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							
	\$						
08/28/2017	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 Period	2017/1			
B Owner	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation  List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting conductions. Check here if this is the system's first filing. If not, enter the system's ID	ss of the cable system on the last day of the counting perion	em the accounting period should s	
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM			
	CABLE ONE, INC.			
				02304720171
				023047 2017/1
	210 E. EARLL DRIVE PHOENIX, AZ 85012-2626			
С	INSTRUCTIONS: In line 1, give any business or trade names used to it names already appear in space B. In line 2, give the mailing address of			
System	1 IDENTIFICATION OF CABLE SYSTEM:	<u></u>	g.,,	
	MAILING ADDRESS OF CABLE SYSTEM:  618 NORTH MAIN  (Number, street, rural route, apartment, or suite number)  ALTUS, OK 73521  (City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the fret comp	ounity served below and rel	iet on nage 1h
Area	with all communities.	only the list confi	numity served below and rei	ist on page 15
Served	CITY OR TOWN	STATE		
First	ALTUS	ок		
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S		
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	Α	1
	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 SASE, PAGE 10.			OVOTEM ID#							
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
CABLE ONE, INC.			023047							
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.										
<b>Note:</b> 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-commuchannel 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 I	a subscriber grou									
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#							
ALTUS	OK			First						
ALTUS AFB	OK			Community						
FREDERICK	OK									
JACKSON COUNTY	OK									
BLAIR	OK									
TIPTON	OK			See instructions for						
				additional information						
				on alphabetization.						
				Add rows as necessary.						
				,						
	-									


Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

023047

# Ε

Service: Subscribers and

Rates

# Secondary Transmission

### 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.

BL	OCK 1		BLOCK 2						
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE		
Residential:									
<ul> <li>Service to first set</li> </ul>	1,991	\$	40.00	HOSPITAL	107	\$	8.00		
<ul> <li>Service to additional set(s)</li> </ul>		ļ		NURSING HOME	93	\$	9.00		
<ul> <li>FM radio (if separate rate)</li> </ul>				ASSISTED LIVING	55	18.	00-19.00		
Motel, hotel				RESIDENTIAL BULK BILL	318	\$	23.00		
Commercial	538	\$	8.00	APARTMENTS	185	34.	00-39.00		
Converter				DORMITORY	80	\$	10.00		
Residential									
Non-residential									
						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.

		BLOCK 2						
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	CATEGOR	RY OF SERVICE	RA	ΤE		
Continuing Services:		Installation: Non-residential						
Pay cable		Motel, hotel	\$	90.00	<b>EXPANDE</b>	D BASIC	\$ 4	40.00
<ul> <li>Pay cable—add'l channel</li> </ul>	\$ 17.00	Commercial						
Fire protection		Pay cable						
Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>						
Installation: Residential		Fire protection						
First set	30.00-90.00	Burglar protection						
<ul> <li>Additional set(s)</li> </ul>	30.00-60.00	Other services:						
• FM radio (if separate rate)		Reconnect	30.0	0-90.00				
Converter		Disconnect						
		Outlet relocation	\$	30.00				
		Move to new address	<b></b>				<u> </u>	
			<b></b>				<u> </u>	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 023047 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) KAUZ-1 22 Ν No **WICHITA FALLS, TX** KAUZ-2 22 No **WICHITA FALLS, TX** See instructions for additional information Ν KFDX 28 No **WICHITA FALLS, TX** on alphabetization. **KJBO-LP** 35 ı No **WICHITA FALLS, TX** 15 **KJTL** ı No **WICHITA FALLS, TX** KOCO 7 Ν Yes OKLAHOMA CITY, OK 0 KSWO-1 11 N-M No LAWTON, OK KSWO-2 11 I-M No LAWTON, OK KSWO-3 11 I-M No LAWTON, OK

FORM SA3E. PAGE 3.						,	
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
CABLE ONE, II					023047		
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 76.69(e)(2) and (4), 76.61(e)(2) and							
explanation of these the Column 6: Give the	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv nnel line-ups,	of the general in the state of the name of the name of the tree of	instructions locate list the community ne community with space G for each	d in the paper SA3 form.  I to which the station is licensed by the which the station is identifed.		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
					ļ		
					ļ		

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN					023047	
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).61(e)(2) and (4).61(e)(2) and (4).61(e)(2) and (4).61(e)(2) and (4).61(e)(2) and (4).61(e)(2						
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	r U.S. stations, e the name of th	list the community ne community with	to which the station is licensed by the which the station is identifed.	
Note: If you are diffizing	ig manipic chai	•	EL LINE-UP	•	onamici into ap.	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION		(If Distant)		
	• • • • • • • • • • • • • • • • • • • •					
	•					
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FORM SA3E. PAGE 3.					ACCOUNTI	NG PERIOD: 2017/1		
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#				Name				
CABLE ONE, IN	IC.				023047	Name		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N						
carried by your cable s FCC rules and regulati	system during the ons in effect or i.61(e)(2) and (	ne accounting 1 June 24, 198 4), or 76.63 (r	period, except 81, permitting th referring to 76.6	(1) stations carrie e carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	<b>G</b> Primary  Transmitters:		
	· •		0 .	carried by your c	able system on a substitute program	Television		
	here in space	G—but do list		e Special Stateme	ent and Program Log)—if the			
List the station here,	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 pages \$\alpha^2\$ form.							
• •		sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify			
			•	•	tion. For example, report multi- n stream separately; for example			
	e. For example	e, WRC is Cha	-		on for broadcasting over-the-air in may be different from the channel			
			ation is a netwo	rk station, an inde	pendent station, or a noncommercial			
	•	,	,. ,		ast), "I" (for independent), "I-M" mmercial educational multicast).			
For the meaning of the	,, ,		,,	•	,			
			•	•	s". If not, enter "No". For an ex-			
planation of local servi					paper SA3 form. Stating the basis on which your			
-			•	•	ering "LAC" if your cable system			
carried the distant stati	•							
					payment because it is the subject stem or an association representing			
the cable system and a	a primary trans	mitter or an as	ssociation repre	senting the primar	y transmitter, enter the designa-			
` '			•	•	her basis, enter "O." For a further			
					d in the paper SA3 form. to which the station is licensed by the			
				•	which the station is identifed.			
Note: If you are utilizing	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AD				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				
					<u></u>			
					<u> </u>			
	<b></b>							
	<u> </u>			<b></b>				
	<u> </u>							

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		STEM:			SYSTEM ID# 023047	Name
PRIMARY TRANSMITTE		)N			023047	
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), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute Dasis 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 noncommerc						
		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.						NG / LMOD. 2017
LEGAL NAME OF OWN		STEM:			SYSTEM ID# 023047	Name
CABLE ONE, IN					023047	
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	G, identify every system during the consistence of 6.61(e)(2) and (esist, as explained of the constant of the	r television stree accounting a June 24, 1974, or 76.63 (rd in the next pespect to any tions, or auth G—but do listitute basis. ce I, if the staterning substitute sign. Do not reast a station accounting a station accounting substitute a station accounting a station accounting substitute accounting substitute accounting substitute accounting substitute accounting accountin	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried tute basis station report origination coording to its ov	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your case Special Statement of both on a substitutions, see page (v) on program services er-the-air designations.	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi-	<b>G</b> Primary  Transmitters:  Television
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		CHANN	EL LINE-UP	AF		
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	
CABLE ONE, IN	IC.				023047		
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 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),							
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Note: If you are utilizing	9		EL LINE-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		
	HOMBER	31,111011		(ii Distairt)			

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
· · · · · · · · · · · · · · · · · · ·					023047	
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific 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 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For	ERS: TELEVISIO G, identify even system during ti ions in effect or 6.61(e)(2) and ( sis, as explaine stations: With r CC rules, regula r here in space only on a subs and also in spa iformation conc rm. th station's call associated with c-2". Simulcast e channel numl se. For example ystem carried the in each case v r entering the le cast), "E" (for n rese terms, see ation is outside ce area, see pe ave entered "Y the distant static ion on a part-ti is ion of a distant the entered into o a primary trans simulcasts, also	y television standard accounting in June 24, 194, or 76.63 (rd d in the next prespect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in a station account in a station. In the local service in a station account in a station account in a station account in a station. In the local service in a station account in a stat	period, except period, except period, except period, except period, except period, permitting the referring to 76.6 paragraph.  I distant stations orizations: I tit in space I (the stion was carried ute basis station period or origination period origination period in the stion is a network), "N-M" (I educational), consider the stion is a network period area, (i.e. "origeneral instructive area, (i.e. "origeneral instructive area, (i.e. "origeneral instructive accounting period p	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further	G Primary Transmitters: Television
Column 6: Give the	e location of ea Canadian statio	ch station. Fo ns, if any, given nel line-ups,	r U.S. stations, e the name of th	list the community ne community with space G for each	d in the paper SA3 form.  to which the station is licensed by the which the station is identifed. channel line-up.	
4 0011	o Digage				C 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	
	NUMBER	STATION	(	(If Distant)		
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	<b>+</b> ······					
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FORM SA3E. PAGE 3.  LEGAL NAME OF OWN	JEB OE CVDIE CV	VSTEM:			SYSTEM ID#	
CABLE ONE, II		YSTEM:			023047	Name
PRIMARY TRANSMITT		ON .				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the consistency of	he accounting n June 24, 19 (4), or 76.63 (red in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
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Note: If you are utilizing	ng multiple char		use a separate  EL LINE-UP	·	channel line-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	

