRO				I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
	·-		······································				····	Syndicated
	·							Exclusivity
								Surcharge
								for
		-						Partially
	<u></u>			-				Distant Stations
		H		·				Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·-							
	·						····	
	·	-						
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	P	·				<u></u>		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER  CoBridge Broadba						SY	STEM ID# 10969	Name
				TE FEES FOR EACH				
ONE HUNDRED FIFT COMMUNITY/ AREA	Y-THIKD	SUBSCRIBER GROU	0	ONE HUNDRED FIFTY COMMUNITY/ AREA	-FOURTH	SUBSCRIBER GROU	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge for
								Partially
							<u> </u>	Distant Stations
Total DSEs	<del>                                     </del>	!	0.00	Total DSEs	-		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FIFT	ΓY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u> </u>	
							<u></u>	
							-	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

						LEGAL NAME OF OWNE CoBridge Broadb
ACH SUBSCRIBER GROUP						
		COMMUNITY/ AREA	0	SUBSCRIBER GROUP		ONE HUNDRED FIFTY COMMUNITY/ AREA
DSE CALL SIGN DSE of		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe						
and Syndicated						
Exclusivity						
Surcharge for						
Partially						
Distant						
Stations					····	
······································			<u> </u>		····	
0.00						Total DSEs
Second Group \$ 0.00	ond Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
Second Group \$ 0.00	ond Group	Base Rate Fee Seco	0.00	\$	Group	<b>Base Rate Fee</b> First G
NDRED SIXTIETH SUBSCRIBER GROUP		i i		SUBSCRIBER GROUI		
REA0	٩	COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			-			
			<u>.                                    </u>	<b>-</b>	····	
					····	
0.00		Total DSEs	0.00			Total DSEs
	rth Group	Gross Receipts Four	0.00	\$	Group	Gross Receipts Third (
	Base Rate Fee Fourth Group \$ 0.00					

	and, LLC						10969	
В				TE FEES FOR EAC			LID	
COMMUNITY/ AREA	- FIK51	SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	<b>0</b>	9
SOMMONT IT AREA				COMMONT IT ARE	^			Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
			<del></del>					Syndicate
	<u></u>		<del></del>		·····	-		Exclusivit Surcharge
	<u>-</u>	<u> </u>	<del></del>		·····	-		for
			<u></u>		····			Partially
								Distant
								Stations
	<mark></mark>		<mark></mark>					
	<u>.</u>							
	<u></u>							
			<del></del>			<del>                                     </del>		
otal DSEs	4	<del>! !</del>	0.00	Total DSEs		-!-!	0.00	
		-				-	•	
ross Receipts First C	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First C	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs	•		0.00	
	2	•			untha Caracca	^	•	
troce Descints Third	oroup	\$	0.00	Gross Receipts Fou	iiii Group	\$	0.00	
Gross Receipts Third								
Gross Receipts Third			l					
Gross Receipts Third	∋roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
ase Rate Fee Third (				Base Rate Fee Fou		\$	0.00	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID# 10969							
				TE FEES FOR EACH				В
9	JP <b>0</b>	SUBSCRIBER GROU	SIXTH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GRO	FIFTH	COMMUNITY/ AREA
Computation				COMMONT IT AREA				COMMONT IT AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
Syndicated	•••••				······································		<u> </u>	
Exclusivity								
Surcharge						 	<mark></mark>	
for Partially		-			·		<del>-</del>	
Distant								
Stations		-					<u></u>	
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	0.00	11		T-4-1 DOE-	0.00			T-4-1 DOE-
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	iroup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G
	JP	SUBSCRIBER GROU	EIGHTH		UP	SUBSCRIBER GRO	SEVENTH	;
				11				
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	COMMUNITY/ AREA  CALL SIGN
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
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		CALL SIGN	DSE			CALL SIGN	DSE	
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		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		CALL SIGN

