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						
AMOUNT						
\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting	2017/2								
Period									
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submi a single statement of account and royalty fee payment covering the entire accounting perioa Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	Algona Municipal Utilities								
				06222620172					
				062226 2017/2					
	PO Box 10								
	Algona, IA, 50511-0010								
	INSTRUCTIONS: In line 1, give any business or trade names used to id	dentify the busines	ss and operation of the syste	em unless these					
С	names already appear in space B. In line 2, give the mailing address of								
System	1 IDENTIFICATION OF CABLE SYSTEM:								
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 (Number, street, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b					
Area Served	with all communities.								
	CITY OR TOWN	STATE							
First Community	Algona	IA							
	Below is a sample for reporting communities if you report multiple cha	innel line-ups in S STATE	pace G. CH LINE UP	SUB GRP#					
	Alda	MD	CH LINE UP	SUB GRP#					
Sample	Alliance	MD	В	2					
	Gering	MD	В	3					

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
			062226						
Algona Municipal Utilities			002220						
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.									
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hor below the identified city or town.	ne parks should be	e reported in pare	ntheses						
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-comm	d a subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
Algona	IA			First					
				Community					
				See instructions for					
				additional information on alphabetization.					
				on diphabetization.					
				Add rows as necessary.					

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Algona Municipal Utilities

SYSTEM ID#

062226

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOC	K 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RA	TE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	ı	RATE
Residential:							
 Service to first set 	193	\$	18.95	Expanded Basic	651	\$	60.95
 Service to additional set(s) 	NA			Digital Basic	663	\$	64.95
 FM radio (if separate rate) 	NA			Digital Basic Bulk	35	\$	4.00
Motel, hotel	See Notes			НВО	46	\$	16.00
Commercial				Cinemax	19	\$	14.00
Converter				Showtime/The Movie Channel	25	\$	14.00
 Residential 	359	\$	4.95	Starz/Encore	64	\$	14.00
 Non-residential 							
1	ļ	1			1		

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	RATE	CATEGORY OF SERVICE RATE
Continuing Services:		Installation: Non-residential		
Pay cable	NA	Motel, hotel	NA	
 Pay cable—add'l channel 	NA	Commercial	NA	
Fire protection	NA	• Pay cable	NA	
 Burglar protection 	NA	Pay cable-add'l channel	NA	
Installation: Residential		Fire protection	NA	
First set	NA	Burglar protection	NA	
 Additional set(s) 	NA	Other services:		
• FM radio (if separate rate)	NA	Reconnect	\$ 32.10	
Converter		Disconnect		
		Outlet relocation		
		 Move to new address 		

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Namo		
Algona Municip	oal Utilities				062226			
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 multi-								
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 ex-								
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	AA		_		
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			
KEYC-2	12.2	l	No		Mankato, MN			
WOI	5.1	N	No		Des Moines, IA	See instructions for		
KDSM	17.1	I	No		Des Moines, IA	additional information on alphabetization.		
KCCI	8.1	N	No		Des Moines, IA			
KCWI	23.1	I-M	No		Des Moines, IA			
KCCI (METV)	8.2	I-M	No		Des Moines, IA			
KTIN	21.1	E	No		Des Moines, IA	-		
KEYC	12.1	N	No		Mankato, MN			
WHO	13.1	N	No		Des Moines, IA	_		
KDMI (TCT TV)	19.1	<u> </u>	No	ļ	Des Moines, IA	-		
KTIN (IPTV WORL	21.2	E-M	No		Des Moines, IA	-		
KTIN (IPTV LEAR		E-M	No No		Des Moines, IA	-		
KDSM (Comet TV	17.2	I-M	No		Des Moines, IA	-		
WHO (Antenna T)	13.3	I-M	No No		Des Moines, IA	-		
WHO (lowa's Wea		I-M	No No		Des Moines, IA	-		
KCCI (My Des Mo		I-M	No No		Des Moines, IA	-		
KDSM (Charge TV)		I-M	No No		Des Moines, IA	-		
KDSM (TBD TV)	17.4	I-M	No		Des Moines, IA			