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		STEM:			SYSTEM ID# 023047	Name
PRIMARY TRANSMITTE		DN			020041	
In General: In space C 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 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 cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify every eystem during the consine effect or is 6.61(e)(2) and (6.51s, as explaine is attions: With record or in space only on a substand also in spatformation concern.  In the station's call associated with expression is considered with expression in spatformation concern.  In the station's call associated with expression is call associated with expression is expression in a consideration is outside the consideration is outside the distant static in on a part-tirition of a distant is entered into on a primary transistimulcasts, also are categories, elocation of each canadian station canadian station is outside the consideration of a distant is entered into on a primary transistimulcasts, also are categories.	y television standard accounting in June 24, 194, or 76.63 (rd d in the next prespect to any attions, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the station. In the station account in the local service (v) of the station account in a count in during the same basis becamulticast stream or before Jumitter or an account in the station. In the station in during the same basis becamulticast stream or before Jumitter or an account in the station. For each of the station in the same basis becamulticast stream or before Jumitter or an account in the same basis becamulticast stream or before Jumitter or an account in the same basis becamulticast stream or before Jumitter or an account in the same basis became in	period, except period, except period, except period, except per period, except per period, per	in (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special S	es". If not, enter "No". For an expaper SA3 form.  It stating the basis on which your ering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing the transmitter, enter the designation in the paper SA3 form.  It owhich the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AJ		
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.					Account	14G 1 EMOD. 2017/1
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
CABLE ONE, IN	IC.				023047	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
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, a basis. For further in in the paper SA3 for Column 1: List each 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 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	ystem during the ons in effect or .61(e)(2) and (sis, as explaine stations: With 1 CC rules, regular here in space only on a substand also in spatformation concurre.  In station's call associated with -2". Simulcast etchannel numbers are channel numbers the cast), "E" (for noise terms, see leation is outside the cast), "E" (for noise terms, see leation is outside the distant station on a part-time on on a	ne accounting a June 24, 1984 4), or 76.63 (r d in the next prespect to any titions, or auth G—but do list titute basis. ce I, if the staterning substitute sign. Do not real a station acceptation and station acceptation. The station acceptation are station acceptation. The station acceptation are the FCC has station acceptation. The station acceptation are basis because (v) of the station acceptation and unique the acceptation acceptation and acceptation are basis because and the local server and the local server are basis because and the local server are basis because and the local server are basis because and the local server are server and the local server are basis because and the local server are basis because and the local server are server as a server as a server are server as a server	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station be reported in compart or distant station was carried to the station was carried to the station was carried to the station was assigned to the station is a network at it in Wash at it	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your cast of the carried by on a program services of the television static ington, D.C. This the television	s". If not, enter "No". For an expaper SA3 form. Stating the basis on which your ering "LAC" if your cable system capacity.  payment because it is the subject stem or an association representing y transmitter, enter the designation in the paper SA3 form.  To which the station is licensed by the which the station is identifed.	Primary Transmitters: Television
		CHANN	EL LINE-UP	AK		
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		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				023047	
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 consine and consine as explaine stations: With recording the consideration of the consideration	ne accounting a June 24, 1944), or 76.63 (r d in the next prespect to any litions, or auth G—but do list litute basis. Ince I, if the staterning substite sign. Do not reast a station accepted to the state of the s	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the tition was carried ute basis station eport origination coording to its ov- be reported in our	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program service er-the-air designal column 1 (list each the television statistics).	and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the sute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h. cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and atton "E" (exempt). For explanation of these the Column 6: Give the	e in each case varieties e in each case varieties e terms, see pation is outside ce area, see parave entered "Year e distant statication on a part-tiricion of a distant e entered into on a primary transissimulcasts, also aree categories, e location of ea Canadian statio	whether the st tter "N" (for no concommercial coage (v) of the the local servage (v) of the es" in column on during the a multicast streen or before Ju mitter or an act color enter "E". If a see page (v) ch station. Fo nos, if any, give	etwork), "N-M" ( I educational), of a general instruct vice area, (i.e. "congeneral instruct 4, you must correct outline accounting period period period period period in the second in the se	for network multic or "E-M" (for nonce ctions located in the distant"), enter "Ye ions located in the mplete column 5, so d. Indicate by enterior to a royalty ettween a cable sys- senting the prima channel on any of instructions locate list the community me community with	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the m which the station is identifed.	
		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.					ACCOUNTI	NG PERIOD: 2017/1
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				023047	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C 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, is basis. For further in in the paper SA3 for Column 1: List eac 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 4: If the sta planation of local servin Column 5: If you ha cable system carried th carried the distant stati For the retransmiss	G, identify every eystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With records and also in space only on a substand also in space on the station's call: associated with -2". Simulcast see channel numbers are channel numbers are carried the in each case we entering the least), "E" (for no see terms, seed parts and its on on a part-timion of a distant static on on a part-timion of a distant	r television stane accounting a June 24, 1984, or 76.63 (rd in the next pespect to any tions, or authors, or autho	period, except 31, permitting the seferring to 76.6 paragraph. In distant stations orizations: It it in space I (the station was carried ute basis station cording to its over be reported in compart of the station is a network attion is a network attion is a network of the segmental instruction is a network of the segment of the segmen	(1) stations carried to carriage of certail (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each column 1 (list each column 1). This in the carried column 1 (list each column 1), and the carried column 1 (for noncontext of the carried column 1), and the carried column 1, and th	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject	Primary Transmitters: Television
the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the	a primary transi simulcasts, also ree categories, e location of eac	mitter or an as o enter "E". If y see page (v) ch station. Foi	ssociation repressociation repressou carried the of the general in U.S. stations, I	senting the primar channel on any ot instructions locate list the community	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. v to which the station is licensed by the	
FCC. For Mexican or C <b>Note:</b> If you are utilizin		. ,		•	which the station is identifed.	
Trotor ii you are amizii	g manapio onar	•	•		onamo mo up.	
			EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
5.5.4	NUMBER	STATION	(100 01 110)	(If Distant)		
	•					
		,				

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. 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 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, "I-M" (for network multicast), "" (for independent), "I-M" (for network multicast), "" (for independent), "I-M" (for network multicast), "" (for independent), "I-M" (for onecommercial educational and inducast).  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 l	FORM SA3E. PAGE 3.						NGTEMOD. 2017
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), 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 as swETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example wWETA-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 multicast). "I'm (for independent) "I'm" (for network), "I'm" (for network), "I'm" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in t			STEM:				Name
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 as such as tream separately; for example WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-3 immulcast).  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 multicast). "If" (for noncommercial educational), or "E-M" (for network, multicast),	<u> </u>			n station (including translator stations and low power television stations) titing period, except (1) stations carried only on a part-time basis under 1981, permitting the carriage of certain network programs [sections is (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a ext paragraph.  any distant stations carried by your cable system on a substitute program authorizations: of list it in space I (the Special Statement and Program Log)—if the station was carried both on a substitute basis and also on some other ostitute basis stations, see page (v) of the general instructions located not report origination program services such as HBO, ESPN, etc. Identify according to its over-the-air designation. For example, report multinust be reported in column 1 (list each stream separately; for example of the sassigned to the television station for broadcasting over-the-air in Channel 4 in Washington, D.C. This may be different from the channel or network), "N-M" (for network multicast), "I" (for independent), "I-M" rocal educational), or "E-M" (for noncommercial educational multicast). If the general instructions located in the paper SA3 form.  Service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an exthe general instructions located in the paper SA3 form.  Men 4, you must complete column 5, stating the basis on which your he accounting period. Indicate by entering "LAC" if your cable system or acable system or an association representing in association representing the primary transmitter, enter the designant sociation representing the primary transmitter, enter the designant in structions located in the paper SA3 form.  For U.S. stations, list the community with which the station is licensed by the give the name of the community with which the station is identifed.  NNEL LINE-UP AN  4. DISTANT? (Yes or No)  SYSTEM ION (CARRIAGE)			
	PRIMARY TRANSMITTI 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 Program bas Substitute Basis Subasis under specific FC Do not list the 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 multifor the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried to	ERS: TELEVISION Company to the compa	y television st he accounting h June 24, 19 4), or 76.63 (i d in the next respect to any ations, or auth G—but do lis- titute basis. ace I, if the sta- terning substiff sign. Do not r h a station acc streams must beer the FCC has, WRC is Cha- be, WRC is Cha- be, whether the stater "N" (for no concommercial page (v) of the the local serv- age (v) of the es" in column on during the states.	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station eport origination cording to its over be reported in was as assigned to annel 4 in Wash ation is a network etwork), "N-M" (I educational), core general instructivice area, (i.e. "or general instruct 4, you must con accounting period prosessing to 76.0 per service area, (i.e. "or general instruct 4, you must con accounting period paragraph (i.e. "or general instruct 4, you must con accounting period paragraph (i.e. "or general instruct 4, you must con accounting period paragraph (i.e. "or general instruct 4, you must con accounting period paragraph (i.e. "or general instruct 4, you must con accounting period paragraph (i.e. "or general instruct 4, you must con accounting period paragraph.")	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special Spec	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). the paper SA3 form. sis. If not, enter "No". For an ex- epaper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters:
	FCC. For Mexican or 0	Canadian statio	ns, if any, giv nnel line-ups,	e the name of thuse a separate	ne community with space G for each	which the station is identifed.	
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.		1	CHANN	EL LINE-UP	AN		
FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.	1. CALL	2. B'CAST	3. TYPE			6. LOCATION OF STATION	
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 AN  1. CALL  2. B'CAST  3. TYPE  4. DISTANT?  5. BASIS OF  6. LOCATION OF STATION	SIGN	NUMBER	STATION	(Tes or No)			
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE		***************************************	•	•			
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF  4. DISTANT? (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF  4. DISTANT? (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF  4. DISTANT? (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF  4. DISTANT? (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF  4. DISTANT? (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF  4. DISTANT? (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE		<b>†</b>					
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE		<b>†</b>					
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE							
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 AN  1. CALL SIGN  2. B'CAST CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION CARRIAGE		<b>†</b>					
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 AN  1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL CHANNEL OF (Yes or No) CARRIAGE  6. LOCATION OF STATION		Т	r	r	- 1·- · · · · · · · · · · · · · · · · ·		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023047	
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA well as with the station which your cable is Column 2: Give the its community of licens on which your cable is Column 3: Indicate educational station, by (for independent multifor the meaning of the Column 4: If the st planation of local service Column 5: If you he cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For	ERS: TELEVISIC G, identify even system during the ions in effect or 6.61(e)(2) and ( sis, as explaine Stations: With I CC rules, regula in here in space only on a subs and also in spa information conc orm. ch station's call associated with A-2". Simulcast in each case w in ea	y television standard accounting in June 24, 194, or 76.63 (rd d in the next prespect to any attions, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in a station. In the station account in a station account in a station account in a station. In the station account in a station account in a station account in a station. In the local service in a station account in a statio	period, except period, except period, except period, except period, except period, permitting the referring to 76.6 paragraph.  I distant stations orizations: I tit in space I (the stion was carried ute basis station period ording to its own be reported in the same assigned to period peri	t (1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your one Special Statement of the Special Special Special Special Statement of the Special Specia	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program and Program Log)—if the aute basis and also on some other at the general instructions located as such as HBO, ESPN, etc. Identify attion. For example, report multi- an stream separately; for example and for broadcasting over-the-air in and be different from the channel appendent station, or a noncommercial ast), "I" (for independent), "I-M" ammercial educational multicast). as paper SA3 form. as paper SA3 form. astating the basis on which your attering "LAC" if your cable system capacity. A payment because it is the subject astem or an association representing ary transmitter, enter the designa- acter basis, enter "O." For a further	G Primary Transmitters: Television
explanation of these the Column 6: Give the	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv nnel line-ups,	of the general r U.S. stations, e the name of the	instructions locate list the community he community with space G for each	d in the paper SA3 form.  I to which the station is licensed by the which the station is identifed.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	1C.				023047		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
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 control of the con	he accounting n June 24, 1984), or 76.63 (red in the next prespect to any attons, or auth G—but do list titute basis. ace I, if the stateming substite sign. Do not red a station acceptable when the first present present the first present the firs	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	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 ent and Program Log)—if the tute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television	
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.							
		CHANN	EL LINE-UP	AP			
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.						NG PERIOD: 2017/
LEGAL NAME OF OWN		/STEM:			SYSTEM ID# 023047	Name
PRIMARY TRANSMITTI		NI NI			023047	
In General: In space (carried by your cable s FCC rules and regulat	G, identify ever system during t ions in effect of 5.61(e)(2) and (	y television st he accounting n June 24, 19 4), or 76.63 (i	period, except 81, permitting the referring to 76.6	(1) stations carrie	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	<b>G</b> Primary  Transmitters:
Substitute Basis S	Stations: With	respect to any	distant stations	s carried by your o	able system on a substitute program	Television
<ul> <li>basis under specifc FC</li> <li>Do not list the station station was carried</li> </ul>	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
List the station here,	and also in spa formation cond	ace I, if the sta			tute basis and also on some other f the general instructions located	
Column 1: List eac	ch station's call	•		. •	s such as HBO, ESPN, etc. Identify	
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in	column 1 (list each	tion. For example, report multi- n stream separately; for example	
its community of licens on which your cable sy	se. For example ystem carried th	e, WRC is Chane station.	annel 4 in Wash	nington, D.C. This	ion for broadcasting over-the-air in may be different from the channel	
educational station, by	entering the le	tter "N" (for n	etwork), "N-M" (	for network multic	ependent station, or a noncommercial ast), "I" (for independent), "I-M" ammercial educational multicast).	
For the meaning of the	ese terms, see	page (v) of the	e general instru	ctions located in th	,	
planation of local servi	ice area, see pa	age (v) of the	general instruct	ions located in the	-	
	he distant statio	on during the	accounting perio	od. Indicate by ent	tering "LAC" if your cable system	
For the retransmiss	sion of a distant	multicast stre	eam that is not s	subject to a royalty	y payment because it is the subject stem or an association representing	
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the prima	ry transmitter, enter the designa- ther basis, enter "O." For a further	
explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	in the paper SA3 form.  to which the station is licensed by the	
	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	
Note. II you are utilizii	ig multiple chai		EL LINE-UP	<u> </u>	channer inte-up.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
	<b>†</b>					
	<b>†</b>					
	<u> </u>					

