

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Galva Cable Company, LLC		SYSTEM ID# 0
D	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 first 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.		
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.		
First Community	CITY OR TOWN	STATE	
Add Rows as Necessary	Alhambra	IL	
	Grantfork	IL	
	Bingham	IL	
	Fairmont City	IL	
	New Douglas	IL	
	Nokomis	IL	
	Pocahontas	IL	
	Marine	IL	
	Sorento	IL	
	Arriba	CO	
	Eads	CO	
	Flagler	CO	
	Genoa	CO	
	Haswell	CO	
	Hugo	CO	
	Rush	CO	
	Karval	CO	
	Kit Carson	CO	
	Last Chance	CO	
	Woodrow	CO	
	Anton	CO	
	Burlington	CO	
	Cope	CO	
	Eckley	CO	
	Idalia	CO	
	Joes	CO	
	Kirk	CO	
	Wray	CO	
	Lindon	CO	
	Stratton	CO	
	Akron	CO	
	Vona	CO	
	Briggsdale	CO	
	Goodrich	CO	
	Grover	CO	
	Hoyt	CO	
	New Raymer	CO	
	Hereford	CO	
	Padroni	CO	
	Orchard	CO	
	Brush	CO	
	Fort Morgan	CO	
	Ault	CO	
	Galeton	CO	
	Arvada	CO	
	Weldona	CO	
	Wiggins	CO	
	Cozad	NE	
	Brashear	TX	
	Cooper	TX	
	Cumby	TX	
	Lone Oak	TX	
	Miller Grove	TX	

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E Secondary Transmission Service: Subscribers and Rates	<p>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.</p>				
BLOCK 1			BLOCK 2		
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:			DVR		
• Service to first set	2,315	24.99/month		1,230	-
• Service to additional set(s)					
• FM radio (if separate rate)					
Motel, hotel					
Commercial					
Converter					
• Residential	5,144	-			
• Non-residential					

F Services Other Than Secondary Transmissions: Rates	<p>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.</p>				
BLOCK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential		Employee Pay Cable	
• Pay cable	69.99/month	• Motel, hotel			59.99
• Pay cable—add'l channel		• Commercial			
• Fire protection		• Pay cable			
• Burglar protection		• Pay cable-add'l channel			
Installation: Residential		• Fire protection			
• First set		• Burglar protection			
• Additional set(s)		Other services:			
• FM radio (if separate rate)		• Reconnect			
• Converter		• Disconnect			
		• Outlet relocation			
		• Move to new address			

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G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, *except* (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do *not* list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried *only* on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

Column 4: 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 identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KDNL	30.1	N	St. Louis, MO
KDNLDT3	30.3	N-M	St. Louis, MO
KETC	9.1	E-M	St. Louis, MO
KETCDT2	9.2	E-M	St. Louis, MO
KETCDT3	9.3	E-M	St. Louis, MO
KETCDT4	9.4	E-M	St. Louis, MO
KMOV	4.1	N	St. Louis, MO
KMOVDT2	4.2	N-M	St. Louis, MO
KMOVDT3	4.3	N-M	St. Louis, MO
KNLC	24.1	I	St. Louis, MO
KNLCDT2	24.2	I-M	St. Louis, MO
KPLR	11.1	N	St. Louis, MO
KPLRDT2	11.2	N-M	St. Louis, MO
KPLRDT3	11.3	N-M	St. Louis, MO
KSDK	5.1	N	St. Louis, MO
KSDKDT2	5.2	N-M	St. Louis, MO
KSDKDT3	5.3	N-M	St. Louis, MO
KTVI	2.1	N	St. Louis, MO
KTVIDT2	2.2	N-M	St. Louis, MO
KTVIDT3	2.3	N-M	St. Louis, MO
WRBU	46.1	I	St. Louis, MO
WRBUDT2	46.2	I-M	St. Louis, MO
WRBUDT3	46.3	I-M	St. Louis, MO
WRBUDT4	46.4	I-M	St. Louis, MO
WRBUDT5	46.5	I-M	St. Louis, MO
WRBUDT6	46.6	I-M	St. Louis, MO
KFXL	51.1	N	Lincoln, NE

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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.