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID# 10969								Name
BL				TE FEES FOR EACH				
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
		-				-		Syndicated Exclusivity
			-			-		Surcharge
		-						for
								Partially
								Distant
	<b> </b>	-						Stations
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	<b> </b>					H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
El	EVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
<b>Base Rate Fee</b> Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
sroup \$	\$		0.00		h Group	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  10969								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	IRTEENTH			SUBSCRIBER GRO	RTEENTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe						<u> </u>			
and						H			
Syndicated									
Exclusivity Surcharge									
for		-							
Partially	<u> </u>								
Distant									
Stations									
						-			
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G	
	JP	SUBSCRIBER GROU	IXTEENTH	S	UP	SUBSCRIBER GRO	FTEENTH	FII	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSCs	
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C	

0 Computation	SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF	OCK A: (	-
0 Computation DSE of Base Rate Fed and Syndicated Exclusivity Surcharge for Partially		HTEENTH	ll EIG				
Computation  DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially			COMMUNITY/ AREA		SUBSCRIBER GRO	NTEENTH	
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially	CALL SIGN DSE CALL SIGN DSE			0			COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge for Partially				DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially							
Exclusivity Surcharge for Partially							
Surcharge for Partially							
for Partially						··	
Partially	-						
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0.00			Total DSEs	0.00			Total DSEs
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0.00	\$	d Group	Base Rate Fee Secor	0.00	\$	roup	<b>Base Rate Fee</b> First G
DUP	SUBSCRIBER GROU	VENTIETH	T	JP	SUBSCRIBER GRO	NTEENTH	NIN
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00			Total DSEs	0.00			Total DSEs
0.00	¢	Group		0.00	¢	Proup	
0.00	<del>v</del>	Group	Gross Receipts Fourth	0.00	\$	οιυup	Gross Receipts Third G
0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID# 10969								
Bl	OCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
	TY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						<u> </u>		and
								Syndicated
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	. <mark>.</mark>							Surcharge
								for
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	-		···		<u></u>	-		Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWENT	TY-THIRD	SUBSCRIBER GRO	UP	TWENT	Y-FOURTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	·		<del></del>		<del></del>		<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  COBridge Broadband, LLC  SYSTEM ID#  10969							
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe		-				<b></b>		
and						H		
Syndicated		-					<u> </u>	
Exclusivity Surcharge	<u></u>	-					<del>.  </del>	
for	<u> </u>							
Partially								
Distant								
Stations						H		
		-						
		-					<u></u>	
	<u></u>						-	
	0.00		ļ	Total DSEs	0.00		<del>-</del>	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	Y-EIGHTH	TWENT	UP	SUBSCRIBER GRO	SEVENTH	TWENTY-
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		+			•	H	•••••••	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third (

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  COBridge Broadband, LLC  SYSTEM ID#  10969							
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	HIRTIETH			SUBSCRIBER GRO	TY-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated Exclusivity								
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for								
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Stations	<u> </u>							
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>3ase Rate Fee</b> First Gr
	JP	SUBSCRIBER GROU	'-SECOND	THIRT	JP	SUBSCRIBER GRO	TY-FIRST	THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	<u>s</u>	Group	Total DSEs Gross Receipts Third G

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID# 10969								
				TE FEES FOR EACH					
9	IP	SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe		-							
and									
Syndicated		-							
Exclusivity Surcharge		-			<u>.</u>	 	···		
for		-			·		··		
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	IP	SUBSCRIBER GROU	RTY-SIXTH	THIF	UP	SUBSCRIBER GRO	TY-FIFTH	THIR	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