CABLE ONE, INC.  PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) acried 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 75,690(2)) and (1),76 63 (re(E)/2) and (4), or 7 6.63 (referring in 5 76 (16)/2) and (4)), and (2) certain stations carried on a statistic	FORM SA3E. PAGE 3.										
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 76.59(q)(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 and explained in the next paragraph.  **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.  **I ist 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WEC.  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 "Y" (for network). "N-M" (for network multicast), ""(for independent),"—In "(for indep			STEM:					Name			
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, permiting the carriage of certain network programs [sections 76.58(q)(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 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 is a network station, an independent station, or a noncommercial educational multicast). For for hemediation, by entering the letter 'N' (for network), 'N-M' (for network multicast), 'Ti (for independent), 'L-M' (for independent multicast), 'E' (for network), 'N-M' (for network multicast), "To independent), 'L-M' (for independent multicast), 'E' (for	CABLE ONE, IN	IC.				02	23047				
cast 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 e	PRIMARY TRANSMITTE In General: In space of carried by your cable s FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program has substitute Basis FC bo not list the station station was carried a basis. For further in the paper SA3 for Column 1: List each	ers: TELEVISIO G, identify every yestem during the ons in effect on .61(e)(2) and (4 sis, as explained stations: With re CC rules, regulat here in space (6 only on a substite and also in space formation concern. h station's call se	r television stane accounting I June 24, 1984), or 76.63 (r) d in the next pespect to any tions, or author G—but do list itute basis.  ce I, if the stanerning substitutes sign. Do not research.	period, except 81, permitting the eferring to 76.6 paragraph. distant stations orizations: tit in space I (the ation was carried tute basis station eport origination	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a scarried by your carried the Special Statement d both on a substitute, see page (v) of an program services	d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a lable system on a substitute program and Program Log)—if the late basis and also on some other the general instructions located as such as HBO, ESPN, etc. Identify		Primary Transmitters:			
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION (Yes or No) CARRIAGE	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 identifed.										
SIGN CHANNEL OF (Yes or No) CARRIAGE			CHANNI	EL LINE-UP	AR						
	_	CHANNEL	OF		CARRIAGE	6. LOCATION OF STATION					

FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				023047	
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, a basis. For further ini in the paper SA3 for Column 1: List each 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 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th	ers: TELEVISIO  G, identify every ystem during the ons in effect on .61(e)(2) and (4 sis, as explained that it is as explained that it is as explained to .60 rules, regular and also in spate formation concurr.  In station's call shad associated with -2". Simulcast shad explained the in each case when entering the left is explained to see terms, see pation is outside the distant station on a part-time ion of a distant entered into or a primary transmissimulcasts, also ree categories,	r television stane accounting in June 24, 1984), or 76.63 (rd in the next prespect to any titions, or authors, or authors, or authors, or authors, or authors, or authors, it is sign. Do not read a station account of the station account of the station. The station is sign. Do not read a station account of the station. The station is sign. Whether the station. The station is sign (v) of the station account of the local server in column and uning the ame basis because in or before Junitter or an associated in the station of the	period, except aperiod, except a1, permitting the permitting to 76.6 paragraph. It is in space I (the permittion was carried ute basis station are permitted in coording to its over be reported in compart of the permitted in the	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on program services the television statification, D.C. This work station, an indefor network multicute for "E-M" (for noncontrollocated in the special state of the service of the state of t	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your dering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- cher basis, enter "O." For a further ed in the paper SA3 form.	Primary Transmitters: Television
	Canadian statio	ns, if any, give	e the name of th	ne community with	which the station is licensed by the which the station is identifed.	
Note: If you are unitering	g mulupie onan	•	EL LINE-UP		cnannei iine-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		STEM:			SYSTEM ID# 023047	Name
PRIMARY TRANSMITTE		)N			023047	
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bassubstitute program bassubstitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for 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 cable system carried the cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify every eystem during the consine effect or is 6.61(e)(2) and (6.51s, as explaine is attions: With record or in space only on a substand also in spatformation concern.  In the station's call associated with expression is considered with expression in spatformation concern.  In the station's call associated with expression is call associated with expression is expression in a consideration is outside the consideration is outside the distant static in on a part-tirition of a distant is entered into on a primary transistimulcasts, also are categories, elocation of each canadian station canadian station is outside the consideration of a distant is entered into on a primary transistimulcasts, also are categories.	y television standard accounting in June 24, 194, or 76.63 (rd d in the next prespect to any attions, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the station. In the station account in the local service (v) of the station account in a count in during the same basis becamulticast stream or before Jumitter or an account in the station. In the station in during the same basis becamulticast stream or before Jumitter or an account in the station. For each of the station in the same basis becamulticast stream or before Jumitter or an account in the same basis becamulticast stream or before Jumitter or an account in the same basis becamulticast stream or before Jumitter or an account in the same basis became in	period, except period, except period, except period, except per period, except per period, per	in (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special S	es". If not, enter "No". For an expaper SA3 form.  It stating the basis on which your ering "LAC" if your cable system capacity.  It payment because it is the subject stem or an association representing the transmitter, enter the designation in the paper SA3 form.  It owhich the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AT		
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	

CABLE ONE, INC.  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), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system 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 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 is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast)	FORM SA3E. PAGE 3.					NG / LMOD. 2017
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), 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 as sociated 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 multicast). "If (for independent)," "If (for independent)," "I-M" (for network), "N-M" (for network),		ABLE SYSTEM:				Name
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 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). "For the meaning of these terms, see page (v) of the general instructions located in					023047	
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	PRIMARY TRANSMITTERS: TEI In General: In space G, identif carried by your cable system of FCC rules and regulations in e 76.59(d)(2) and (4), 76.61(e)(2 substitute program basis, as e: Substitute Basis Stations basis under specifc FCC rules, Do not list the station here in station was carried only on List the station here, and also basis. For further informatio in the paper SA3 form. Column 1: List each statior each multicast stream associal cast stream as "WETA-2". Sim WETA-simulcast). Column 2: Give the channe its community of license. For e on which your cable system ca Column 3: Indicate in each educational station, by entering (for independent multicast), "E' For the meaning of these terms Column 4: If the station is o planation of local service area, Column 5: If you have ente cable system carried the distar carried the distant station on a For the retransmission of	fy every television is during the accountinuitified on June 24, 19, 29 and (4), or 76.63 ixplained in the next is With respect to an acquired regulations, or autispace G—but do lie a substitute basis. In space I, if the ston concerning substitute during the ston concerning substitute with a station acquired streams must be acquired the station. In case whether the seguence of the station of the station of the station of the station of the station. In case whether the seguence of the station during the part-time basis become of the station during the distant multicast streams.	g period, except 981, permitting the (referring to 76.6 paragraph. y distant stations horizations: station was carried itute basis station report origination coording to its own to be reported in the sassigned to hannel 4 in Wash station is a network), "N-M" (all educational), cone general instruction 4, you must con accounting periods and to the same that is not seem that is n	t (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your come Special Statement of the Special	and low power television stations) Id only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The paper SA3 form. The paper SA3 form. The paper SA3 form is stating the basis on which your tering "LAC" if your cable system to papacity. The paper same is to the subject	G Primary Transmitters:
	Note: If you are utilizing multip	•		<u>'</u>	channel line-up.	
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.						
CHANNEL LINE-UP AU				5. BASIS OF	6. LOCATION OF STATION	
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CHANNEL LINE-UP AU  1. CALL 2. B'CAST CHANNEL OF 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CARRIAGE						
CHANNEL LINE-UP AU  1. CALL 2. B'CAST CHANNEL OF 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CARRIAGE						
1. CALL SIGN CHANNEL OF STATION (Yes or No) CARRIAGE  CHANNEL LINE-UP AU  4. DISTANT? 5. BASIS OF CARRIAGE  6. LOCATION OF STATION  CHANNEL CHANNEL OF CARRIAGE				<u> </u>		
1. CALL SIGN CHANNEL OF STATION (Yes or No) CARRIAGE  CHANNEL LINE-UP AU  4. DISTANT? 5. BASIS OF CARRIAGE  6. LOCATION OF STATION  CHANNEL CHANNEL OF CARRIAGE				······································		
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CHANNEL LINE-UP AU  1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE						

FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023047	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space (carried by your cable services FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program bases Substitute Basis Services basis under specific FC Do 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 synchology (for independent multiffer the meaning of the Column 4: If the st planation of local services column 5: If you heable system carried the distant station to substitute of the distant station of local services in the di	G, identify even by stem during the consistency of	y television strane accounting in June 24, 194, or 76.63 (rd din the next prespect to any attions, or auth G—but do list titute basis. Ince I, if the state arning substitute sign. Do not rear a station acceptation of the station acceptation. The station acceptation is a station acceptation of the station acceptation of the station acceptation. The station acceptation is a station acceptation of the station acceptation of the station acceptation of the station acceptation of the station acceptation acceptation of the station acceptation acce	period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in common as assigned to annel 4 in Wash attion is a network etwork), "N-M" (I educational), of eigeneral instructive area, (i.e. "Gegeneral instructive area, (i.e. "Gegeneral instructive area of lack of a general fack of a general instructive area.	(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 seco	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
For the retransmiss	ion of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject	
-				•	stem or an association representing ry transmitter, enter the designa-	
` '			•	•	her basis, enter "O." For a further d in the paper SA3 form.	
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	
<b>Note:</b> If you are utilizing				•	which the station is identifed. 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	o. Looming of Similar	
	NUMBER	STATION		(If Distant)		
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FORM SA3E. PAGE 3.						NG / LMOD. 2017
LEGAL NAME OF OWN		STEM:			SYSTEM ID# 023047	Name
CABLE ONE, IN					023047	
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 for Column 1: List eac each multicast stream	G, identify every system during the consistence of 6.61(e)(2) and (esist, as explained of the constant of the	r television stree accounting a June 24, 1974, or 76.63 (rd in the next pespect to any tions, or auth G—but do listitute basis. ce I, if the staterning substitute sign. Do not reast a station accounting a station accounting substitute a station accounting a station accounting substitute accounting substitute accounting substitute accounting substitute accounting accountin	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: t it in space I (the ation was carried tute basis station report origination coording to its ov	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a s carried by your case s es special Statement d both on a substitutions, see page (v) or in program services er-the-air designat	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi-	<b>G</b> Primary  Transmitters:  Television
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 4: If the staplanation of local servic Column 5: If you ha cable system carried the carried the distant stating For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the	e channel number. For example system carried the in each case verentering the lecast), "E" (for not exe terms, see pation is outside ce area, see parave entered "Year edistant station of a distant centered into or a primary transmissimulcasts, also aree categories, e location of each canadian statio	per the FCC he, WRC is Chape station. Whether the station whether the stater "N" (for no commercial page (v) of the the local servinge (v) of the es" in column on during the same basis becamulticast street or before Jumitter or an action of the estation. For the see page (v) ons, if any, givennel line-ups,	as assigned to annel 4 in Wash ration is a network, "N-M" (I educational), ce general instructive area, (i.e. "cgeneral instructive area (i.e. "caccounting perioduse of lack of a sam that is not some 30, 2009, be association repreyou carried the lof the general of the general of the general of the same of the use a separate	the television stati- tington, D.C. This in ork station, an inde- for network multica- or "E-M" (for nonco- ctions located in the distant"), enter "Ye- tions located in the mplete column 5, so d. Indicate by enta- tictivated channel of subject to a royalty etween a cable sys- senting the primar channel on any ot- instructions locate list the community me community with space G for each	paper SA3 form. stating the basis on which your sering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing the basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AW		
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	

ACCOUNTING PERIOD: 2017/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 023047 CABLE ONE. INC. 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). LOCATION OF STATION CALL SIGN AM or FM CALL SIGN AM or FM S/D LOCATION OF STATION **KEYB** FΜ ALTUS, OK

SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG  In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program special statements.	FORM SA3E. PAGE 5.								6 PERIOD: 2017
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG  In General: In space I, Identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  2. During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.  2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "1 Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station is 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 licentified).  Column 5: Give the month and day when your system carried by substitute program. Use numerals, with the month first. Example: for May 7 give "57."  Column 6: State the t		CABLE SYST	ГЕМ:						Namo
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Note: If you ranswer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.  2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions located in the paper SA3 form for futher informention. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast 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 to which the station is identified).  Column 6: Give the month and day when your system carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30	CABLE ONE, INC.							023047	
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SUBSTITUTE PROGRAM  1. TITLE OF PROGRAM  2. LIVE? 3. STATION'S  2. LIVE? 3. STATION'S  5. MONTH 6. TIMES  DELETION	In General: List each substiclear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broat the case of Mexican or Can Column 5: Give the mor first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a gram was substituted for pr	titute progra ace, please a of every nor distant stati gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static addian st	am on a separa attach additionannetwork televion and that your authorization it use general of the separation of the separation of the separation of the station broadca on's location (the separation of the sepa	al pages. ision program (substitute pour cable system substitute pour cable system substitute pour cable system substitute pour categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the community with which the stem carried the substitute purposed by a system from 6:01:10 was substituted for programing the accounting period	rogram) that, d for the progeral instruction "basketball".  lo." m. station is lice station is ider program. Use cable system. 15 p.m. to 6:2 mming that y; enter the let	during the gramming or ons located List specificansed by the otified).  List the tin 18:30 p.m. second system of the course of t	accounting another stat in the paper ic program  FCC or, in with the mon nes accuratel hould be was required	ion th y	
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETION								7. REASON	
YESOFNO CALL SIGN 4. STATIONS LOCATION AND DAY FROM — 10		2. LIVE?	3. STATION'S		5. MONTH	6.	TIMES		
		Yes or No	CALL SIGN	4. STATION S LOCATION	AND DAY	FROM	_ 10		
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ACCOUNTING PERIOD: 2017/1 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

023047

# J

## Part-Time Carriage Log

## PART-TIME CARRIAGE LOG

**In General:** This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time 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 column 5 of space G.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred 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."