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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KGIN	11.1	N	Lincoln, NE
KHGI	13.1	N	Lincoln, NE
KHGIDT2	13.2	N-M	Lincoln, NE
KLNE	3.1	E	Lincoln, NE
KLNEDT2	3.2	E-M	Lincoln, NE
KLNEDT3	3.3	E-M	Lincoln, NE
KLNEDT4	3.4	E-M	Lincoln, NE
KSNB	4.1	N	Lincoln, NE
KSNBDT2	4.2	N-M	Lincoln, NE
KAZDDT	55.1	I	Dallas, TX
KAZDDT3	55.3	I-M	Dallas, TX
KAZDDT5	55.5	I-M	Dallas, TX
KAZDDT6	55.6	I-M	Dallas, TX
KDAFDT	33.1	N	Dallas, TX
KDAFDT2	33.2	N-M	Dallas, TX
KDAFDT3	33.3	N-M	Dallas, TX
KDFIDT	27.1	I	Dallas, TX
KDFIDT2	27.2	I-M	Dallas, TX
KDFWDT	4.1	N	Dallas, TX
KDTNDT	2.1	I	Dallas, TX
KERADT	13.1	I	Dallas, TX
KERADT2	13.2	I-M	Dallas, TX
KERADT3	13.3	I-M	Dallas, TX
KMPXDT	29.1	I	Dallas, TX
KPXDDT	68.1	I	Dallas, TX
KPXDDT2	68.2	I-M	Dallas, TX

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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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KPXDDT3	68.3	I-M	Dallas, TX
KPXTDT4	68.4	I-M	Dallas, TX
KPXDDT5	68.5	I-M	Dallas, TX
KTVTDT	11.1	N	Dallas, TX
KTVTDT2	11.2	N-M	Dallas, TX
KTXADT	21.1	I	Dallas, TX
KTXADT2	21.2	I-M	Dallas, TX
KUVNDT	23.1	I	Dallas, TX
KXASDT	5.1	N	Dallas, TX
KXASDT2	5.2	N-M	Dallas, TX
KXASDT3	5.3	N-M	Dallas, TX
KXTXDT	39.1	I	Dallas, TX
KXTXDT2	39.2	I-M	Dallas, TX
WFAADT	8.1	N	Dallas, TX
WFAADT2	8.2	N-M	Dallas, TX
WFAADT3	8.3	N-M	Dallas, TX
KCTV	5.1	N	Kansas City, KS
KCWE	29.1	N	Kansas City, KS
KCWEDT2	29.2	N-M	Kansas City, KS
KMBC	9.1	N	Kansas City, KS
KMBCDT2	9.2	N-M	Kansas City, KS
KSHB	41.1	N	Kansas City, KS
KSHBDT2	41.2	N-M	Kansas City, KS
KSHBDT3	41.3	N-M	Kansas City, KS
WDAF	4.1	N	Kansas City, KS

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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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

Column 4: 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 identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WDAFDT2	4.2	N-M	Kansas City, KS
WDAFDT3	4.3	N-M	Kansas City, KS
KSMO	62.1	I	Kansas City, KS
KSMODT2	62.2	I-M	Kansas City, KS
WHO	13.1	N	Des Moines, IA
WHODT2	13.2	N-M	Des Moines, IA
WHODT3	13.3	N-M	Des Moines, IA
WHODT4	13.4	N-M	Des Moines, IA
KCCI	8.1	N	Des Moines, IA
KCCIDT2	8.2	N-M	Des Moines, IA
KCCIDT3	8.3	N-M	Des Moines, IA
KCWI	23.1	N	Des Moines, IA
KCWIDT2	23.2	N-M	Des Moines, IA
KCWIDT3	23.3	N-M	Des Moines, IA
WOI	5.1	N	Des Moines, IA
WOIDT2	5.2	N-M	Des Moines, IA
KDSM	17.1	N	Des Moines, IA
KDSMDT2	17.2	N-M	Des Moines, IA
KDSMDT3	17.3	N-M	Des Moines, IA
KFPX	39.1	I	Des Moines, IA
KFPXD2	39.2	I-M	Des Moines, IA
KFPXD3	39.3	I-M	Des Moines, IA
KDIN	11.1	E	Des Moines, IA
KDINDT2	11.2	E-M	Des Moines, IA
KDMIDT3	11.3	E-M	Des Moines, IA