O Computation O BASE Rate Fee	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH	BASE RA			
O Computation O DSE of Base Rate Fee	SUBSCRIBER GROU	Y-FIGHTH					
Computation  OF DSE of Base Rate Fee and					SUBSCRIBER GROU	SEVENTH	
Base Rate Fee			COMMUNITY/ AREA	0			COMMUNITY/ AREA
and	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Syndicated							
Exclusivity		<u> </u>		<u>.</u>			
Surcharge for				<b>.</b>	<b></b>		
Partially	-	<u>.</u>		·			
Distant	-	•					
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0.00			Total DSEs	0.00	-		Total DSEs
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G
R GROUP	SUBSCRIBER GROU	FORTIETH		JP	SUBSCRIBER GROU	ΓΥ-NINTH	THIR
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
SN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00			Total DSEs	0.00			Total DSTa
0.00			Total DSEs	0.00			Total DSEs
0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third C
0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CoBridge Broadband, LLC  SYSTEM ID# 10969								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	'-SECOND			SUBSCRIBER GRO	TY-FIRST		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and		-			<b>.</b>				
Syndicated				•••••					
Exclusivity Surcharge	· <del>-</del>	+			·····	H			
for	····	-			······································				
Partially									
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	0.00		•	Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr	
	IP	SUBSCRIBER GROU	/-FOURTH	FORTY	JP	SUBSCRIBER GRO	TY-THIRD	FOR1	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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		-			·	H	···		
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  COBridge Broadband, LLC  SYSTEM ID#  10969								Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO			RTY-SIXTH	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
						-		Syndicated
					<u> </u>	H		Exclusivity Surcharge
					<u> </u>	-		for
		-						Partially
								Distant
								Stations
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Total DSEs	<del>                                     </del>		0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-S	SEVENTH	SUBSCRIBER GRO	UP		TY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
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Total DSEs	<u>.                                      </u>		0.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	2 T. F	<u>  *</u>	2.00	l sand		<u> </u>	3.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 10969	S						LEGAL NAME OF OWNE CoBridge Broadba
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	FIFTIETH	001414111777777		SUBSCRIBER GRO	TY-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and		-				-		
Syndicated								
Exclusivity Surcharge		-						
for	····	-				<b></b>		
Partially								
Distant								
Stations						-		
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		<b>1</b>						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	IP	SUBSCRIBER GROU	-SECOND	FIFTY	UP	SUBSCRIBER GRO	TY-FIRST	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							<mark>.</mark>	
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		-						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	YSTEM ID# 10969						er of Cabl and, LLC	CoBridge Broadba
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and		-						
Syndicated Exclusivity		-						
Surcharge		-			-			
for								
Partially								
Distant		-						
Stations								
		-						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G
	JP	SUBSCRIBER GROU	TY-SIXTH	FI	UP	SUBSCRIBER GRO	TY-FIFTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	••••							
	0.00			Total DSEs	0.00			Total DSEs
	0.00		Group	Total DSEs  Gross Receipts Fourth	0.00		Group	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C

LEGAL NAME OF OWNE COBridge Broadba						S	10969	Name
				TE FEES FOR EACH				
FIFTY-S	SEVENTH	SUBSCRIBER GRO		FIF	TY-EIGHTH	SUBSCRIBER GROU	UP	۵
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	-					<u> </u>		Base Rate Fee
		-						and
					<del></del>		·····	Syndicated
						-	·····	Exclusivity Surcharge
					···			for
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		-						Distant
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	<b> </b>						<u></u>	
					<mark></mark>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FIFT	Y-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	_		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
							$\overline{}$	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 10969	S'					R OF CABL	CoBridge Broadba
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-SECOND			SUBSCRIBER GRO	TY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and		-			<u> </u>			
Syndicated Exclusivity	<u> </u>	-						
Surcharge		-						
for						-		
Partially								
Distant								
Stations		-						
	·····	-						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00		d 0	Base Bate Fee Coope	0.00			Dana Data Fan First ()
	0.00	\$		Base Rate Fee Secon	0.00	\$		Base Rate Fee First G
		SUBSCRIBER GROU			IJP	SUBSCRIBER GRO		SIX
			I-FOOKIN			OODOONIDEN ONO	I Y-I HIRD	
	0		I-FOOKIN	COMMUNITY/ AREA	0		IY-IHIRD	
		CALL SIGN	DSE			CALL SIGN	DSE	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE		DSE	CALL SIGN	DSE		DSE	CALL SIGN