		DAT	TES	AND HOURS (	OF PA	RT-TIME CAR	RIAGE		
CALL SIGN -	WHEN CARRIAGE OCCURRED HOURS					CALL SIGN	WHEN	I CARRIAGE OC	
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	AL NAME OF OWNER OF CABLE SYSTEM:  BLE ONE, INC.		SYSTEM ID# 023047	Mama						
GR Inst all a (as pag	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.									
COPY Instru • Cor • Cor • If you fee • If you	PORTANT: You must complete a statement in space P concerning gross receipts.  PRIGHT ROYALTY FEE Inctions: Use the blocks in this space L to determine the royalty fee you owe: Inplete block 1, showing your minimum fee. Inplete block 2, showing whether your system carried any distant television stations. Our system did not carry any distant television stations, leave block 3 blank. Enter the air from block 1 on line 1 of block 4, and calculate the total royalty fee. Our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.	mount of th		L Copyright Royalty Fee						
<ul> <li>If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.</li> <li>If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below.</li> <li>If part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line 2 in block 4 below.</li> </ul>										
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at									
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and complete the DSE schedule.	nn 4, you i od?	must check							
Block 3	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	\$	1,451.65							
	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		5,116.25							
	Line 3. Add lines 1 and 2 and enter here	\$	6,567.90	<u> </u>						
Block 4	<ul> <li>Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: 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</li> <li>Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: 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 zero.</li> <li>Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9</li> </ul>	<u>\$</u>	6,567.90	Cable systems submitting additional deposits under Section 111(d)(7)						
	(Interest Worksheet)	\$	725.00	should contact the Licensing 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	\$ See page	<b>7,292.90</b> (i) of the	form for submitting the additional fees.						

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#										
Hame	CABLE ONE, INC.	023047										
	CHANNELS											
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcas	t stations										
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.											
	Enter the total number of channels on which the cable	9										
	system carried television broadcast stations											
	Enter the total number of activated channels											
	on which the cable system carried television broadcast stations	269										
	and nonbroadcast services											
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)  Name EMERSON YEARWOOD Telephone	602 364 6495										
Information												
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)											
	PHOENIX, AZ 85012-2626 (City, town, state, zip)											
		2010										
	Email emerson.yearwood@cableone.biz Fax (optional) 602-364-	6013										
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office re-	gulations										
0	SERVIN ION (This statement of account must be certified and signed in accordance with copyright office re-	guiations.										
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	e B: or										
	(Carrier care a later corporation of parameters) is an are care cyclem as actuated in line 1 or open	0.2, 01										
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable	e 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 c in line 1 of space B.	wner of the cable system										
		and harain										
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contain are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> </ul>	led Herein										
	[18 U.S.C., Section 1001(1986)]											
	/s/ Raymond Storck											
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.											
	(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your curso "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotu	·										
	Typed or printed name: RAYMOND STORCK											
	Types of planted name. Tax i morto of ottors											
	Title: VICE PRESIDENT											
	(Title of official position held in corporation or partnership)											
	Dato: August 25, 2017											
	Date: August 25, 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

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  923047	Name
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 adding the following sentence:	Р
"In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.  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
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	
(interest charge)	
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistance please 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 Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served	
Accounting period  ID number	

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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:

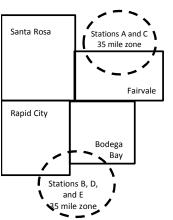
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 CABLE SYSTEM:  CABLE ONE, INC.  SUM OF DSEs OF CATEGORY "O" STATIONS:  SYSTEM ID#  023047					
1						
	Add the DSEs of each station.  Enter the sum here and in line 1 of part 5 of this schedule.				0.25	
2	Instructions:					
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).					
Computation	In the column headed "DSE	:": for each indepe	endent station, give the DSI	as "1.0"; for	each network or noncom-	
of DSEs for	mercial educational station, give the DSE as ".25."					
Category "O"	CATEGORY "O" STATIONS: DSEs					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	KOCO	0.250				
Add rows as						
necessary.						<u> </u>
Remember to copy						
all formula into new						
rows.						 
		<u></u>				<u> </u>
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Name	CABLE ONE	OWNER OF CABLE SYSTEM:					S	YSTEM ID# 023047				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station.  Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.											
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSEs						
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAC VALUE	F 5. TYPE		iΕ				
			÷		=	x	=					
			······································		=	x x						
						x						
			÷	:	=	x	=					
			÷ ÷		=	x x	=					
	Add the DSEs	s OF CATEGORY LAC S of each station. Im here and in line 2 of pa		nedule,	▶	0.00	]					
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferons in efferons by the Broadcast of space I).     Column 2: at your option.     Column 3: Column 4:	e the call sign of each start of the call sign of each start on October 19, 1976 (one or more live, nonnetwork). This figure should correst carter the number of days Divide the figure in column this is the station's DSE	itution for a pro as shown by the ork programs do number of live spond with the is in the calenda in 2 by the figu (For more infor	ogram that your system le letter "P" in column uring that optional carres, nonnetwork program information in space I ar year: 365, except in re in column 3, and girmation on rounding, s	was permitted 7 of space I); an lage (as shown by s carried in substance I); an leap year. We the result in cee page (viii) of	to delete under FCC rule id y the word "Yes" in column stitution for programs that column 4. Round to no let the general instructions i	2 of t were deleted es than the third	m).				
				BASIS STATION								
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	'S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE				
		÷		=			÷ -	=				
		:		=			<b>+</b>	=				
		÷		=			÷	=				
		÷		=			<del>-</del>	=				
	Add the DSEs	of SUBSTITUTE-BASI of each station. Im here and in line 3 of page				0.00		_				
<b>5</b> Total Number of DSEs	number of DSE: 1. Number o 2. Number o	ER OF DSEs: Give the am s applicable to your system f DSEs from part 2 • f DSEs from part 3 • f DSEs from part 4 •		boxes in parts 2, 3, and	4 of this schedu	le and add them to provide	0.25 0.00 0.00	0.25				
	I O I AL INUIVIDE	01 0020					<u> </u>	0.20				

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

LEGAL NAME OF CABLE ONE,	OWNER OF CABLE	SYSTEM:					S'	YSTEM ID# 023047	Name
In block A: • If your answer i schedule.	ock A must be com f "Yes," leave the r f "No," complete bl	· emainder of p ocks B and C	below.			nd complete pa	art 8, (page 16) of	the	6
				TELEVISION M.					Computation of 3.75 Fee
effect on June 24  X Yes—Cor	em located wholly of the same same same same same same same sam	schedule—[	•					gulations in	
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations and regulations	ons prior to Ju dule. (Note: Ti	part 2, 3, and 4 of ne 25, 1981. For fu he letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC n A Stations carri 76.61(b)(c)] B Specialty stat C Noncomeric D Grandfathere instructions fe E Carried pursu *F A station pre	ules and reguled pursuant to as defined call education (76. or DSE sched ant to individuationally carries (JHF station was desired pursuant to station was destinated pursuant to station was desired pursuant to station was	lations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag lule). ual waiver of F ed on a part-tir vithin grade-B	ne or substitute ba contour, [76.59(d)(	ose in effect of 6.57, 76.59(b)  (e)(1), 76.63(a) (e)(3) (e)(3) (e)(4) (	n June 24, 198 a), 76.61(b)(c), b) referring to 7 g to 76.61(d) grandfathered s une 25, 198	76.63(a) referring		
Column 3:		e stations ide	ntified 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	
		<u> </u>	1					0.00	
			I OOK O. OO	MOLITATION OF					
Line 1: Enter th	e total number of			MPUTATION OF schedule	F 3./3 FEE				
Line 2: Enter th	e sum of permitte	ed DSEs froi	n block B ab	ove					
	t line 2 from line fleave lines 4–7 b			•		rate.			
Line 4: Enter gr	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply	line 4 by 0.0375	and enter sı	ım here						partially permited/ partially
Line 6: Enter to	tal number of DS	Es from line	3				,		nonpermitted carriage? If yes, see part 9 instructions.
Line 7: Multiply	line 6 by line 5 a	nd enter her	e and on line	2, block 3, spac	e L (page 7)	)		0.00	o mon detions.

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047									
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			_
1. CALL SIGN	2. PERMITTED BASIS	3. DSE		2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation o
									3.731 ee
								•••••	
		l							
		•						••••••	
		l							
					•••••			•••••	
		l							
								•••••	
								•••••	

Name	CABLE ONE, IN		SYSTEM:						S	YSTEM ID# 023047			
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 identifed 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, sections 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 designated statement of account on fle in the Licensing Division.												
		PERMITTE	ED DSE FOR STA	ATIONS CARRI	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS					
	1. CALL SIGN	2. PRIC		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE			
										•••••			
									••••••				
7 Computation of the		"Yes," comple	ete blocks B and C ocks B and C blar	k and complete		art 8 of the DSE sched							
Syndicated			BLOC	K A: MAJOR	TE	ELEVISION MARK	<u>ET</u>						
Exclusivity Surcharge	• Is any portion of the	cable svstem w	rithin a top 100 mai	or television ma	rket	t as defned by section 7	6.5 of FCC	rules in effect J	une 24.	1981?			
3 · · · · · · · · · · · · · · · · · · ·	Yes—Complete	•				X No—Proceed to							
					1								
		<del>-</del>	Grade B Contour					utation of Exem					
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p						
	Yes—List each s  X No—Enter zero a		h its appropriate per part 8.	mitted DSE		Yes—List each st  X No—Enter zero a			ate permi	itted DSE			
	0411 01011	D05	0411 01011	DOE	1	0411 01011	DOE	0.411.010		DOE			
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	DIN	DSE			
			TOTAL DOS	0.00				TOTAL 5	`F-	0.00			
			TOTAL DSEs	0.00				TOTAL DS	⊳ES	0.00			

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.	SYSTEM ID# 023047	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	545,733.00	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 Exclusivity
	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	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned 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?      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 3b blank. NOTE: If the Dis 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	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		
	CECTION ALOECOND TO TELEVICION MADVET	1	
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your 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 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 Dis 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.		