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Galva Cable Company, LLC	SYSTEM ID# 0
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G
Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, *except* (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do *not* list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried *only* on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

Column 4: 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 identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KETV	7.1	N	Omaha, NE
KETVDT2	7.2	N-M	Omaha, NE
KMTV	3.1	N	Omaha, NE
KMTVDT2	3.2	N-M	Omaha, NE
KMTVDT3	3.3	N-M	Omaha, NE
KPTM	42.1	N	Omaha, NE
KPTMDT2	42.2	N-M	Omaha, NE
KPTMDT3	42.3	N-M	Omaha, NE
KXVO	15.1	N	Omaha, NE
KXVODT2	15.2	N-M	Omaha, NE
KXVODT3	15.3	N-M	Omaha, NE
WOWT	6.1	N	Omaha, NE
WOWTDT2	6.2	N-M	Omaha, NE
WOWTDT3	6.3	N-M	Omaha, NE
KHIN	26.1	E	Omaha, NE
KHINDT2	26.2	E-M	Omaha, NE
KHINDT3	26.3	E-M	Omaha, NE
KAIL	7.1	I	Fresno, CA
KAILDT2	7.2	I-M	Fresno, CA
KAILDT3	7.3	I-M	Fresno, CA
KFRE	59.1	N	Fresno, CA
KFSN	30.1	N	Fresno, CA
KFSNDT2	30.2	N-M	Fresno, CA
KFTV	21.1	I	Fresno, CA
KFTVDT2	21.2	I-M	Fresno, CA

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Galva Cable Company, LLC	SYSTEM ID# 0
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G
Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, *except* (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do *not* list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried *only* on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

Column 4: 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 identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KFTVDT3	21.3	I-M	Fresno, CA
KFTVDT4	21.4	I-M	Fresno, CA
KGMC	43.1	I	Fresno, CA
KGMC DT4	43.4	I-M	Fresno, CA
KGMC DT6	43.6	I-M	Fresno, CA
KGPE	47.1	N	Fresno, CA
KJEOLD2	32.2	I	Fresno, CA
KJEOLD4	32.4	I-M	Fresno, CA
KMPH	26.1	N	Fresno, CA
KMPH DT2	26.2	N-M	Fresno, CA
KNSODT	51.1	I	Fresno, CA
KNSODT2	51.2	I-M	Fresno, CA
KSEE	24.1	N	Fresno, CA
KSEEDT2	24.2	N-M	Fresno, CA
KSEEDT3	24.3	N-M	Fresno, CA
KTFFDT	61.1	I	Fresno, CA
KVPTDT	18.1	E	Fresno, CA
KVPTDT2	18.2	E-M	Fresno, CA
KVPTDT3	18.3	E-M	Fresno, CA
KBDI	12.1	E	Colorado Springs, CO
KBDIDT2	12.2	E-M	Colorado Springs, CO
KBDIDT3	12.3	E-M	Colorado Springs, CO
KKTV	11.1	N	Colorado Springs, CO
KKTVDT2	11.2	N-M	Colorado Springs, CO
KOAA	5.1	N	Colorado Springs, CO

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Galva Cable Company, LLC	SYSTEM ID# 0
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G

Primary Transmitters: Television

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.

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- 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.

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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

Column 4: 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 identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KOAADT2	5.2	N-M	Colorado Springs, CO
KRDO	13.1	N	Colorado Springs, CO
KRDODT2	13.2	N-M	Colorado Springs, CO
KRDODT3	13.3	N-M	Colorado Springs, CO
KTSC	8.1	E	Colorado Springs, CO
KTSCDT2	8.2	E-M	Colorado Springs, CO
KTSCDT3	8.3	E-M	Colorado Springs, CO
KVSN	48.1	I	Colorado Springs, CO
KVSNDT2	48.2	I-M	Colorado Springs, CO
KVSNDT3	48.3	I-M	Colorado Springs, CO
KXRM	21.1	N	Colorado Springs, CO
KXRMDT2	21.2	N-M	Colorado Springs, CO
KCDO	3.1	I	Denver, CO
KCDODT2	3.2	I-M	Denver, CO
KCEC	50.1	I	Denver, CO
KCECDT2	50.2	I-M	Denver, CO
KCNC	4.1	N	Denver, CO
KCNCDT2	4.2	N-M	Denver, CO
KDEN	25.1	I	Denver, CO
KDENDT2	25.2	I-M	Denver, CO
KDENDT3	25.3	I-M	Denver, CO
KDVR	31.1	N	Denver, CO
KDVRDT2	31.2	N-M	Denver, CO
KMGH	7.1	N	Denver, CO
KMGHDT2	7.2	N-M	Denver, CO