Name	10969					<u> </u>		LEGAL NAME OF OWNE CoBridge Broadba
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	CTY-SIXTH			SUBSCRIBER GROU		
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated								
Exclusivity Surcharge								
for		-						
Partially		-				-		
Distant								
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	0.00		<u> </u>	Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
						-		
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	Group	Base Rate Fee First G
	•	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU	•	
	•						-SEVENTH	SIXTY-
	JP			SIX	UP		-SEVENTH	SIXTY-
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-: COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	Y-EIGHTH	SIX COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROI	-SEVENTH	SIXTY-I
	DSE	SUBSCRIBER GROU	Y-EIGHTH  DSE	SIX COMMUNITY/ AREA  CALL SIGN	DSE	SUBSCRIBER GROI	-SEVENTH  DSE	SIXTY-: COMMUNITY/ AREA
	DSE  DSE  0.00	SUBSCRIBER GROU	Y-EIGHTH  DSE	CALL SIGN  CALL SIGN  Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	SUBSCRIBER GROI	-SEVENTH  DSE	SIXTY-I

Name	YSTEM ID# 10969							LEGAL NAME OF OWNE CoBridge Broadba
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	VENTIETH	SE		SUBSCRIBER GROU	TY-NINTH	SIX
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated				•••••				
Exclusivity								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	iroup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
	0.00							SEVEN
	0.00			SEVENT	JP			SEVEN
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	COMMUNITY/ AREA
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	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROI	ITY-FIRST	SEVEN COMMUNITY/ AREA  CALL SIGN
	0.00  JP  O  DSE	SUBSCRIBER GROU	DSE	SEVENT COMMUNITY/ AREA  CALL SIGN	JP 0	SUBSCRIBER GROI	DSE	SEVEN COMMUNITY/ AREA

LEGAL NAME OF OWNE CoBridge Broadb						S	YSTEM ID# 10969	Name
В	LOCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
SEVEN	TY-THIRD	SUBSCRIBER GRO	UP	SEVENT	Y-FOURTH	I SUBSCRIBER GRO	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
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					<del></del>			Partially
	<mark></mark>		<mark></mark>		<del></del>		<u></u>	Distant
			<del></del>		<del></del>		<u> </u>	Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Secon		\$	0.00	
	ITY-FIFTH	SUBSCRIBER GRO				I SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

DSE CALL SIGN DSE Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations  Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations  Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	CALL SIGN	TY-EIGHTH	SEVEN COMMUNITY/ AREA CALL SIGN		SUBSCRIBER GRO	SEVENTH	
DSE	CALL SIGN		CALL SIGN	0			COMMUNITY/ AREA
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations  O.00 econd Group  EIGHTIETH SUBSCRIBER GROUP REA  O  Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	CALL SIGN		CALL SIGN				
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and Syndicated Exclusivity Surcharge for Partially Distant Stations  O.00 econd Group \$ 0.00  EIGHTIETH SUBSCRIBER GROUP REA 0	\$						
Syndicated   Exclusivity   Surcharge   for   Partially   Distant   Stations	\$						
Exclusivity   Surcharge   for   Partially   Distant   Stations	\$						
Surcharge   for   Partially   Distant   Stations	\$						
	\$						
Partially Distant Stations	\$						
Distant Stations	\$						
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econd Group \$ 0.00  econd Group \$ 0.00  EIGHTIETH SUBSCRIBER GROUP  REA 0	\$						
econd Group \$ 0.00  econd Group \$ 0.00  EIGHTIETH SUBSCRIBER GROUP  REA 0	\$				<b>H</b>	<u>.</u>	
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econd Group \$ 0.00  econd Group \$ 0.00  EIGHTIETH SUBSCRIBER GROUP  REA 0	\$		T DOE				
econd Group \$ 0.00  EIGHTIETH SUBSCRIBER GROUP  REA 0	\$		Total DSEs	0.00		_	Total DSEs
EIGHTIETH SUBSCRIBER GROUP  REA 0		nd Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gro
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REA0	OLIDOODIDED ODOL			LID	I OLIDOODIDED ODO	T) / NUNITU	OEVENT.
	SUBSCRIBER GROU	EIGHTIETH			SUBSCRIBER GRO	I Y-NIN I H	
			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00			Total DSEs	0.00			Total DSEs
ourth Group \$ 0.00	\$	n Group	Gross Receipts Fourt	0.00	\$	Group	Gross Receipts Third G
ourth Group \$ 0.00		n Group	Base Rate Fee Fourt	0.00	\$	Group	<b>Base Rate Fee</b> Third Gi