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#									
	•	CABLE ONE, INC.	023047									
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	You m 6 was In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5.  bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  but answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B because a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers becated within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.	elow									
		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)	.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.).	). <u>25</u>									
	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)										

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

EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.	SYSTEM ID# 023047	Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4		8
A. Enter 0.01064 of gross receipts  (the amount in section 1) ▶\$		U
(the amount in section 1) <b></b>		
B. Enter 0.00701 of gross receipts		Computatio
(the amount in section 1) \$		of Base Rate Fe
C. Multiply line B by 3.000 and enter here <b>\$</b>		Duod Hato I
D. Enter 0.00330 of gross receipts		
(the amount in section 1) <b>&gt;</b> \$		
E. Subtract 4.000 from total DSEs		
(the figure in section 2) and enter here		
F. Multiply line D by line E and enter here <b>\$</b>		
G. Add lines A, C, and F. This is your base rate fee.		
Enter here and in block 3, line 1, space L (page 7)		
Base Rate Fee	0.00	
MPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television bro	adcast signals shall	
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chapter Grace G.	•	9
<b>n General:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rat	e fee, to exclude	Computation
eceipts from subscribers located within the station's local service area, from your system's total gross receipts. To ta		of
xclusion, you must:		Base Rate F
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are districted by the same group of stations. Next Treat each subscriber groups as if it were a consisting entirely of subscribers that are districted by the same groups of stations. Next Treat each subscriber groups as if it were a consisting entirely of subscribers that are districted by the same groups of stations.		and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Deterr DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fe		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system		Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exemp		Partially
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and f your cable system is wholly located outside all major television markets, complete block A only.	B below. However,	Distant Stations, ar
How to Identify a Subscriber Group for Partially Distant Stations		for Partially
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant	t station you	Permitted
parried to that community.	•	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers we outside the station's local service area. A subscriber located outside the local service area of a station is distant to the he same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are dist	tant. Each	
subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No system will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your groups.	r system's subscriber	
n each section:		
Identify the communities/areas represented by each subscriber group.		
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant subscribers in the group.	to all of the	
If:		
I) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gavand 4 of this schedule; or,	e it in parts 2, 3,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it part 6 of this schedule.	t in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
<ul> <li>Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gene in the paper SA3 form.</li> </ul>	eral instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not	p (that is, the total	

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 023047 CABLE ONE, INC. 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 OWNE CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023047	Name
В		COMPUTATION OF		TE FEES FOR EAC		IBER GROUP  SUBSCRIBER GRO	UD	
COMMUNITY/ AREA	FIRST	SUBSCRIBER GROU	0	COMMUNITY/ ARE	UP <b>0</b>	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
		-				-		and
								Syndicated Exclusivity
								Surcharge
			<b>-</b>					for
			<b></b>			<del>-                                     </del>		Partially Distant
		-						Stations
		-	<b></b>					
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 545	,733.00	Gross Receipts Sec	ond Group	\$	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<b></b>					
			<b>†</b>	-	••••	<u> </u>		
			<b></b>	-				
				.		<del>-    </del>		
			<b>-</b>	.				
			<b></b>					
	<b>.</b>		<u> </u>					
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$	0.00	

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name		
				ATE FEES FOR EAC						
		SUBSCRIBER GRO	JP <b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP <b>0</b>	9		
COMMUNITY/ AREA			U	COMMUNITY AREA	OOMMONTH AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee		
	<u></u>				····			and Syndicated		
					····			Exclusivity		
								Surcharge		
								for Partially		
								Distant		
								Stations		
					····					
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	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
		SUBSCRIBER GRO				SUBSCRIBER GROU	UP			
COMMUNITY/ AREA	<i>\</i>		0	COMMUNITY/ AREA						
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 Four	th Group	\$	0.00			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047								
	BLOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP			
		SUBSCRIBER GROU				SUBSCRIBER GROU		9	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	١		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
0,122 0.0.1	302	07.LL 0.0.1	202	07.122.01011	302	0/122 0.0.1	302	Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
					····		·····	Surcharge for	
		-			·····			Partially	
								Distant	
								Stations	
	·····				<mark>.</mark>				
	·····								
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00		
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
	EI EVENTU	SUBSCRIBER GROU	ID		T\\/EL\/TL	I SUBSCRIBER GRO	ID		
COMMUNITY/ AREA		SOBSCRIBER GROU	0	COMMUNITY/ AREA		I SOBSCITIBLIN GIVO	0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					·····		<u> </u>		
					<mark>.</mark>				
					····				
		-							
	·····				<mark>.</mark>				
					····				
					•••••••••••••••••••••••••••••••••••••••				
Total DSEs	<u>.</u>		0.00	Total DSEs		-	0.00		
Gross Receipts Third	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		
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$			

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EAC				
THI COMMUNITY/ AREA	RTEENTH	SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP <b>0</b>	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
			<u></u>			-		for Partially
	···		<del>.  </del>					Distant
	···		<u>-</u>			-		Stations
			<u> </u>					
			<u>-</u>			1		
Total DSEs			0.00	Total DSEs		Į.I.	0.00	
Gross Receipts First C	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	
	IFTEENTH	SUBSCRIBER GRO		<b> </b>		SUBSCRIBER GRO	UP	
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>				<u></u>	
	···	-	<u></u>			-		
	···	-	<u>-</u>		····	-		
			<u> </u>		·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Groun	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
2.350 Nosoipto Tima		<u> </u>			С. Зир	*	3.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
D D 4 5 4 4 1 1	L - L		and a					
Base Rate Fee: Add t Enter here and in bloc			criber group	as snown in the boxe	s above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047									
				TE FEES FOR EAC						
		SUBSCRIBER GRO		ii e		SUBSCRIBER GRO		9		
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee		
								and		
								Syndicated		
				-		-		Exclusivity Surcharge		
						•		for		
								Partially		
								Distant		
					·····			Stations		
								I		
						•		I		
								I		
Total DSEs			0.00	Total DSEs			0.00	I		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
	NINTEENTH	SUBSCRIBER GRO	UP	-	TWENTIETH	SUBSCRIBER GRO	UP			
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
				-		-		I		
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								I		
					····			I		
			·		····			I		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	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			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$				

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
					<u></u>			Syndicated Exclusivity
								Surcharge
								for
					<u></u>			Partially Distant
					<u></u>			Stations
		-						
						-	····	
Total DSEs			0.00	Total DSEs		· ·	0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	•	\$	0.00	Base Rate Fee Seco		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GROU	<del>ار</del> عر	COMMUNITY/ AREA		SUBSCRIBER GROU	<b>0</b>	
COMMONT IT AIRE	<u> </u>			COMMONT IT AREA				
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 Thire	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.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ ARE			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u></u>					and
			<u>.</u>					Syndicated Exclusivity
			<b>-</b>		····		••••	Surcharge
								for
		-						Partially
		-	<u></u>					Distant Stations
						•		Stations
			<u>.</u>					
			<u></u>					
Total DSEs	ļļ	!	0.00	Total DSEs		!!	0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
·	·							
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			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>		····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	rd Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in bl			criber group	as shown in the boxes	above.	\$		
	,,					·		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
	<u></u>		····					Syndicated Exclusivity
				-				Surcharge
								for
								Partially
		_						Distant Stations
	·····		····					Stations
			<u></u>					
T-+-I DOE-			0.00	T-t-I DOF-			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	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		II		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
							<del></del>	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU		III		I 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
		-						Stations
	····				····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	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	
TH	IRTY-FIFTH	SUBSCRIBER GROU	JP	THI	RTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			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	I Group	•	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Gross Neceibis Hill	ι Οισαμ	\$	3.00	Orosa Necelpia Fourti	ιι Οιυαρ	Ψ	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		it .		I 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
					<mark></mark>			Syndicated Exclusivity
					••••			Surcharge
								for
								Partially
								Distant Stations
								Stations
					<mark>.</mark>			
Total DSEs	<u> </u>		0.00	Total DSEs		11	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Gross Receipts First	Gloup	4	0.00	Gloss Neceipts Seco	ла Стоир	<del>-</del>	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
THI	RTY-NINTH	SUBSCRIBER GRO	JP		FORTIETH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				1				
		-						
					<mark></mark>			
	····				····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	023047	Name
		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	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 Stations
								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 GRO		İ		SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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	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	
	Эгоар	ΙΨ	0.00	Just Nate i ee i ou	.ai Gioup	<del> </del>	0.00	
Base Rate Fee: Add	the <b>base ra</b>	te fees for each subs	scriber group	as shown in the boxe	s above.			
Enter here and in bloo						\$		

CABLE ONE, INC.		E SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
	RTY-FIFTH	SUBSCRIBER GROU		III	RTY-SIXTH	I 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
	<u></u>							Syndicated Exclusivity
	<u></u>							Surcharge
								for
								Partially
	<u> </u>	-						Distant Stations
	··							Stations
	<mark></mark>							
	<u> </u>							
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First G	iroun	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Croos resorpts river s	лоцр			Cross resolpte essen	ia Group			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU		II	ΓΥ-EIGHTH	I SUBSCRIBER GROU		
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>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third C	Group	s	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				П				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	9
COMMUNITY AREA	Α		U	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	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
		SUBSCRIBER GRO		III		SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-					
				-		-		
					····			
Total DSEs			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	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP
FIFTY-THIRD SUBSCRIBER GROUP  O COMMUNITY/ AREA  O COMMUNITY/ AREA
AREA 0 COMMUNITY/ AREA 0 COmputat
DSE CALL SIGN DSE CALL SIGN DSE OF
Base Rate
and Survived
Syndicat  Exclusive
Surchan
for
Partiall Partiall
Distan Station
······································
0.00 Total DSEs 0.00
First Group \$ 0.00 Gross Receipts Second Group \$ 0.00
This Gloup Gloss Necelpts Second Gloup Gloup
First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00
FIFTY-FIFTH SUBSCRIBER GROUP FIFTY-SIXTH SUBSCRIBER GROUP
AREA 0 COMMUNITY/ AREA 0
DSE CALL SIGN DSE CALL SIGN DSE
······································
Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EAC				
		SUBSCRIBER GROU		it .		I SUBSCRIBER GROU		9
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<mark></mark>			Syndicated Exclusivity
	•••••				••••			Surcharge
								for
								Partially
		-						Distant Stations
								Stations
								I
					<mark>.</mark>			
					····			
Total DSEs		Į.	0.00	Total DSEs		<u>!!</u>	0.00	
Gross Receipts First	Group	<b>\$</b>	0.00	Gross Receipts Seco	and Group	\$	0.00	
Gross recorpts i not	Стоир		0.00	Cross receipts ecoc	ла стоар		0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GROU				SUBSCRIBER GROU	UP	
COMMUNITY/ AREA	A		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 Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN		E SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
SI COMMUNITY/ AREA		SUBSCRIBER GROU	JP <b>0</b>	SIXT		SUBSCRIBER GROU	JP <b>0</b>	9
COMMUNITY/ AREA				COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>				<mark></mark>			and Syndicated
	····				<del></del>			Exclusivity
								Surcharge
	<u></u>				<u></u>			for
	····				<del></del>			Partially Distant
								Stations
					<u></u>			
	<u></u>	-			<u></u>			
				·	<del></del>			
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 Second	nd Group	\$	0.00	
SIX	XTY-THIRD	SUBSCRIBER GROU	JP	SIXT	Y-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····	-						
				-				
	<u></u>				<u></u>			
	<del></del>				<del></del>			
	····			-	<del></del>			
	<u></u>							
Total DSEs			0.00	Total DSEs		П	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
							<del>_</del>	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EACH				
	(TY-FIFTH	SUBSCRIBER GROU		11	XTY-SIXTH	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
					<u> </u>			Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs	-		0.00	Total DSEs		11	0.00	
Gross Receipts First G	Froun	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Groot Rescipto Filor C	лоцр			Cross rescripto escol	ia Group	<u>*</u>		
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU		ii -	ΓY-EIGHTԻ	SUBSCRIBER GROU	JP -	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···				······································			
					<u> </u>			
	···							
	<del></del>							
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
		1			· 			
Base Rate Fee: Add to Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
Е	BLOCK A: (	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	(TY-NINTH	SUBSCRIBER GRO		11		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
								and
			<u> </u>					Syndicated
	····		<u> </u>					Exclusivity Surcharge
	····	-	<del></del>		·····			for
		-	<u></u>					Partially
								Distant
			<u> </u>					Stations
			<u> </u>					
	····		<del></del>		·····			
	···		<u>-</u>		••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVE	NTY-FIRST	SUBSCRIBER GRO	UP	SEVEN <sup>-</sup>	TY-SECONE	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			<u></u>		·····			
	····	<b></b>	<u></u>			•		
			<u></u>					
	····		<u>-</u>					
	····	<b></b>	<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	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			criber group	o as shown in the boxes	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		11		I 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
					<u></u>			and
					<del></del>			Syndicated Exclusivity
								Surcharge
					<u></u>			for
	····				<u></u>			Partially Distant
								Stations
					<u></u>			
					<del></del>			
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	
SEVE	NTY-FIFTH	SUBSCRIBER GRO	UP	SEVE	NTY-SIXTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA	·		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
			-					
					<u></u>			
					<del></del>			
					<u></u>			
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	<b>\$</b>	0.00	
	. <b>u</b> p	· ·		J. 555 P. GOSIPIO P GUIT	С. Очр	· ·		
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 CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EACH				
	-SEVENTH	SUBSCRIBER GROU		TI .		I 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
	<u></u>				<del></del>			Distant Stations
	<u></u>							Stations
	<del></del>				···			
Total DSEs		!	0.00	Total DSEs	-	·!·	0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
					с. с. р			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	ITY-NINTH	SUBSCRIBER GROU		II		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<del></del>			-	···			
		-						
	<u></u>							
	<del></del>				···			
		-						
	<u></u>							
	···				···			
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 Fourth	h Group	\$	0.00	
				Ш				
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047								
				ATE FEES FOR EACH					
		SUBSCRIBER GROU		III		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	
		-			<u> </u>			and	
					<u></u>			Syndicated Exclusivity	
								Surcharge	
					<u> </u>			for	
	·····			-	<u>-</u>			Partially Distant	
		-			-			Stations	
					<u></u>				
					<u> </u>				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	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		
EIG	HTY-THIRD	SUBSCRIBER GROU	JP	EIGHT	Y-FOURTH	I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	<i>A</i>		0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-			<u> </u>				
					<u></u>				
					<u></u>				
		-			-				
		-			<u></u>				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	າ Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$			