FURINI SAJE. PAGE 3.					CVCTEM ID#			
Algona Munici		/STEM:			SYSTEM ID# 062226	Name		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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 FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead 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 multiper the meaning of the Column 4: If the st planation of local servic Column 5: If you he cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column 6: Give the FCC.	CC rules, regular here in space only on a subs and also in spatformation concurrs. The station's call associated with a second associated with a cash of the second associated with a cash of the second as a cash of the seco	ations, or auth G—but do list titute basis. ace I, if the staterning substit sign. Do not read a streams must be the FCC has, WRC is Chane station. Whether the station. Whether the station acrommercial page (v) of the the local servage (v) of the esa' in column on during the care multicast stream or before Jumitter or an acrommercial content of the column or during the care multicast stream or before Jumitter or an acrommercial content etc. If the see page (v) ch station. For ons, if any, given	orizations: It it in space I (the strict of the space I (the strict of the space I) It it in space I (the strict of the space I) It is space I (the strict of the space I) It is space I (the space I) It is space I (e Special Statemed both on a substitus, see page (v) on program services er-the-air designal column 1 (list each the television statington, D.C. This interest of the television statington, D.C. This interest on the television statington, D.C. This interest of the television statington, D.C. This interest on the television statington, D.C. This interest of the television statington, D.C. This interest on the television stating	ent and Program Log)—if the ute basis and also on some other f the general instructions located is 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 stating the basis on which your tering "LAC" if your cable system the paper shade it is the subject testem or an association representing the type transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the to which the station is identifed.	Television		
Note: If you are utilizing	ig multiple chai		EL LINE-UP		criamie inte-up.			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OW		YSTEM:			SYSTEM ID#	Name
Algona Munic	ipal Utilities				062226	
PRIMARY TRANSMIT	TERS: TELEVISION	ON				
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program by Substitute Pasis basis under specific F Do not list the station was carried List the station here basis. For further in the paper SA31 Column 1: List each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give tilts community of licer on which your cable Column 3: Indicateducational station, by (for independent multifor the meaning of the Column 4: If the splanation of local ser Column 5: If you cable system carried the distant star For the retransmis of a written agreement the cable system and tion "E" (exempt). Fo	a G, identify ever system during the ations in effect of 76.61(e)(2) and (asis, as explaines Stations: With FCC rules, regular on here in space of only on a subset, and also in spainformation conform. The ather in space of only on a subset, and also in spainformation conform. The ather in space of only on a subset, and also in spainformation conform. The ather in space of a station's call in associated with FA-2". Simulcast the channel number in each case to be entering the letticast), "E" (for notes terms, see station is outside vice area, see phave entered "Y the distant station on a part-tipe ission of a distant in the entered into of a primary transmit in the entered into of a primary transmit in simulcasts, als	y television st he accounting n June 24, 199 (4), or 76.63 (r d in the next respect to any ations, or auth G—but do lis- titute basis. ace I, if the sta- cerning substiff sign. Do not r h a station acc streams must ber the FCC h e, WRC is Chi- ne station. whether the sta- teter "N" (for no oncommercia page (v) of the the local servage (v) of the es" in column on during the a me basis beca- t multicast stre- n or before Ju- mitter or an a- o enter "E". If	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried the basis station to the period of the reported in the station is a network of the station is a network of the station is a network of the stational of th	(1) stations carried to carriage of cert 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitute, see page (v) of the program service to the television statistic of	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
explanation of these	three categories	, see page (v)	of the general	instructions locate	ed in the paper SA3 form. y to which the station is licensed by the	
FCC. For Mexican or Note: If you are utiliz				•	n which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AC		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FURINI SAJE. PAGE 3.					0)/07514 ID#	
Algona Munici		/STEM:			SYSTEM ID# 062226	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the consistence of	he accounting n June 24, 198 4), or 76.63 (r d in the next p	period, except 31, permitting the eferring to 76.6 paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
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 ead 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 servic 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 explanation of these the Column 6: Give the	CC rules, regular here in space only on a subs and also in spation and also in spation and associated with associated with a section and associated with a section and a section are a section as a section as a section and a section are a section as a section and a section a part-tilision of a distant the entered into a primary trans simulcasts, also a canadian station and a canadian station as a canadian station and a canadian and a canadian and a canadian station and a canadian station and a canadian and a canadian station and a canadian a canadian and a canadia	ations, or auth G—but do list titute basis. ace I, if the staterning substit sign. Do not read a station acceptate a station acceptate a station. The station acceptate a station acceptate a station. The station acceptate a station acceptate a station. The station acceptate a station are station. The station are basis because a multicast station are basis because a multicast station are station. The station are station. For one, if any, given as a station. For one, if any, given a station are station.	orizations: it in space I (the tion was carried ute basis station eport origination cording to its own be reported in coas assigned to fannel 4 in Wash ation is a netwoetwork), "N-M" (if educational), of egeneral instructive area, (i.e. "orgeneral instructive, you must corraccounting period assigned to face as a face of lack of a seam that is not some 30, 2009, be association repression of the general in trush	e Special Statemed both on a substitute, see page (v) or a program services er-the-air designal column 1 (list each the television statifington, D.C. This light of the television statification in the television state of the television statification in the television state of the television sta	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter which the station is identified.	Television
Troto: II you are atilizii			EL LINE-UP		onamormio 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.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Algona Municip	pal Utilities				062226	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
Algona Municipal Utilities 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 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 independe						
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	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	
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FORM SA3E. PAGE 3.						Τ
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
Algona Municip	oal Utilities				062226	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
Algona Municipal Utilities 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))]; 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 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 ind						
FCC. For Mexican or C	Canadian statio	ns, if any, give	e the name of the	ne community with	n which the station is identifed.	
Note: If you are utilizin	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
	T	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	
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FURM SAJE. PAGE 3.					CVCTEM ID#			
Algona Munici		/STEM:			SYSTEM ID# 062226	Name		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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								
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Note: If you are utilizing	ig multiple chai		EL LINE-UP		criamie inte-up.			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Algona Municip	oal Utilities				062226	rano
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
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	G, identify even by yetem during the lons in effect or 6.61(e)(2) and (sis, as explaine stations: With a CC rules, regular here in space only on a substand also in spatformation concern. In station's call associated with each case with each each each each each each each eac	y television standard and accounting and June 24, 1984), or 76.63 (rd d in the next prespect to any ations, or auth G—but do list titute basis. In the standard are station account as the station account as the station. Whether the station account are station. Whether the station account are station. Whether the station are station. Whether the station are station. Whether the station are station are station. Whether the station are station. Whether the station are station. Whether the station are station are basis becard and the station are basis becard multicast street or or before Jumitter or an associated are page (v) are the station are station are station are basis becard multicast street or are stationary are s	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the stion was carried ute basis station eport origination coording to its own be reported in comparation in a network), "N-M" (I educational), on a general instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, or lack of a sam that is not some 30, 2009, be a sociation repression of the general in the of the general in the control of the general of the control of the general in the control of the general of of t	(1) stations carried et carriage of cert 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitute, see page (v) of the seep	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing		. ,		•	n which the station is identifed. channel line-up.	
,	<u> </u>	•	EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.					2/2====	
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
Algona Municip	oal Utilities				062226	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
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Note: If you are utilizing	.9		·		опання што ср.	
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	