LEGAL NAME OF OWNER  CoBridge Broadba						S	YSTEM ID# 10969	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GRO		H	Y-SECOND	SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u> </u>			and
		-						Syndicated
							<u></u>	Exclusivity
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		-				+		Partially
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		-						
					<u>.  </u>			
					<u></u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GRO	UP	EIGHT	Y-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-			<mark></mark>	-		
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						-		
Total DSEs			0.00	Total DSEs			0.00	
			0.00	Total DSEs			0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
Total DSEs Gross Receipts Third G  Base Rate Fee Third G	·	\$			•	\$	-	

	YSTEM ID# 10969	S					R OF CABL	CoBridge Broadba
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	HTY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and							<u>.</u>	
Syndicated							<u>.</u>	
Exclusivity					-		<u>.</u>	
Surcharge for		<b>-</b>				-		
Partially		+						
Distant								
Stations								
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		<u>                                     </u>						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G
	JP	SUBSCRIBER GROU	Y-EIGHTH	EIGH <sup>-</sup>	UP	SUBSCRIBER GRO	SEVENTH	EIGHTY-S
	0				0			COMMUNITY/ AREA
				COMMUNITY/ AREA				
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA  CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
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0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	<b>Base Rate Fee</b> First G
	SUBSCRIBER GROUP	-SECOND	NINETY	JP	SUBSCRIBER GROU	TY-FIRST	NINE
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LEGAL NAME OF OWNE CoBridge Broadba						S	YSTEM ID# 10969	Name
				TE FEES FOR EACH				
	ry-third	SUBSCRIBER GRO			Y-FOURTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs	<del>'</del>		0.00	Total DSEs		Į.	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GRO	UP	İ	ETY-SIXTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
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Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

Name	10969	S						LEGAL NAME OF OWNE COBridge Broadba
				TE FEES FOR EACH				
9	IP	SUBSCRIBER GROU	Y-EIGHTH	NINET		SUBSCRIBER GRO	SEVENTH	NINETY-S
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			Total DSEs	0.00			Total DSEs
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	JP	SUBSCRIBER GROU	NDREDTH	ONE HU	JP	SUBSCRIBER GRO	TY-NINTH	NINET
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LEGAL NAME OF OWNE  CoBridge Broadba						S	YSTEM ID# 10969	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	ED FIRST	SUBSCRIBER GROU			SECOND	SUBSCRIBER GROU	JP	۵
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Fotal DSEs			0.00	Total DSEs	1	Щ	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
<b>3ase Rate Fee</b> First Gi	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	JP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Fotal DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	\$ 0.00	0.00	-		ı Group	\$		

Name	YSTEM ID# 10969	Sì			•			LEGAL NAME OF OWNER  CoBridge Broadba
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (	BL
0	IP	SUBSCRIBER GROU	RED SIXTH	ONE HUNDF	JP	SUBSCRIBER GRO	ED FIFTH	ONE HUNDRE
<b>9</b> Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First Gr
=	ID.	CURCODIRED CROU	D EICHTH	ONE LIUNDRE	ı,	CLIDCODIDED ODO		ONE HUNDRED C
_	0	SUBSCRIBER GROU	DEIGHTH	COMMUNITY/ AREA	0	SUBSCRIBER GRO	SEVENIA	COMMUNITY/ AREA
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	10969	s					R OF CABL	CoBridge Broadba
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (	BI
	UP	SUBSCRIBER GROU	ED TENTH	ONE HUNDR	UP	SUBSCRIBER GRO	D NINTH	ONE HUNDRE
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	UP	SUBSCRIBER GROU	<b>TWELVTH</b>	ONE HUNDRED	UP	SUBSCRIBER GROU	LEVENTH	ONE HUNDRED E
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				TE FEES FOR EACH				
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Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
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<u> </u>	YSTEM ID# 10969							LEGAL NAME OF OWNE CoBridge Broadba
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: 0	Bl
_	1	SUBSCRIBER GROUP	GHTEENTH	ONE HUNDRED E	,	SUBSCRIBER GROUP	ENTEENTH	ONE HUNDRED SEVE
<b>9</b> Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNER  CoBridge Broadba						S	10969	Name
				TE FEES FOR EAC				
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROUP	)	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP	)	0
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ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP	)	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP	)	
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Total DSEs			0.00	Total DSEs			0.00	
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Foul	πn Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

UTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  CRIBER GROUP  ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP							LEGAL NAME OF OWNE CoBridge Broadba
RIBER GROUP ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP	IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL
	SUBSCRIBER GROUP	NTY-SIXTH	ONE HUNDRED TWE		SUBSCRIBER GROUP	ITY-FIFTH	ONE HUNDRED TWEN
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CRIBER GROUP ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN		SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
O COMMUNITY/ AREA O			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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						LEGAL NAME OF OWNE CoBridge Broadba
CH SUBSCRIBER GROUP	SUBSCR	TE FEES FOR EACH				
ED THIRTIETH SUBSCRIBER GROUP	THIRTIETH	ONE HUNDRED		SUBSCRIBER GROUP	TY-NINTH	ONE HUNDRED TWEN
Computation		COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE of		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee						
and						
Syndicated						
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for						
Partially						
Distant	<u>.</u>		ļ		·	
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0.00		Total DSEs	0.00		<del>                                     </del>	Total DSEs
ond Group \$ 0.00	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First Gr
ond Group \$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
RTY-SECOND SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR		SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIS
A0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		Total DSEs	0.00			Total DSEs
0.00						
	Group	Gross Receipts Fourth	0.00	\$	Froup	Gross Receipts Third G

CoBridge Broadba		E SYSTEM:					10969	Name
				ATE FEES FOR EAC	H SUBSCR	RIBER GROUP		
ONE HUNDRED THIR	TY-THIRD	SUBSCRIBER GROUP	<b>D</b>	ONE HUNDRED THII	RTY-FOURTH	SUBSCRIBER GROUI	P	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
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					····			for
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								Distant
								Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
			•	ONE HUNDRED TH	IIRTY-SIXTH	\$ SUBSCRIBER GRO		
ONE HUNDRED THIRT			•		IIRTY-SIXTH			
ONE HUNDRED THIRT			UP	ONE HUNDRED TH	IIRTY-SIXTH		UP	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED THIRT COMMUNITY/ AREA  CALL SIGN	Y-FIFTH	SUBSCRIBER GRO	UP <b>0</b>	ONE HUNDRED TH	IIRTY-SIXTH	I SUBSCRIBER GRO	UP 0	
CALL SIGN  CALL SIGN  Total DSEs	Y-FIFTH  DSE	SUBSCRIBER GRO	DSE	ONE HUNDRED TH COMMUNITY/ AREA  CALL SIGN	DSE	I SUBSCRIBER GRO	DSE	
CALL SIGN  CALL SIGN  Total DSEs  Gross Receipts Third Gr	Y-FIFTH  DSE	CALL SIGN	DSE DSE D.000	CALL SIGN  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE	
CALL SIGN  CALL SIGN  Total DSEs	DSE Outp	CALL SIGN	DSE DSE D.000	CALL SIGN  CALL SIGN  Total DSEs	DSE th Group	CALL SIGN	DSE	

7	YSTEM ID# 10969							LEGAL NAME OF OWNE  CoBridge Broadba
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
_		I SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED THIF	)	SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED THIRTY
<b>9</b> Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated						<b> </b>		
Exclusivity						H		
Surcharge						H		
for					<b> </b>		<u>.</u>	
Partially					ļ			
Distant Stations		-			<b>/</b>		-	
Stations					<del> </del>		<u>-</u>	
					<b> </b>		<u> </u>	
		-						
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_	0.00			Total DSEs	0.00		-	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G
	JP	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED	JP	SUBSCRIBER GRO	ΓY-NINTH	ONE HUNDRED THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
-	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