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Galva Cable Company, LLC	SYSTEM ID# 0
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<p>G</p> <p>Primary Transmitters: Television</p>	<p>PRIMARY TRANSMITTERS: TELEVISION</p> <p>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, <i>except</i> (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.</p> <p>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:</p> <ul style="list-style-type: none"> • Do <i>not</i> 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 <i>only</i> 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. <p>Column 1: List each station's call sign. Do <i>not</i> 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 multistream "WETA-2" as the same on the form.</p> <p>Column 2: Give the channel number the FCC 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.</p> <p>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 (iv) of the general instructions in the paper SA1-2 form.</p> <p>Column 4: 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 identified.</p>																																																												
<table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #c6e0b4;"> <th style="width:25%;">1. CALL SIGN</th> <th style="width:25%;">2. B'CAST CHANNEL NUMBER</th> <th style="width:25%;">3. TYPE OF STATION</th> <th style="width:25%;">4. LOCATION OF STATION</th> </tr> </thead> <tbody> <tr><td>KMGHDT3</td><td>7.3</td><td>N-M</td><td>Denver, CO</td></tr> <tr><td>KRMA</td><td>18.1</td><td>E</td><td>Denver, CO</td></tr> <tr><td>KRMADT2</td><td>18.2</td><td>E-M</td><td>Denver, CO</td></tr> <tr><td>KRMADT33</td><td>18.3</td><td>E-M</td><td>Denver, CO</td></tr> <tr><td>KTFD</td><td>14.1</td><td>I</td><td>Denver, CO</td></tr> <tr><td>KTFDDT2</td><td>14.2</td><td>I-M</td><td>Denver, CO</td></tr> <tr><td>KTFDDT3</td><td>14.3</td><td>I-M</td><td>Denver, CO</td></tr> <tr><td>KTFDDT4</td><td>14.4</td><td>I-M</td><td>Denver, CO</td></tr> <tr><td>KTVD</td><td>20.1</td><td>I</td><td>Denver, CO</td></tr> <tr><td>KTVDDT2</td><td>20.2</td><td>I-M</td><td>Denver, CO</td></tr> <tr><td>KUSA</td><td>9.1</td><td>N</td><td>Denver, CO</td></tr> <tr><td>KUSADT2</td><td>9.2</td><td>N-M</td><td>Denver, CO</td></tr> <tr><td>KWGN</td><td>2.1</td><td>N</td><td>Denver, CO</td></tr> <tr><td>KWGN2</td><td>2.2</td><td>N-M</td><td>Denver, CO</td></tr> </tbody> </table>		1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION	KMGHDT3	7.3	N-M	Denver, CO	KRMA	18.1	E	Denver, CO	KRMADT2	18.2	E-M	Denver, CO	KRMADT33	18.3	E-M	Denver, CO	KTFD	14.1	I	Denver, CO	KTFDDT2	14.2	I-M	Denver, CO	KTFDDT3	14.3	I-M	Denver, CO	KTFDDT4	14.4	I-M	Denver, CO	KTVD	20.1	I	Denver, CO	KTVDDT2	20.2	I-M	Denver, CO	KUSA	9.1	N	Denver, CO	KUSADT2	9.2	N-M	Denver, CO	KWGN	2.1	N	Denver, CO	KWGN2	2.2	N-M	Denver, CO
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KTVD	20.1	I	Denver, CO																																																										
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KWGN2	2.2	N-M	Denver, CO																																																										