FURM SAJE. PAGE 3.					CVCTEM ID#			
Algona Munici		/STEM:			SYSTEM ID# 062226	Name		
PRIMARY TRANSMITTI	ERS: TELEVISIO)N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
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Note: If you are utilizing	ig multiple char		EL LINE-UP		cnannei iine-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.					0//07514 ID#	
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
Algona Munici	pai Utilities				062226	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
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 76.65/9(d)2) and (4), 76.61(e)(2) and (4), 07.66.61(e)(2) and (4), 07.66.61(e)(2) and (4), 07.66.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational in uniticast) in the paper SA3 form. Co						
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		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.					0//07514 ID#	
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
Algona Munici	pai Utilities				062226	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute 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), "F(for independent), "I-M" (for independent multicast), "E" (for noncommercial educational station, by						
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LEGAL NAME OF OWN	JER OF CARLES	YSTEM:			SYSTEM ID#	
Algona Municip		TOTEWI.			062226	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
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 Substitute Pasis Subasis 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 ead each multicast stream cast stream as "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 splanation of local service Column 5: If you heable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and station of the column system carried the cable system and station of the	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spartformation concurr. The station's call associated with associated with associated with a channel number of the concurrence of the concurre	y television standard by television standard by television standard by television standard by televisions, or authorized by the state of the state o	g period, except 81, permitting the referring to 76.6 paragraph. It is a solution with a tion was carried to the total basis station was carried to the total basis station report origination cording to its own the reported in contract as assigned to the total basis station is a netwo etwork), "N-M" (I educational), one general instruction as a sample of the contract of the total contract of the	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each of the carried column 1 (list each of the carried column 1). This was tattion, an indefer network multicur "E-M" (for noncontext of the column 1), enter "Ye ions located in the column 15, so the carried column 15, so the column 15, so the carried column 15, so the	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-	G Primary Transmitters: Television
explanation of these the Column 6: Give the	nree categories e location of ea Canadian static	, see page (v) ch station. Fo ns, if any, giv	of the general in U.S. stations, lead the name of the	instructions locate list the community ne community with	ther basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed. It channel line-up.	
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

21/2
SYSTEM ID#
062226
ations) under ons ed on a Primary Transmitters: Television e other eated Identify Ilti- mple e-air in annel mmercial -M" east). ex- our stem subject senting gna- urther sed by the d.
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FURINI SAJE. PAGE 3.					0)/07514 ID#	
Algona Munici		/STEM:			SYSTEM ID# 062226	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the consistence of	he accounting n June 24, 198 4), or 76.63 (r d in the next p	period, except 31, permitting the eferring to 76.6 paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
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Note: If you are utilizing	Ig multiple chai		EL LINE-UP		спаппетше-ир.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	JER OF CARLES	YSTEM:			SYSTEM ID#	
Algona Municip		TOTEWI.			062226	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
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 Substitute Pasis Subasis 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 ead each multicast stream cast stream as "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 splanation of local service Column 5: If you heable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and station of the column system carried the cable system and station of the	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spartformation concurr. The station's call associated with associated with associated with a channel number of the concurrence of the concurre	y television standard by television standard by television standard by television standard by televisions, or authorized by the state of the state o	g period, except 81, permitting the referring to 76.6 paragraph. It is a solution with a tion was carried to the total basis station was carried to the total basis station report origination cording to its own the reported in contract as assigned to the total basis station is a netwo etwork), "N-M" (I educational), one general instruction as a sample of the contract of the total contract of the	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each of the carried column 1 (list each of the carried column 1). This was tattion, an indefer network multicur "E-M" (for noncontext of the column 1), enter "Ye ions located in the column 15, so the carried column 15, so the column 15, so the carried column 15, so the	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, e the name of th	list the community ne community with	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are united	ig manipic chai	• •	EL LINE-UP		ortainer into 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.					
	WNER OF CABLE S	YSTEM:			SYSTEM ID#	Name
Algona Muni	cipal Utilities				062226	
PRIMARY TRANSMI	TTERS: TELEVISION	ON				
In General: In spac carried by your cab FCC rules and regu 76.59(d)(2) and (4), substitute program Substitute Basi basis under specife Do not list the stat station was carri List the station he basis. For furthe in the paper SA3 Column 1: List e each multicast strea cast stream as "WETA-simulcast). Column 2: Give its community of lic on which your cable Column 3: Indic educational station, (for independent m For the meaning of Column 5: If you cable system carried the distant s For the retransm of a written agreem the cable system ar tion "E" (exempt). F explanation of these	the G, identify ever le system during to a lations in effect or a, 76.61(e)(2) and (basis, as explaine is Stations : With a FCC rules, regulation here in space led only on a substre, and also in spar information conditions as form. Beach station's call am associated with ETA-2". Simulcast at the channel numbers. For example experience system carried the laticast, "E" (for not these terms, see a station is outside ervice area, see put have entered "Y and the distant static station on a part-time insision of a distant ent entered into ond a primary transfor simulcasts, alse three categories	y television st he accounting in June 24, 196 (4), or 76.63 (respect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute basis. ace I, if the stateming substitute basis. ace I, if the stateming substitute basis bear the FCC he, WRC is Chane station. Whether the statem "N" (for moncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis beat multicast streen or before Jumitter or an acolumn or on the control of the	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations to rizations: to the station was carried that the same station was carried that the same station was carried to the period of the reported in the station is a network that is network that is network that is not same 30, 2009, be secondation repreyou carried the to of the general	in (1) stations carried e carriage of cert (1(e)(2) and (4))]; is a carried by your of the Special Statem of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statington, D.C. This pork station, an indefer network multiple or "E-M" (for noncontrol located in the interest of the program of the column 5, and Indicate by enactivated channel subject to a royalty exemple of the prima channel on any of instructions located in any of instructions located in the interest of the primal channel on any of instructions located in a	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 ed in the paper SA3 form.	G Primary Transmitters: Television
FCC. For Mexican	or Canadian statio	ons, if any, giv	e the name of the	ne community with	y to which the station is licensed by the n which the station is identifed.	
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURM SAJE. PAGE 3.					CVCTEM ID#			
Algona Munici		/STEM:			SYSTEM ID# 062226	Name		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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 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 ead 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 servic Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	CC rules, regular here in space only on a subs and also in spatioformation concurr. The station's call associated with a cash case where a cash is entered "Ye in each case where a cash is entered "Ye in each case where a cash is entered "Ye in each case where a cash is entered "Ye in each case where a cash is entered into one a part-tilition of a distant station is entered into one a primary trans is included the casts, also incree categories is location of each canadian station.	ations, or auth G—but do list titute basis. ace I, if the staterning substit sign. Do not read a station acceptation and streams must be the FCC has, WRC is Chane station. Whether the station acceptage (v) of the the local servage (v) of the esa' in column and uring the care multicast stream or before Jumitter or an acceptage (v) ch station. Foons, if any, given and the station.	orizations: It it in space I (the ation was carried tute basis station report origination or be reported in cording to its over the annel 4 in Wash reation is a network etwork), "N-M" (I educational), one general instructional educational instructional educational instructional educational ed	e Special Statemed both on a substitus, see page (v) on program services er-the-air designal column 1 (list each the television statington, D.C. This interest of the television statington, D.C. This interest on the television statington, D.C. This interest of the television statington, D.C. This interest on the television statington, D.C. This interest of the television statington, D.C. This interest on the television stating	ent and Program Log)—if the ute basis and also on some other f the general instructions located is 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 stating the basis on which your tering "LAC" if your cable system the paper shade it is the subject testem or an association representing the type transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the to which the station is identifed.	Television		
, , , , , , , , , , , , , , , , , , , ,			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			