	YSTEM ID# 10969						R OF CABL	CoBridge Broadba
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
•	1	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED FOR	)	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED FOR
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity								
Surcharge								
for								
Partially								
Distant							·	
Stations							-	
							·	
		-			·		·	
	····							
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	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FOR	)	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR
					0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA				0 0 1 1 1 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 2 7 1 1 1 1
		I CALL SIGN	DSE			CALL SIGN	DSE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
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		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		

LEGAL NAME OF OWNE CoBridge Broadba						S'	YSTEM ID# 10969	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP	1	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP				0
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						<b></b>		Exclusivity
		-				<u> </u>		Surcharge
						-		for
							<u></u>	Partially
	<b> </b>						<u></u>	Distant
								Stations
	<b> </b>					H	<u> </u>	
	<b> </b>					<b></b>	<u></u>	
	<b> </b>					-		
						<u> </u>		
							····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP	1	ONE HUNDRED FOR	TY-EIGHTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA 0				COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	<b> </b>					-	<u> </u>	
Total DSEs	1 1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
<b>Base Rate Fee</b> Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the inter here and in block			criber group	as shown in the boxes a	above.	\$		

Name	YSTEM ID# 10969							LEGAL NAME OF OWNE CoBridge Broadba				
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (	Bl				
0	JP	ONE HUNDRED FIFTIETH SUBSCRIBER GROUP				ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP						
9 Computation	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA				
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
Base Rate Fe												
and												
Syndicated												
Exclusivity												
Surcharge												
for		-			<u>.</u>							
Partially Distant												
Stations	<u></u>				<del> </del>		·					
Giations		-			<b>-</b>		·					
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		1										
	0.00		•	Total DSEs	0.00			Total DSEs				
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G				
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G				
	JP	SUBSCRIBER GROU	'-SECOND	ONE HUNDRED FIFT	UP	SUBSCRIBER GRO	TY-FIRST	ONE HUNDRED FIF				
	COMMUNITY/ AREA 0				0	COMMUNITY/ AREA 0						
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
						_						
						-						
	0.00			Total DSEs	0.00			Total DSEs				
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G				

Name	7STEM ID# 10969	S						LEGAL NAME OF OWNE  CoBridge Broadba					
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (	BL					
9		ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP				1							
Computation	COMMUNITY/ AREA 0							COMMUNITY/ AREA					
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
Base Rate F													
and													
Syndicated Exclusivity													
Surcharge	<u></u>						-						
for													
Partially													
Distant Stations													
Stations													
	<mark></mark>						<u> </u>						
	0.00			Total DSEs	0.00		<del>'</del>	Total DSEs					
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr					
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First Gr					
	Р	SUBSCRIBER GROU	TY-SIXTH	ONE HUNDRED FI	JP	SUBSCRIBER GRO	TY-FIFTH	ONE HUNDRED FIF					
	COMMUNITY/ AREA 0				0	COMMUNITY/ AREA 0							
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
						-							
	<u></u>						<u>.</u>						
							<u> </u>						
	<mark></mark>						1						
	0.00			Total DSEs	0.00			Total DSEs					
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G					

LEGAL NAME OF OWNE CoBridge Broadba						S	YSTEM ID# 10969	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED FIFTY-	SEVENTH	SUBSCRIBER GROUP	·	ONE HUNDRED FIR	TY-EIGHTH	I SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						<b></b>		Exclusivity
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								for
						.		Partially
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	ļ				<b></b>	-		Stations
						H	····	
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						<u> </u>		
Total DSEs	<u> </u>		0.00	Total DSEs	1		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIFT	Y-NINTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	ļ						<u></u>	
	ļ				·	-		
	<b> </b>				·			
	<b> </b>						<u> </u>	
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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
se Rate Fee: Add ther here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CoBridge Broadband, LLC 10969 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CoBridge Broadband, LLC 10969 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group . . . . . . . . . . . . . . . . SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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