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EAC				
EIG COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA		1 SUBSCRIBER GRO	JP <b>0</b>	9
COMMUNITY AREA				COMMUNITY AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-	<u>.</u>					and Syndicated
	<del></del>		<u>-</u>					Exclusivity
								Surcharge
						-		for
			<u>.</u>					Partially Distant
		-						Stations
			·					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
EIGHTY	/-SEVENTH	SUBSCRIBER GRO	UP	EIGH	ITY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			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	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Rasa Rato Foo: Add	the hace rot	a foos for each subse	criber group	as shown in the boxes	: ahove			
Enter here and in blo			g. oap			\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU				I 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
	<u></u>				····			Partially Distant
		-						Stations
	<u></u>							
	<del></del>				····			
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 Secon	nd Group	\$	0.00	
NIN	ETY-FIRST	SUBSCRIBER GROU	JP	NINET	Y-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<del></del>			
	<u></u>							
	<del></del>				····			
	<u></u>							
	····				······································			
Total DSEs			0.00	Total DSEs		II	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
	•				r			
Base Rate Fee Third	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.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	TY-THIRD	SUBSCRIBER GRO		H		I SUBSCRIBER GROU		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
			<del></del>					Surcharge for
	···		<u></u>		••••		····	Partially
								Distant
								Stations
			<u></u>					
	····		<u></u>		·····			
		H				-		
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	
NIN	ETY-FIFTH	SUBSCRIBER GRO	UP	NI	NETY-SIXTH	I 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>					
	····		<del></del>					
			<u></u>					
			<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 t			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023047	Name
BI	LOCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
NINETY-	SEVENTH	SUBSCRIBER GRO		NIN	ETY-EIGHTH	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
CALL SIGN	DOL	CALL SIGIN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
						-		Surcharge
						-		for
								Partially Distant
	<u></u>	-	···			-		Stations
	···		······································			-		Guarono
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GRO	UP	ONE H	HUNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>					-		
			<del></del>		·····	-	····	
	<u>.                                    </u>		<u></u>			-		
		<b>-</b>						
	<mark></mark>							
	<mark></mark>		<u></u>			-		
	<mark></mark>		<u></u>					
	<u></u>		<del>-</del>		·····		<u></u>	
	···		······································			· · · · · · · · · · · · · · · · · · ·		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	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.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE  CALL SIG	O Computa  DSE of Base Rate and Syndica Exclusiv Surchar for Partial Distan Statior
COMMUNITY/ AREA COMMUNITY/ AREA	DSE of Base Rate and Syndica Exclusiv Surchar for Partial Distan
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE of Base Rate and Syndica Exclusiv Surchar for Partial Distan
CALL SIGN DSE CALL SIGN DSE CALL SIGN  CALL SIGN  DSE CALL SIGN  CALL SIGN  DSE CALL SIGN  CALL SIG	Base Rate and Syndica Exclusiv Surchar for Partial
	and Syndica Exclusiv Surchar for Partial
	Syndica Exclusiv Surchar for Partial
	Exclusiv Surchar for Partial Distan
	Surchar for Partial Distan
	Partial Distan
	Distan
	Station
<u> </u>	
Total DSEs 0.00 Total DSEs	0.00
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	0.00
	<del></del>
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
ONE HUNDRED THIRD SUBSCRIBER GROUP  ONE HUNDRED FOURTH SUBSCRIBER GROUP	
COMMUNITY/ AREA COMMUNITY/ AREA	0
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
<u> </u>	
Total DSEs Total DSEs	0.00
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.  Enter here and in block 3, line 1, space L (page 7) \$	

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 023047	Name
	BLOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ ARE	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
					<del></del>			for
								Partially
								Distant
								Stations
					<del></del>			
					<del></del>			
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t 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	
ONE HUNDRE	D SEVENTH	SUBSCRIBER GROU	JP	ONE HUNDR	ED EIGHTH	SUBSCRIBER GROU	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<del></del>		<u> </u>	
		-			<u></u>			
		-						
	·····				<del></del>			
					<del></del>		····	
					<u></u>			
	·····				<del></del>			
					<del></del>			
Total DSEs			0.00	Total DSEs	•	-	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	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.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EACH				<u> </u>
	ED NINTH	SUBSCRIBER GROL		ONE HUNDR		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			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>				<u>-</u>			and Syndicated
	<u></u>							Exclusivity
								Surcharge
	<u> </u>				<u></u>			for Partially
	<u> </u>							Distant
								Stations
					<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 Secon	nd Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			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>				<u>-</u>			
	<u></u>							
	<u></u>				<u></u>			
Total DSEs			0.00	Total DSEs		П	0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourth	า Group	\$	0.00	
Raco Data Eco Third	Group	e.	0.00	Raco Poto Eco Count	o Group	¢	0.00	
Base Rate Fee Third (	σισαρ	<u>[</u> \$	0.00	Base Rate Fee Fourth	- Эгоир	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023047	Name
E	BLOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0,122 0.011	202	07.22 0.011	202	07.122.01011	202	07.122.01.01.1	302	Base Rate Fee
								and
		<u> </u>						Syndicated
								Exclusivity
								Surcharge for
	···	<del>-</del>	······································			-		Partially
								Distant
								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 (		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GRO		li		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>			-		
			<u>.</u>					
	···	<b>-</b>	······································					
		<u> </u>						
			<b></b>					
	<u></u>		<b>-</b>					
			<u> </u>					
			<b></b>					
	····		<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 Four	th Group	\$	0.00	
Base Rate Fee: Add to Enter here and in blood			criber group	as shown in the boxe	s above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047								
				ATE FEES FOR EAC					
		SUBSCRIBER GROU		11		SUBSCRIBER GRO		9	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
07.22 0.0.1	302	07.122 0.011	202	07.122.01.01.1	202	07.22 07.01	302	Base Rate Fee	
								and	
								Syndicated	
					<u></u>			Exclusivity	
					<u></u>		····	Surcharge for	
		-			<u></u>			Partially	
								Distant	
								Stations	
								1	
								1	
						•		1	
								I	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
ONE HUNDRED	NINTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					<u></u>		<u></u>	I	
							····	I	
								I	
								I	
					<u></u>			1	
						•		I	
								1	
		-						I	
					<u></u>			1	
	·····				<u></u>			I	
					<u></u>			I	
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.	\$			

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 023047	Name
	BLOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		TI .		SUBSCRIBER GROUP		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
					<u></u>			for
		-						Partially
								Distant
								Stations
								1
					<u></u>		····	1
		-						1
								1
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t 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	
ONE HUNDRED TW	/ENTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	ITY-FOURTH	I SUBSCRIBER GROUP	)	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			1
								I
								1
								I
								1
		-			<u></u>			I
								1
								1
					<u></u>		<u></u>	
					<u></u>			1
								I
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.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
			BASE RA	ATE FEES FOR EACH				
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROUP	0	ONE HUNDRED TWI		I SUBSCRIBER GROUP	0	9
COMMONT I/ AREA				COMMONT I/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u> </u>			Base Rate Fee
	<u></u>			-	<u> </u>			and Syndicated
	<u></u>				<u>-</u>			Exclusivity
					<u></u>			Surcharge
	<u></u>				<u></u>			for Partially
	<u></u>							Distant
								Stations
					<u></u>	.		
	<u></u>			-	<u> </u>			
	<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	
NE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWEN	NTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>				<u></u>			
					<del>-</del>	<del>                                     </del>		
				-				
	<del></del>				<u></u>			
	<del></del>				<del>.  </del>			
	<u></u>				<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
Enter here and in bloc			nber group	as shown in the boxes	adove.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047								
	BLOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP			
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROUP	1	ONE HUNDREI	THIRTIETH	H SUBSCRIBER GROUP	)	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
0.122 0.00								Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
	<u></u>				<u></u>	-		for	
	<del></del>				<del></del>			Partially	
	<del></del>				<del></del>			Distant Stations	
	····				<del></del>			Stations	
	···				···		····		
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	oss Receipts First Group \$ 0.0				nd Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00		
ONE HUNDRED TH	HRTY-FIRST	SUBSCRIBER GROUP	1	ONE HUNDRED THIR	TY-SECONI	SUBSCRIBER GROUP	)		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	<u></u>				<u></u>	-			
					<del> </del>		<u> </u>		
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	<del></del>				<del></del>				
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	····				<del></del>				
	···				···				
Total DSEs			0.00	Total DSEs	·		0.00		
	Group	¢	0.00		h Group	¢	0.00		
Gross Receipts Third	Group	\$	J.00	Gross Receipts Fourt	ιι Οιυυμ	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$			