FORM SA3E. PAGE 3.										
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name				
Algona Municip	oal Utilities				062226					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations)										
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 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 stream smust 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) or "E-M" (for noncommercial educational) or "E-										
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 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	AS						
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
Algona Munici	pal Utilities				062226	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
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 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 each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi-For the meaning of the Column 5: If you h cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give	G, identify even- system during to ions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular in here in space only on a subs and also in spa information concorn. ch station's call associated with A-2". Simulcast e channel numb ise. For example system carried the in each case way entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y icion on a part-tiu ision of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea	y television standard accounting in June 24, 194, or 76.63 (rd in the next) respect 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. Whether the station whether the station. Whether the station account in a station account in a station account in a station. Whether the station. Whether the station in columnity and columnity and the station in during the station in during the station or before Junitter or an account in a station. For example, (v) of the station in the station in the station in the station. For example, (v) of the station in the station. For example, (v) of the station.	period, except 81, permitting the referring to 76.6 paragraph. A distant stations orizations: tit in space I (the stion was carried the basis station to the period of the reported in the referring to the reported in the re	(1) stations carried ec carriage of cert 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitute, see page (v) of the program service er-the-air designation of the television statistical program of the television of the television society of the television society of the television of television of the tel	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ig multiple char	inei iine-ups,	use a separate	space G for each	channel line-up.	
		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	
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name		
Algona Munici	pal Utilities				062226	rano		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) cartain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independ								
		. ,		•				
,	<u> </u>	•	EL LINE-UP					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	†				<u> </u>			

FURM SAJE. PAGE 3.					CVCTEM ID#			
LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON						
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the constant of	he accounting n June 24, 196 (4), or 76.63 (red in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie e 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	G Primary Transmitters: Television		
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: 1 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. 1 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. 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-N" (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 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 ac								
Note: If you are utilizing	ig multiple chai		EL LINE-UP		спапнен ште-ир.			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.					2)/2==== //					
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name				
Algona Municipal Utilities 062226 PRIMARY TRANSMITTERS: TELEVISION										
PRIMARY TRANSMITT	ERS: TELEVISIO	ON								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e										
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>		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					

ACCOUNTING PERIOD: 2017/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062226 **Algona Municipal Utilities** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION **KLGA** FΜ Algona, IA KLGZ FΜ Algona, IA

FORM SA3E. PAGE 5.								ACCOUNTING	PERIOD: 2017/2
LEGAL NAME OF OWNER OF Algona Municipal Utili		FEM:					S	YSTEM ID# 062226	Name
SUBSTITUTE CARRIAGE In General: In space I, ident					n that your	cable	e system o	earried on a	ı
substitute basis during the alexplanation of the programm 1. SPECIAL STATEMENT	ccounting pening that mus	eriod, under spe st be included in	ecific present and former FC n this log, see page (v) of the	C rules, regula	ations, or a	author	izations. F	or a further	Substitute Carriage:
During the accounting per broadcast by a distant star		r cable system	carry, on a substitute basi	s, any nonne	twork tele			XNo	Special Statement and Program Log
Note: If your answer is "No log in block 2.			ge blank. If your answer is '	Yes," you mu	ust comple	ete the	e program	1	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gir Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please a of every nor distant statigulations, o tion. Do no Lucy" or "NE m was broad sign of the sadcast statication and day we "5/7." es when the Example: a er "R" if the and regulation or gramming	am on a separa attach addition nnetwork televion and that your authorization t use general of BA Basketball: dcast live, ente station broadca on's location (thons, if any, the when your syste a substitute pro a program carri	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 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". o." m. station is lice station is iderorogram. Use cable system. 5 p.m. to 6:2 mming that y center the let	during the ramming one located List special sp	e according the according to the accordi	counting other static e paper ogram C or, in the mont accurately d be required ed pro	h ,	
S	SUBSTITUT	E PROGRAM	1		EN SUBS [*] IAGE OC			7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY	6.	TIME —		DELETION	
						_			
						-=-			
						-=-			

ACCOUNTING PERIOD: 2017/2 FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062226 Algona Municipal Utilities PART-TIME CARRIAGE LOG J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#			
Alg	ona Municipal Utilities		062226	Name		
Install a all a (as pag	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount amounts (gross receipts) paid to your cable system by subscribers for the system's secidentified in space E) during the accounting period. For a further explanation of how to de (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission compute this amount	service i, see 640,877.54	K Gross Receipts		
• Cor • Cor • If your fee • If you	TRIGHT ROYALTY FEE actions: 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 a 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.			Copyright Royalty Fee		
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should book 3 below.	e entered on line 1 o	of			
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered on line 2 in I	block			
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered on lir	ne			
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.	e is 1.064 percent of	f the			
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$	640,877.54			
	This is your minimum fee.	\$	6,818.94			
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 colui "Yes" in this block. • Did your cable system carry any distant television stations during the accounting per Yes—Complete the DSE schedule.	nn 4, you must chec	ck .			
Block 3	Line 1. BASE RATE FEE : Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$	-			
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00			
	Line 3. Add lines 1 and 2 and enter here	\$	-			
Block 4	Line 1. 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	\$	6,818.94	Cable systems		
	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, ente zero.	r	0.00	submitting additional deposits under		
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing		
	Line 4. FILING FEE					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	7,543.94	appropriate form for submitting the additional fees.		
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the				