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Galva Cable Company, LLC	SYSTEM ID# 0
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K Gross Receipts	<p>GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file 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 located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">\$</td> <td style="text-align: right;">328,768.04</td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">(Amount of gross receipts)</td> </tr> </table>	\$	328,768.04	(Amount of gross receipts)	
\$	328,768.04					
(Amount of gross receipts)						
<p>IMPORTANT: You must complete a statement in space P concerning gross receipts.</p>						

L Copyright Royalty Fee	<p>COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.</p>
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	
<p>Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month accounting period is \$52.00</p> <p>Line 1. Royalty fee for accounting period</p> <p>Line 2. Interest charge. Enter the amount from line 4, space Q, page 8. 0.00</p> <p>Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2</p>	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
<p>1. Base amount under statutory formula \$ 263,800.00</p> <p>2. Enter amount of gross receipts from space K</p> <p>3. Subtract line 2 from line 1</p> <p>4. Enter the amount of gross receipts from space K</p> <p>5. Enter the amount from line 3</p> <p>6. Subtract line 5 from line 4</p> <p>7. Multiply line 6 by .005 (enter figure here)</p> <p>8. Interest charge. Enter the amount from line 4, space Q, page 8. 0.00</p> <p>9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8</p>	
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
<p>1. Enter the amount of gross receipts from space K \$ 328,768.04</p> <p>2. Base amount under statutory formula \$ 263,800.00</p> <p>3. Subtract line 2 from line 1 \$ 64,968.04</p> <p>4. Multiply line 3 by .01 \$ 649.68</p> <p>5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.00</p> <p>6. Interest charge. Enter the amount from line 4, space Q, page 8. 0.00</p> <p>7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 1,968.68</p>	

FILING FEE AND TOTAL REMITTANCE DUE			
Filing Fee and Total Remittance Due	<p>1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ 1,968.68</p> <p>2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 20.00</p> <p>3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:10%; text-align: center;">\$</td><td style="text-align: right;">1,988.68</td></tr></table></p> <p style="text-align: center; font-size: small;">Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights! See page i of the general instructions in the paper SA1-2 form for more information.</p>	\$	1,988.68
\$	1,988.68		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Galva Cable Company, LLC	SYSTEM ID# 0
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M Channels	<p>CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period.</p> <p>1. Enter the total number of channels on which the cable system carried television broadcast stations 192</p> <p>2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services 282</p>	
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N Individual to Be Contacted for Further Information	<p>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)</p> <p>Name <u>Sherry Murphy</u> Telephone <u>678-894-8933</u></p> <p>Address <u>3230 Peachtree Corners Circle, Ste H</u> <small>(Number, street, rural route, apartment, or suite number)</small></p> <p><u>Norcross, GA 30092</u> <small>(City, town, state, zip)</small></p> <p>Email <u>sherry@skitter.tv</u> Fax (optional) _____</p>	
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O Certification	<p>CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)</p> <ul style="list-style-type: none"> I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) <p><input type="checkbox"/> (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or</p> <p><input type="checkbox"/> (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or</p> <p><input checked="" type="checkbox"/> (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.</p> <ul style="list-style-type: none"> I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] <div style="text-align: center; margin-top: 20px;"> <div style="display: inline-block; border-bottom: 1px solid black; width: 200px; margin-left: 10px; text-align: center;"> <p style="margin: 0;">X</p> </div> <p style="margin: 5px 0 0 0;">Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)</p> </div> <p>Typed or printed name: <u>Steve Hughes</u></p> <p>Title: <u>Treasurer</u> <small>(Title of official position held in corporation or partnership)</small></p> <p>Date: <u>31 August 2017</u></p>	
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Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this 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 Office'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 filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Galva Cable Company, LLC

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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:

"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."

For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.

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?

NO

YES. Enter the total here and list the satellite carrier(s) below. \$

Name, Mailing Address fields

Name, Mailing Address fields

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Special Statement Concerning Gross Receipts Exclusion

INTEREST ASSESSMENT

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 located in the paper SA1-2 form.

Line 1-4 interest assessment calculation fields

Q

Interest Assessment

* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. 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 Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.

Owner, Address, ID number, First community served, Accounting period fields

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