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EACH				
ONE HUNDRED THE		SUBSCRIBER GROUP	0	ONE HUNDRED THIS		1 SUBSCRIBER GROUF	0	9
					T 505	П ом сосом	505	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
					<del></del>			and
		-						Syndicated
								Exclusivity
					<u></u>			Surcharge
	<del></del>	-						for
	<del></del>				<del></del>			Partially Distant
								Stations
								I
		-						I
					<u></u>			
	<del></del>				<u>.</u>			1
Total DSEs			0.00	Total DSEs		Ц	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Gross receipts i list	Cloup			Cross receipts occo	па Огоар	<u>*</u>	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED TI	HIRTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	HIRTY-SIXTH	SUBSCRIBER GROUP	1	I
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						1
				-	<del></del>			I
					<del></del>		••••	1
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	·····				<mark></mark>			1
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								I
								1
	<u></u>				<mark>.</mark>			I
							0.00	
Total DSEs			0.00	Total DSEs		-	0.00	I
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			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROUP		H		SUBSCRIBER GROUP		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
					<u></u>			Syndicated Exclusivity
					<u>-</u>			Surcharge
		-						for
					<u> </u>			Partially
								Distant Stations
		-						
					<u></u>			
			ļ		-			
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	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	
ONE HUNDRED TH	HIRTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	A		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	d Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047								
			BASE RA	TE FEES FOR EACH				
	RTY-FIRST	SUBSCRIBER GROUP		ii e	TY-SECONE	SUBSCRIBER GROUP		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
								Stations
								I
Total DSEs	-		0.00	Total DSEs		Ц	0.00	
ross Receipts First Group \$ 0.0				Gross Receipts Secon	nd Group	\$	0.00	
						·		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	RTY-THIRD	SUBSCRIBER GROUP		ii e	TY-FOURTH	I SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			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 C	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	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	above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023047	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC				
ONE HUNDRED FO	RTY-FIFTH	SUBSCRIBER GROUP	)	ONE HUNDRED I	ORTY-SIXTH	SUBSCRIBER GROUP	)	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL CICAL	DOE	CALL CICAL	DOE	CALL CICAL	DOE	M CALL CICN	DOE	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
						-		and
		<b>-</b>	·					Syndicated
			•		••••		•••••	Exclusivity
								Surcharge
		<b>-</b>						for
								Partially
								Distant
								Stations
			<u>.</u>					
	···		<u>.</u>				····	
			··········			-		
Total DSEs	•		0.00	Total DSEs	·		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORTY	'-SEVENTH	SUBSCRIBER GROUP	)	ONE HUNDRED FO	ORTY-EIGHTH	SUBSCRIBER GROUP	)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		<u>.</u>				····	
			······································			-		
			<b></b>				<u></u>	
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			······					
			<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 Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023047	Name
BI	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRE	D FIFTIETH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122.0.0.1	202	57.12 5.5.T	202	07.22 0.0.1	202	07.122.01011	302	Base Rate Fee
								and
								Syndicated
							<u></u>	Exclusivity
	······································				·····		<u></u>	Surcharge for
							<u> </u>	Partially
								Distant
								Stations
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							<u></u>	
	·					<u> </u>		
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 GROU	JP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u>.</u>		<u></u>	
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		<b>-</b>					····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
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			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EAC				
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU		ONE HUNDRED FIF		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 Stations
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						<del> </del>	····	
Total DSEs	<u> </u>		0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU		Ti .		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<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 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 boxe	s above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023047	Name
				ATE FEES FOR EACH				
ONE HUNDRED FIFT		SUBSCRIBER GROUP	0	ONE HUNDRED FI		1 SUBSCRIBER GROUP	0	9
COMMONTI IT AREA				COMMONT I/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u>-</u>			Base Rate Fee
	·····							and Syndicated
					<u>-</u>			Exclusivity
								Surcharge
					<u></u>			for Partially
					•			Distant
								Stations
					<u></u>			
				-				
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	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	
ONE HUNDRED	FIFTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRE	D SIXTIETH	SUBSCRIBER GROUP		
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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				-	<u>.</u>			
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					<u>-</u>			
					<u> </u>			
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 Fourti	ո Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW CABLE ONE, IN							023047	Name
				TE FEES FOR EAG				
		SUBSCRIBER GRO		COMMUNITY ADD		SUBSCRIBER GRO		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α		0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
KOCO	0.25							Base Rate F
								and
						-		Syndicate
						<del> </del>		Exclusivit Surcharge
			···			-	<u> </u>	for
								Partially
								Distant
						-		Stations
			<del></del>		·····	-	<u> </u>	
			<del></del>	·	·····	-		
Γotal DSEs			0.25	Total DSEs			0.00	
Gross Receipts First	Group	\$ 545	5,733.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	5,116.25	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	٩		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
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			<del></del>			<b>-</b>	<u> </u>	
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	····							
Fotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	- 1				17			
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u>II</u>				
			scriber group	as shown in the boxe	es above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$	5,116.25	

Base Rate Fe and Syndicated Exclusivity		IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH			-	
Computation  SE of  Base Rate Fe  and  Syndicated  Exclusivity		CLIDSCOIDED CDOL						Bl
Computation  SE of  Base Rate Fe  and  Syndicated  Exclusivity		SUBSCRIBER GROU	SIXTH	COMMUNITY/ADEA	JP <b>0</b>	SUBSCRIBER GRO	FIFTH	COMMUNITY/ADEA
BE of Base Rate Fe and Syndicated Exclusivity	0 DSE			COMMUNITY/ AREA				COMMUNITY/ AREA
and Syndicated Exclusivity	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity								
Exclusivity								
						<b>-</b>		
Surcharge								
for								
Partially Distant								
Stations		+				H	<u> </u>	
		-						
00	0.00			Total DSEs	0.00			Total DSEs
00_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
00	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G
	OUP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	;
0	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
SE .	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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						<b></b>		
		-					<u>.</u>	
00	0.00			Total DSEs	0.00			Total DSEs
00	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third (
00	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

Name	YSTEM ID# 023047	S				LE SYSTEM:		LEGAL NAME OF OWNE  CABLE ONE, INC.
				TE FEES FOR EACH				Bl
9		SUBSCRIBER GROU	TENTH			SUBSCRIBER GRO	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		-			<u>-</u>			
for	<u></u>	-	<u>-</u>		-	-		
Partially								
Distant								
Stations			<u> </u>		<u> </u>		<mark></mark>	
			<b></b>		<b></b>			
	<u> </u>		<b></b>		<b> </b>			
		-	<b></b>		<b> </b>		<u> </u>	
		<u> </u>						
			<u>-</u>	•••••			<u> </u>	
	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	TWELVTH		UP	SUBSCRIBER GRO	LEVENTH	El
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			<u> </u>					
			<u>.</u>		<u>.</u>			
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		-	<u>.</u>				<mark></mark>	
	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# 023047	S'			<b>.</b>	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	RTEENTH	FOL		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								
and								
Syndicated							·	
Exclusivity	<del></del>				<b></b>			
Surcharge for								
Partially		-						
Distant		-						
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	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	XTEENTH	S	JP	SUBSCRIBER GRO	FTEENTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				•••••				
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	<u></u>						<u>-</u>	
		-					·	
	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

Name	YSTEM ID# 023047	S'				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (	BL
9	JP	SUBSCRIBER GROU	HTEENTH	EIG		SUBSCRIBER GRO	NTEENTH	
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							<mark></mark>	
Exclusivity					·			
Surcharge for								
Partially		-						
Distant				••••••				
Stations								
							. <mark> </mark>	
	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>Base Rate Fee</b> First Gr
	JP	SUBSCRIBER GROU	VENTIETH	TV	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	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	YSTEM ID# 023047	31				LE SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-SECOND	iii		SUBSCRIBER GROU	ΓY-FIRST	
Computation				COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and		 						
Syndicate						-	-	
Exclusivit Surcharge								
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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	-FOURTH	TWENT	UP	SUBSCRIBER GRO	Y-THIRD	TWEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
					<u></u>			
		-			<u>.</u>	-		
	0.00			Total DSEs	0.00			Total DSEs
	•	S S	Group			\$	iroup	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	iroup	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	023047	Name
BL	OCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCE	RIBER GROUP		
	ΓY-FIFTH	SUBSCRIBER GRO	UP	iii		SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.1				Base Rate Fe
								and
								Syndicated
								Exclusivity
		-						Surcharge
								for
								Partially Distant
			<del>-</del>				····	Stations
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		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Sec		\$	0.00	
	EVENTH	SUBSCRIBER GRO		iii —		I 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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Total DSEs	1	1	0.00	Total DSEs		-11	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	- mp					·		
Base Rate Fee Third G	roup	\$	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	es above.	\$		

	ID			TE FEES FOR EACH				
9	0 0	SUBSCRIBER GROU	nik i i E i H	COMMUNITY/ AREA	ور ا	SUBSCRIBER GROU	I T-ININI H	OMMUNITY/ AREA
Computati								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and Syndicate							<mark></mark>	
Exclusivit	<u></u>					<b>-</b>	<u>-</u>	
Surcharg	····						<u>-</u>	······
for								
Partially							<u></u>	
Distant							<mark></mark>	
Stations	<u></u>						<u></u>	
	····	-					<u>-</u>	
							<u>.</u>	
			<u> </u>					
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	iroup	Fross Receipts First G
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	<b>ase Rate Fee</b> First G
	JP	SUBSCRIBER GROU	-SECOND			SUBSCRIBER GROU	TY-FIRST	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00		<u> </u>	Total DSEs	0.00			otal DSEs
	0.00					_		
		\$	Group	Gross Receipts Fourth	0.00	\$	Group	ross Receipts Third (
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third (

DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially	IBER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH	BASE RA	COMPUTATION OF	001/ 4. (	
DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially	SUBSCRIBER GROUP	-FOURTH	THIDTY		• • • • • • • • • • • • • • • • • • •	.UCK A: (	BL
DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially			THIN		SUBSCRIBER GROU	Y-THIRD	
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	-						
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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 Second	0.00	\$	oup	<b>Base Rate Fee</b> First Gi
	SUBSCRIBER GROUP	TY-SIXTH	THIF	JP	SUBSCRIBER GROU	TY-FIFTH	THIR
<u>0</u>			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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0.00			Total DSEs	0.00			Total DSEs
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0.00	\$	Group	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G
0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G

	023047	S			· 	LE SYSTEM:		LEGAL NAME OF OWNE  CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
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	\$	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	FORTIETH		JP	SUBSCRIBER GRO	ΓΥ-NINTH	THIRT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
<u>'                                    </u>	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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-	0.00			Total DOCs	0.00			Fotal DSF a
.	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

O Computation  DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	SUBSCRIBER GROUP		TE FEES FOR EACH		COMPUTATION OF	OCK A: (	DI
Computation  DSE of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant		-SECOND	FORT				
Computation  DSE of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant			COMMUNITY/ AREA		SUBSCRIBER GRO	TY-FIRST	
Base Rate Fed and Syndicated Exclusivity Surcharge for Partially Distant	CALL SIGN DSE CALL SIGN DSE			0			COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge for Partially Distant	CALL SIGN DO	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant							
Exclusivity Surcharge for Partially Distant							
Surcharge for Partially Distant						<u>.</u>	
for Partially Distant				<b></b>		<u>.</u>	
Partially Distant							
Distant	<u> </u>			·			
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0.00	0.0		Total DSEs	0.00			Total DSEs
0.00	\$ 0.0	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0.00	\$ 0.0	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First Gr
	SUBSCRIBER GROUP	′-FOURTH	FORT	JP	SUBSCRIBER GRO	ΓY-THIRD	FORT
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN DS	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00	0.0	I	Total DSEs	0.00			Total DSEs
0.00		Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
0.00	\$ 0.0	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

	ID	RIBER GROUP  I SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GRO		
9	0	1 SOBSCINIBLIN GINOR	(TT-SIXTII	COMMUNITY/ AREA	0	SOBSCRIBER GRO		COMMUNITY/ AREA
Computation		Ш	T = = =				T === 1	
of Base Rate I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and	<u></u>	<del> </del>						
Syndicate								
Exclusivit								
Surcharg		 					<u>.</u>	
for		-						
Partially Distant								
Stations		-						
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	iroup	ross Receipts First G
	0.00	\$		Base Rate Fee Secon	0.00	\$		ase Rate Fee First G
	_	SUBSCRIBER GROU	Y-EIGHTH	İ		SUBSCRIBER GRO	SEVENTH	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	CALL SIGN		Total DSEs	0.00	CALL SIGN		otal DSEs
		CALL SIGN				CALL SIGN		

Name	023047	S				LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	FIFTIETH			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						-		
Partially								
Distant								
Stations		 						
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		1			<b></b>			
		•		•••••				
	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 Second	0.00	\$	roup	<b>3ase Rate Fee</b> First Gr
	JP	SUBSCRIBER GROU	'-SECOND	FIFTY	UP	SUBSCRIBER GRO	TY-FIRST	FIFT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		-			<u>.</u>			
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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# 023047					_E SYSTEM:		CABLE ONE, INC.
				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		<u> </u>				H		
Syndicated		-						
Exclusivity Surcharge	<u></u>	-						
for	<u></u>	-					··	
Partially	<u> </u>	<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	Base Rate Fee 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
						1		
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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 C