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 062226								
	Algona Municipal Utilities	002220								
M Channels	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.									
Onameis	1. Enter the total number of channels on which the cable system carried television broadcast stations									
	Enter the total number of activated channels on which the cable system carried television broadcast stations									
	and nonbroadcast services	244								
N Individual to Be Contacted										
for Further Information	Name Robert M. Jennings Telephone 519	5-295-3584								
	Address 104 W. Call St, PO Box 10 (Number, street, rural route, apartment, or suite number)									
	Algona, IA, 50511 (City, town, state, zip)									
	Email bjennings@netamu.com Fax (optional) (515) 295-33	364								
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regular	tions.								
O 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 identified in line 1 of space B;	or								
	X (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or	stem as identified								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owne in line 1 of space B.	r of the cable system								
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained have 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)]	nerein								
	/s/ Robert M. Jennings									
	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 cursor in the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus co									
	Typed or printed name: Robert M. Jennings	g.								
	Title: Marketing Director (Title of official position held in corporation or partnership)									
	Date: February 28, 2018									

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SY	STEM ID# 062226	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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the bas service of providing secondary transmissions of primary broadcast transmitters, the system shall not includ scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 11 For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in t paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmiss made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below. \$	fol- sic e sub- 9."	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpay For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	rge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance processing Contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	olease	
** 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 or filling.	iginal	
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2017/2

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 carried 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 the character and a contract of the contract of the party of	

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 ε 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	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	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

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: 2017/2

DSE SCHEDULE. PAG							
1	LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226						
•							
	SUM OF DSEs OF CATEGORY "O" STATIONS: • Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule.						
					0.00		
	Enter the sum here and in line 1 or part 3 or this schedule.				0.00		
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 inde	pendent station, give the DS	E as "1.0"; for e	each network or noncom-		
of DSEs for	mercial educational station, gi		,				
Category "O"	CATEGORY "O" STATIONS: DSEs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Add rows as							
necessary.							
Remember to copy all formula into new							
rows.							
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]				

Name	LEGAL NAME OF OV	WNER OF CABLE SYSTEM:						SYSTEM ID# 062226
	Algona Munic	ipai Utilities						062226
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should co Column 3: Column 4: be carried out a Column 5: give the type-va Column 6:	the call sign of all dista For each station, give the prespond with the information. For each station, give the Divide the figure in colu- at least to the third decir For each independent s	he number of hours y mation given in space he total number of hours 2 by the figure in mal point. This is the station, give the "type olumn 4 by the figure	our cable systeme J. Calculate onlours that the station column 3, and g "basis of carriagevalue" as "1.0." in column 5, and	n carried the stal y one DSE for e on broadcast ov- ive the result in a value" for the s For each networ	tion during the accountion during the accountion. The air during the accountion decimals in column 4. Itation. The arroncommercial eccounties are accounted to a column 6. Round to	counting period. This figure must ducational station, no less than the	
Capacity		C	ATEGORY LAC	STATIONS: 0	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS OF	JMBER F HOURS FATION I AIR	4. BASIS OF CARRIAG VALUE			SE
			÷	=		x	=	
			÷	 =		x x	<u>-</u>	
			÷	=		x	=	
			÷	=		<u>x</u>	=	
			÷ ÷	=		x x	=	
			÷	=		x	=	
	Add the DSEs of	OF CATEGORY LAC Soft each station. In here and in line 2 of page 2.		,	▶	0.0	00	
Computation of DSEs for Substitute-Basis Stations	Was carried bettions in effect Broadcast on space I). Column 2: Four option. To Column 3: Ecolumn 4: D	the call sign of each state by your system in substate on October 19, 1976 (see or more live, nonnetwore each station give the his figure should correst the number of days ivide the figure in columnis is the station's DSE	itution for a program as shown by the lette ork programs during to number of live, nonrespond with the informs in the calendar year an 2 by the figure in compared to the calendar year and 2 by the figure in compared to the calendar year and 2 by the figure in compared to the calendar year and 2 by the figure in compared to the calendar year and 2 by the figure in compared to the calendar year and 2 by the figure in compared to the calendar year.	that your system or "P" in column 7 hat optional carria network programs nation in space I. or 365, except in a column 3, and give	was permitted to of space I); and ge (as shown by carried in substates leap year.	o delete under FCC rull the word "Yes" in colun itution for programs th	nn 2 of nat were deleted ess than the third	orm).
			BSTITUTE-BASI		1			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷	•				÷	=
		÷					÷	=
		÷	=				÷	=
		÷ -	=				÷ <u> </u>	=
	Add the DSEs of	OF SUBSTITUTE-BASI f each station. n here and in line 3 of pa		,	▶	0.0	00	
5 Total Number of DSEs	number of DSEs and 1. Number of I	R OF DSEs: Give the am applicable to your system DSEs from part 2 ● DSEs from part 3 ● DSEs from part 4 ●		in parts 2, 3, and 4	4 of this schedule	e and add them to provi	0.00 0.00 0.00	
	TOTAL NUMBER	OF DSEs					<u>_</u>	0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2017/2

LEGAL NAME OF C		SYSTEM:					S	YSTEM ID#	Name -			
Algona Munici	ipal Utilities							062226	Name			
Instructions: Bloc	ck A must be com	pleted.										
If your answer if schedule.			•	7 of the DSE sche	edule blank a	nd complete pa	art 8, (page 16) of	the	6			
If your answer if '	"No," complete blo			ELEVISION M	ARKETS				Computation of			
Is the cable syster effect on June 24,						ection 76.5 of	FCC rules and re	gulations in	3.75 Fee			
Yes—Com	plete part 8 of the	schedule—[OO NOT COM	PLETE THE REMA	AINDER OF I	PART 6 AND 7	Ť					
X No—Comp	lete blocks B and	C below.										
	BLOCK B: CARRIAGE OF PERMITTED DSEs											
Column 1: CALL SIGN	, , , , , , , , , , , , , , , , , , , ,											
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursus *F A station pre	ed pursuant to a defined al education of a station (76. or DSE schedant to individually carried JHF station w	elations cited by to the FCC mand in 76.5(kk) (7 all station [76.565) (see paragulule). Use walver of Fed on a part-tin/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) e3(a) referrint bstitution of g	n June 24, 198 a), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s une 25, 198	76.63(a) referring 76.61(e)(1 stations in the					
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of				
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE				
								0.00				
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE							
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			11					
Line 2: Enter the	sum of permitte	d DSEs fro	m block B ab	ove				-				
Line 3: Subtract (If zero, le				r of DSEs subject 7 of this schedu		rate.	(b-	0.00				
Line 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent			
Line 5: Multiply li	ne 4 by 0.0375	and enter so	um here						partially permited/ partially			
Line 6: Enter tota	al number of DSI	Es from line	3				Х	-	nonpermitted carriage? If yes, see part			
Line 7: Multiply li	ne 6 by line 5 ar	nd enter her	e and on line	2. block 3. spac	e L (nage 7)			0.00	9 instructions.			

<u>'</u>	LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities 062226										
		,	JED)	(CONTINU	ION MARKETS		BLOCK	T '			
6	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN		
Computation 3.75 Fee											
	•••••••										
	••••••										
1											

Name	LEGAL NAME OF OWN Algona Municip		SYSTEM:						S	**************************************				
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FOA—Part-time spr 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Comparin block	nstructions: 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. MPORTANT: 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.												
		PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1 CALL 2 PRIOR 3 ACCOUNTING 4 BASIS OF 5 PRESENT 6 PERMITTED												
	1. CALL	1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE PERIOD CARRIAGE DSE DSE												
	SIGN													
Computation of the Syndicated Exclusivity	-	"Yes," comple	te blocks B and C ocks B and C blan	k and complete		art 8 of the DSE sched								
Surcharge	Is any portion of the or	cable system wi	ithin a top 100 majo	or television mar	rket	t as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?				
	Yes—Complete	blocks B and	C .			No—Proceed to	part 8							
					7									
	BLOCK B: Ca	arriage of VHF	/Grade B Contour	Stations		BLOCK	C: Compu	utation of Exem	pt DSE	3				
	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		n its appropriate peri art 8.	mitted DSE		Yes—List each st No—Enter zero a			ate permi	tted DSE				
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN_	DSE				
		 												
		 												
		<u> </u>	TOTAL DSEs	0.00			<u> </u>	TOTAL DS	SEs	0.00				

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities	SYSTEM ID# 062226	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	640,877.54	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the 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? X Yes—Complete part 9 of this schedule. 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.		
	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? X Yes—Complete part 9 of this schedule. 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	_		TEM ID#
-	- 4	Algona Municipal Utilities	062226
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _ \$	
Surcharge		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	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below it. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
		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?	
		X Yes—Complete part 9 of this schedule. 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) ▶ _\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure 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 base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2017/2

	E OF OWNER OF CABLE SYSTEM: Municipal Utilities	SYSTEM ID# 062226	Name
Section If t	he figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	the righte in Section 2 is more than 4.000 , compute your base rate lee fiele and leave section 3 blank.		8
Α	t. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$		0
E	3. Enter 0.00701 of gross receipts (the amount in section 1)		Computation of
c	C. Multiply line B by 3.000 and enter here >		Base Rate Fee
	0. Enter 0.00330 of gross receipts (the amount in section 1)		
E	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 \$		
G	6. 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	
IMPORT.		. 1 . 2 1 1 1	
	NT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca e reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels		9
	al: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee om subscribers located within the station's local service area, from your system's total gross receipts. To take a		Computation
•	you must:	avantage of this	of Base Rate Fee
station or DSEs and	ide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine I the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for dd up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
also comp	any portion of your cable system is located within the top 100 television market and the station is not exempt in poute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be ole system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
Step 1: F	lentify a Subscriber Group for Partially Distant Stations or each community served, determine the local service area of each wholly distant and each partially distant stat that community.	tion you	for Partially Permitted Stations
outside th	or each wholly distant and each partially distant station you carried, determine which of your subscribers were lo e station's local service area. A subscriber located outside the local service area of a station is distant to that statoken, the station is distant to the subscriber.)		
subscribe	ivide your subscribers into subscriber groups according to the complement of stations to which they are distant. r group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note th II have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Computir groups.	ng the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
In each se	ection:		
Give the	the communities/areas represented by each subscriber group. call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all rs in the group.	of the	
• lf:	retorn is located whelly outside all major and amellor television markets, sive each staticals DSE as well as the	n norte 2 2	
and 4 of the	stem is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i nis schedule; or, tion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b		
	of this schedule.	iook D,	
	DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	e gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general i aper SA3 form.	nstructions	
page. In a	e a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that group's complement of stations and total gross receipts from the subscribers in that group). You do not neeculations on the form.	at is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062226 **Algona Municipal Utilities** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWN Algona Municipa		LE SYSTEM:				S	YSTEM ID# 062226	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP			SUBSCRIBER GRO	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
					······			Exclusivity
								Surcharge
								for
								Partially Distant
		-	····					Stations
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	DUP		FOURTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····			-				
		-	····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
C.000 Moocipio miliu	Стоир		<u> </u>	Total Receipts 1 00	Group	<u>*</u>	3.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add			criber group	as shown in the boxe	s above.	e	0.00	
Enter here and in bloo	k 3, line 1,	space L (page 7)				\$	0.00	

	EGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226									
- I	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCE	RIBER GROUP				
	FIFTH	SUBSCRIBER GRO	UP		SIXTI	SUBSCRIBER GRO	JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	_		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIN	DOL	Base Rate Fee		
	••••						•••••	and		
								Syndicated		
								Exclusivity		
		_						Surcharge		
								for		
								Partially Distant		
			····					Stations		
			····							
								I		
								I		
								I		
								I		
								I		
Total DSEs			0.00	Total DSEs			0.00	I		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00			
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP	I		
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		_						I		
			···					I		
			···					I		
			···					I		
								I		
		_						I		
		_						I		
								I		
								I		
		_						I		
								I		
								I		
								I		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	Group	<u>\$</u>	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00			
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226										
E	BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP					
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	9			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
07.22 0.011	202	07.22 0.0.1	202	37.EE 373.Y	202	07.22 0.0.1	332	Base Rate Fee			
								and			
								Syndicated			
								Exclusivity			
								Surcharge			
								for			
								Partially Distant			
	····	_	·····					Stations			
	····							Gtations			
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				
E	ELEVENTH	SUBSCRIBER GRO	OUP		TWELVTH	SUBSCRIBER GROU	JP				
COMMUNITY/ AREA			0	COMMUNITY/ ARE							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	····		····		•••••						
			•••••								
Total DSEs			0.00	Total DSEs	·		0.00				
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00				
,	•				r						
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	es above.	\$					

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 1gona Municipal Utilities 062226										
				TE FEES FOR EAC							
	IRTEENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	9			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
				0.122				Base Rate Fe			
								and			
								Syndicated			
								Exclusivity			
								Surcharge			
								for			
								Partially			
						-		Distant Stations			
								Stations			
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts First (Groun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00				
orodo redesplo i not v	этоир	<u> </u>	0.00	Groos recorpto occ	ond Group	•	0.00				
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00				
F	IFTEENTH	SUBSCRIBER GRO	DUP			SUBSCRIBER GROU	JP				
COMMUNITY/ AREA			0	COMMUNITY/ ARE							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
			·····								
	••••		·····		•••••		····				
Total DSEs		1	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 the Enter here and in blood			scriber group	as shown in the boxe	es above.	\$					

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226									
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSC	RIBER GROUP				
SEVEN	TEENTH	SUBSCRIBER GRO		E	IGHTEENTH	SUBSCRIBER GROU	JP	0		
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		
										
		-	<u></u>							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	roup	\$	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			
NIN	NTEENTH	SUBSCRIBER GRO	UP		TWENTIETH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ 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 Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00			
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$				

LEGAL NAME OF OWN Algona Municipa		LE SYSTEM:				S	YSTEM ID# 062226	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
TWE	NTY-FIRST	SUBSCRIBER GRO	OUP	H		SUBSCRIBER GROU	JP	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
								Exclusivity
								Surcharge
		_				-		for
								Partially
								Distant Stations
	····		·····					Stations
						-		
	····	-						
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWEN	ITY-THIRD	SUBSCRIBER GRO	OUP	TWEN	ITY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
	····		·····					
		-						
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								Name
				ATE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	D	
COMMUNITY/ AREA	T-FIFTH	SUBSCRIBER GROU	0	COMMUNITY/ AREA	<u> </u>	30B3CRIBER GROU	0	9 Commutation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
						-		and
								Syndicated Exclusivity
						-	<u></u>	Surcharge
								for
	-					-		Partially
		-				-		Distant Stations
						-		Stations
Total DSEs	'		0.00	Total DSEs	*		0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Secon	ıd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWENTY-S	EVENTH	SUBSCRIBER GROU	JP	TWENT	Y-EIGHTH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	***************************************		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
				-				
		-						
					<u>.</u>			
						-		
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	ı Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP		
TWENT	Y-NINTH	SUBSCRIBER GRO			THIRTIETH	SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-				-		Syndicated
								Exclusivity Surcharge
		-			····			for
		-						Partially
								Distant
								Stations
Total DSEs	<u> </u>		0.00	Total DSEs	_	11	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
·					·			
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
	Y-FIRST	SUBSCRIBER GRO		11		SUBSCRIBER GROU		
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 G	roup	\$	0.00	Gross Receipts Four	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	TY-THIRD	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	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
								l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	l
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	İ
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIR	RTY-FIFTH	SUBSCRIBER GRO	UP	TH	IRTY-SIXTH	I SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
								l
								l
		_						l
								l
		_						l
								l
						-		l
								l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	l
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: Algona Municipal Utilities SYSTEM ID# 062226								Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
THIRTY-	SEVENTH	SUBSCRIBER GROU	JP	††		I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIV	DOL	CALL SIGIV	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
	<u> </u>							Stations
					····			
								l
								l
								l
								l
			<u> </u>					l
Total DSEs			0.00	Total DSEs		-	0.00	l
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	İ
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIR	TY-NINTH	SUBSCRIBER GROU	JP		FORTIETH	SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
								l
					<u></u>			l
	<u> </u>							l
	<u></u>							l
	•							l
								l
								l
							<u></u>	l
	<u> </u>							l
	<u> </u>							l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	l
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								Name
BL	OCK A: 0	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
FOR ⁻	TY-FIRST	SUBSCRIBER GRO		FOR	TY-SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			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			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	Y-THIRD	SUBSCRIBER GRO	UP	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···					
		-						
		-						
		-						
			···					
T			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