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
FIFTY-	SEVENTH	SUBSCRIBER GRO		FIF	TY-EIGHTH	I SUBSCRIBER GRO	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
			<u> </u>					and
								Syndicated
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			<u> </u>					Partially
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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	
FIF	TY-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	I 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			0.00	Total DSEs		II.	0.00	
Gross Receipts Third G	Group	\$	0.00		h Group	\$	0.00	
	•				•			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
\$ 0.00	\$ 0.00	0.00	0	Gross Receipts Fourt	h Group	\$ \$		

CABLE ONE, IN		LE SYSTEM:					023047	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		iii		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
	<mark></mark>							and
								Syndicated Exclusivity
			····			+		Surcharge
								for
								Partially
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								Stations
					•••••	+		
Total DSEs			0.00	Total DSEs		<u> </u>	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	
S	IXTY-THIRD	SUBSCRIBER GRO	DUP	SIX	TY-FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	DSE	CALL SIGN	0.00	Total DSEs	DSE	CALL SIGN	DSE	
		\$				CALL SIGN		
Total DSEs Gross Receipts Third	d Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Total DSEs	d Group		0.00	Total DSEs	rth Group		0.00	

LEGAL NAME OF OWNE CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO		İ		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						<u> </u>		Base Rate Fee
								and
								Syndicated
	<u>.</u>				····	<del> </del>		Exclusivity Surcharge
								for
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Total DSEs			0.00	Total DSEs	_	<u> </u>	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
							<u> </u>	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SIXTY-S	SEVENTH	SUBSCRIBER GRO	UP	SIX	TY-EIGHTH	I 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			0.00	Total DSEs	1		0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
							<del></del>	
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.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP   SEVENTIETH SUBSCRIBER GROUP   SEVENTIETH SUBSCRIBER GROUP   COMMUNITY/ AREA	Gomputation of Base Rate Fand Syndicate Exclusivit Surcharge for Partially Distant Stations
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG	Computation of Base Rate In and Syndicate Exclusivities Surcharg for Partially Distant
Fotal DSEs  O.00  Gross Receipts First Group  O.00  Gross Receipts Second Group  O.00  O.0	of Base Rate F and Syndicate Exclusivit Surcharg for Partially Distant
Total DSEs  O.00  Gross Receipts First Group  \$ 0.00  Gross Receipts Second Group  \$ 0.00  Gross Receipts Second Group  \$ 0.00	Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	and Syndicate Exclusivit Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	Syndicate Exclusivit Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	Exclusivit Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	Surcharge for Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	Partially Distant
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	Distant
stross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	Stations
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
stross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
SEVENTY-FIRST SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP	
OMMUNITY/ AREA	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
otal DSEs 0.00 Total DSEs 0.00	
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	
ase Rate Fee Third Group \$ 0.00   Base Rate Fee Fourth Group \$ 0.00	

	023047  A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
	ID							
9	<b>0</b>	SUBSCRIBER GROU	r-FUUKTH	COMMUNITY/ AREA	<u>0</u>	SUBSCRIBER GRO	II T-IHIKD	SEVEN COMMUNITY/ AREA
Computat				O SIMILOTATI TO TAKE T				
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate						H		
and							···	
Syndicate Exclusivi		-					···	
Surcharg								
for								
Partially								
Distant								
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
	1							
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	Group	Base Rate Fee First G
	JP	SUBSCRIBER GROU	NTY-SIXTH			SUBSCRIBER GRO	NTY-FIFTH	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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						-		
	0.00			Total DSEs	0.00			otal DSEs
		s	Group			s	Group	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs

	7STEM ID# 023047	S			· 	LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE, INC.
				TE FEES FOR EACH				
0	IP	SUBSCRIBER GROU	Y-EIGHTH	SEVENT		SUBSCRIBER GRO	SEVENTH	
9 Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
and								
Syndicated				***************************************				
Exclusivity								
Surcharge								
for								
Partially								
Distant	<u></u>		ļ				<mark>-</mark>	
Stations								
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	COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
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	0.00  JP	SUBSCRIBER GROU	d Group	EIGHT COMMUNITY/ AREA CALL SIGN  Total DSEs	0.00  JP	SUBSCRIBER GRO	ITY-THIRD  DSE	EIGH OMMUNITY/ AREA  CALL SIGN  otal DSEs
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	0.00  JP	SUBSCRIBER GROU	d Group	EIGHT COMMUNITY/ AREA CALL SIGN  Total DSEs	0.00  JP	SUBSCRIBER GRO	ITY-THIRD  DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO			HTY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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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	
EIGHTY-S	EVENTH	SUBSCRIBER GRO	UP	EIGHT	Y-EIGHTH	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	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	ı Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 023047	Name
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GRO			NINTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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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	
NINE-	TY-FIRST	SUBSCRIBER GRO	IIP	NINETY	/-SECOND	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA	11-11101	ODBOOKIBEK GIKO	0	COMMUNITY/ AREA	-OLOOND	OODOONIDEN GROO	0	
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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			criber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 023047	Name
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	Y-THIRD	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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Gross Receipts First G	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
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Name	023047	S			•	LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE, INC.	
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Name	YSTEM ID# 023047								
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0	JP	SUBSCRIBER GROU	SECOND	ONE HUNDRED	JP	SUBSCRIBER GROU	ED FIRST	ONE HUNDRE	
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047							
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<u> </u>	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047							
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	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047							
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0	IP	SUBSCRIBER GROU	RTEENTH	ONE HUNDRED FOU	JP	SUBSCRIBER GROU	RTEENTH	ONE HUNDRED THIR
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	IP	SUBSCRIBER GROU	XTEENTH	ONE HUNDRED S	JP	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
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						023047	Name
	: COMPUTATION C						
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otal DSEs		0.00	Total DSEs			0.00	
ss Receipts First Group \$		\$ 0.00		ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	OUP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0			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	
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third Group	\$				\$	-	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 023047	Name
BL	OCK A: (	COMPUTATION O	BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	ITY-FIRST	SUBSCRIBER GROUP	<b>-</b>	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP	)	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	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
								Stations
Total DSEs			0.00	Total DSEs				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP	0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP	)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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Gross Receipts Third G	oroup	\$	0.00	Gross Receipts Fou	ıııı Group	\$	0.00	
<b>Base Rate Fee</b> Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

Name	O23047									
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL		
		SUBSCRIBER GROUP	NTY-SIXTH	ONE HUNDRED TWE		SUBSCRIBER GROUP	NTY-FIFTH	ONE HUNDRED TWEN		
<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	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr		
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro		
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN		NDRED TWENTY-SEVENTH SUBSCRIBER GROUP				
	0	0 COMMUNITY/ AREA				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		0	Total DSEs	0.00					
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	<u>\$</u>	iroup	Total DSEs Gross Receipts Third G		

Name	023047						ı	
<u> </u>				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	THIRTIETH			SUBSCRIBER GROUP	NTY-NINTH	ONE HUNDRED TWEE
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and		<u> </u>					<u>.</u>	
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	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First G
		SUBSCRIBER GROUP	TY-SECONE	ONE HUNDRED THIR	ı	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THI
	0	COMMUNITY/ AREA 0			0			OMMUNITY/ AREA
				COMMUNITY AREA				
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	DSE	CALL SIGN	DSE			CALL SIGN	DSE	
	0.00			CALL SIGN  Total DSEs	DSE			Total DSEs
		CALL SIGN		CALL SIGN	DSE	CALL SIGN		CALL SIGN  CALL SIGN  Fotal DSEs  Gross Receipts Third (

				TE FEES FOR EACH					
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Computation				COMMUNITY AREA	U			COMMUNITY AREA	
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G	
	JP	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THIS	JP	SUBSCRIBER GRO	RTY-FIFTH	ONE HUNDRED THIR	
	0	COMMUNITY/ AREA 0			0			CALL SIGN DOE	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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		\$	Group	Total DSEs Gross Receipts Fourth		\$	Group	Fotal DSEs	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  923047								
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	1 SUBSCF	RIBER GROUP		
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP	)	ONE HUNDRED THIS	RTY-EIGHTH	I SUBSCRIBER GROUP	)	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
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								Base Rate Fee
								and
		-						Syndicated
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Total DSEs	<u> </u>		0.00	Total DSEs		II.	0.00	
Gross Receipts First Gr	al DSEs ss Receipts First Group		0.00	Gross Receipts Secon	cond Group \$ 0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED THIRT	Y-NINTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FORTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			O COMMUNITY/ AREA O					
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 Fourth	h Group	\$	0.00	
				<b>.</b>				
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			criber group	as shown in the boxes	above.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID# 023047								
1	ROUP	IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL	
	IBER GROUP	SUBSCRIBER GRO	Y-SECOND	ONE HUNDRED FOR	,	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED FOR	
0 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
OSE of	. SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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and									
Syndicated									
Exclusivity		<b>_</b>							
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.00	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr	
	IBER GROUP	SUBSCRIBER GRO	Y-FOURTH	ONE HUNDRED FOR	1	SUBSCRIBER GROUP	TY-THIRD	ONE HUNDRED FOR	
0	0 COMMUNITY/ AREA 0			0			COMMUNITY/ AREA		
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G	
.00	0.00								

			TE FEES FOR EACH		LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047							
0 9	SUBSCRIBER GROUP		BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP				ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP							
Computation	COMMUNITY/ AREA 0					COMMUNITY/ AREA						
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Base Rate Fee												
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0.00	\$	d Group	Gross Receipts Secon	\$ 0.00		roup	Gross Receipts First Gr					
0.00	Base Rate Fee Second Group \$ 0.00				\$	roup	Base Rate Fee First Gr					
GROUP	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR		SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FORTY-					
<u>0</u>		COMMUNITY/ AREA				COMMUNITY/ AREA						
I DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
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		<b></b>										
0.00			Total DSEs	0.00			Total DSEs					
0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G					
<del></del>			Base Rate Fee Fourth	0.00	\$	Proup	Base Rate Fee Third G					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  SYSTEM ID#  023047							
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (	BL
0	ONE HUNDRED FIFTIETH SUBSCRIBER GROUP				NE HUNDRED FORTY-NINTH SUBSCRIBER GROUP			ONE HUNDRED FORT
9 Computation	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA	
of	DSE	1 11			DSE	CALL SIGN	DSE	CALL SIGN
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	Base Rate Fee Second Group \$ 0.00				0.00	\$	roup	<b>Base Rate Fee</b> First Gi
	JP	SUBSCRIBER GROU	'-SECOND	ONE HUNDRED FIFT	UP	SUBSCRIBER GRO	TY-FIRST	ONE HUNDRED FIF
	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

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC.  923047								
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
9	ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0				NE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP  MMUNITY/ AREA  0			ONE HUNDRED FIF	
Computation	John State of the							CONTROL I / AREA	
of	DSE	CALL SIGN	CALL SIGN DSE		DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and Syndicate							···		
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	Base Rate Fee Second Group \$ 0.00				0.00	\$		Base Rate Fee First G	
	_	SUBSCRIBER GROU	TY-SIXTH		JP <b>0</b>	SUBSCRIBER GRO	TY-FIFTH	ONE HUNDRED FIF	
	0		COMMUNITY/ AREA					COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Fotal DSEs	
	0.00	\$	Group		0.00		Group		
		\$	Group	Total DSEs Gross Receipts Fourth		\$	Group	Fotal DSEs	

Name	O23047	S				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.	
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
9	ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP				NE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP				
Computation	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA		
of	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN			CALL SIGN	DSE	CALL SIGN	
Base Rate F									
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	Base Rate Fee Second Group \$ 0.00			0.00	\$	roup	<b>Base Rate Fee</b> First Gr		
	Р	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP	SUBSCRIBER GRO	ΓΥ-NINTH	ONE HUNDRED FIFT	
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	0.00		Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	
	_	\$	Group			\$	Group		

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LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 023047 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 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 computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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