Name	YSTEM ID# 062226	S				LE SYSTEM:		LEGAL NAME OF OWNE Algona Municipal	
				TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL	
9	JP	SUBSCRIBER GROU	TY-SIXTH	FOF		SUBSCRIBER GRO	TY-FIFTH	FOR	
Computation	0			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									
for		-							
Partially									
Distant		_							
Stations									
	0.00			Total DSEs	0.00			Total DSEs	
	0.00					Gross Receipts First Group \$ 0.00			
	0.00	\$	Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gr	
	JP	SUBSCRIBER GROU	-EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	FORTY-S	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
	<u></u>								
		_							
	<u></u>								
		_							
							l I		
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								
				TE FEES FOR EAC				
	Y-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						-		Exclusivity
								Surcharge for
		-						Partially
								Distant
								Stations
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	Y-FIRST	SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
			<u> </u>			-		
						-		
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
	roup	¢	0.00		th Croup	ė.	0.00	
Gross Receipts Third G	ισαρ		3.00	Gross Receipts Four	ar Group	<u> </u>	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

Algona Municipal Utiliti	ABLE SYSTEM: es				S	YSTEM ID# 062226	Name
BLOCK	A: COMPUTATION C	F BASE RA					
	RD SUBSCRIBER GRO		ii		SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	Computat
CALL SIGN DSE		DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
							and
							Syndicate
			-				Exclusivi Surcharç
							for
							Partially
							Distant
							Stations
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Gross Receipts First Group \$ 0.00					· <u>·</u>		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIFTY-FIF	TH SUBSCRIBER GRO	OUP	ı	FIFTY-SIXTH	I SUBSCRIBER GROU	JP	
	TH SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	
			li		SUBSCRIBER GROU		
COMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	
CALL SIGN DSE		0	COMMUNITY/ AREA	Α		0	
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	
CALL SIGN DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA	DSE	CALL SIGN	0 DSE	
COMMUNITY/ AREA	CALL SIGN	0 DSE	COMMUNITY/ AREA	DSE THE Group	CALL SIGN	0 DSE	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								Name
				TE FEES FOR EAC				
FIFTY-S	SEVENTH	SUBSCRIBER GRO		FI	FTY-EIGHTH	SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ ARE			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
			···			-		
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFT	TY-NINTH	SUBSCRIBER GRO	UP			SUBSCRIBER GROU	JP	
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 G	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 th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
SIX	TY-FIRST	SUBSCRIBER GRO	JP	SIXT	Y-SECONE	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIV	DOL	Base Rate Fee
			-					and
								Syndicated
								Exclusivity
								Surcharge
								for
					<u> </u>			Partially Distant
								Stations
								l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	l
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	İ
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GRO	JP	SIXT	TY-FOURTH	H SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	İ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
								l
			<u></u>	-				l
								l
								l
								l
								l
								l
								l
								l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	İ
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	1
Base Rate Fee: Add to			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	YSTEM ID# 062226	Name
				TE FEES FOR EAC				
	TY-FIFTH	SUBSCRIBER GRO		li		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
01.120.11								Base Rate Fee
								and
								Syndicated
						-		Exclusivity Surcharge
						-		for
						-		Partially
		_						Distant
						-		Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXTY-S	SEVENTH	SUBSCRIBER GRO	UP	SIX	XTY-EIGHTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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 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			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities 062226								Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
SIXT	Y-NINTH	SUBSCRIBER GRO		S	EVENTIETH	I SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			-					Base Rate Fee
		-						and
					····		····	Syndicated Exclusivity
					····			Surcharge
								for
								Partially
								Distant
								Stations
		-			····			
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
SEVEN	TY-FIRST	SUBSCRIBER GRO	UP	SEVEN ⁻	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					••••			
		-						
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:				S	YSTEM ID# 062226	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
SEVENT	Y-THIRD	SUBSCRIBER GRO	UP	SEVEN ⁻	TY-FOURTH	I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			<u></u>					
			···					
			···					
Total DSEs	<u> </u>		0.00	Total DSEs		H	0.00	
Gross Receipts First Gr	oun	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Gloss Necelpts I list Gi	oup		0.00	Gloss Neceipts Seco	ла Огоар	Ψ	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVEN	ΓY-FIFTH	SUBSCRIBER GRO	UP	SEVE	ENTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			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 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 the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 062226	Name
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GROU	JP	SEVEN	TY-EIGHTH	I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
		_						for
								Partially
								Distant Stations
								Otations
								l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	l
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVEN'	TY-NINTH	SUBSCRIBER GROU	JP		EIGHTIETH	I SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA	***************************************		0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
								l
				-				l
								l
								l
								l
								l
								l
						-		l
								l
	<u> </u>							l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	İ
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	1
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 062226	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	ITY-FIRST	SUBSCRIBER GROU		†		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
					<u></u>			for
					***************************************			Partially
								Distant
								Stations
								l
					<u></u>			l
					<u> </u>			l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	l
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
EIGH	TY-THIRD	SUBSCRIBER GROU	JP	EIGH1	TY-FOURTH	1 SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
					<u></u>			l
								l
								l
					<u> </u>			l
								l
					<u></u>			l
								l
								l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	İ
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	l
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	YSTEM ID# 062226	Name
				TE FEES FOR EAC				
	TY-FIFTH	SUBSCRIBER GRO		ii —		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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
			<u></u>					Stations
						-		
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
EIGHTY-	SEVENTH	SUBSCRIBER GRO	UP	EIGH	HTY-EIGHTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
			<u> </u>					
			<u></u>			-		
	-							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Page Pote Fee Third (roup.		0.00	Book Boto Foe Four	th Croup		0.00	
Base Rate Fee Third G	σιουρ	\$	0.00	Base Rate Fee Four	ιι	\$	0.00	
Base Rate Fee: Add th	ne base rat	e fees for each subs	criber group	as shown in the boxes	s above.			
Enter here and in block						\$		

LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:				S	YSTEM ID# 062226	Name
				TE FEES FOR EAC				
	Y-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						-		Syndicated
					<u></u>	-		Exclusivity
						-		Surcharge for
		-						Partially
								Distant
						-		Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-FIRST	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
			<u> </u>		····	-		
		-						
						-		
						-		
						-		
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
	roup	¢	0.00		th Croup	•	0.00	
Gross Receipts Third G	Jup		3.00	Gross Receipts Four	ai Gioup	<u>*</u>	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER Algona Municipal I		E SYSTEM:				SY	STEM ID# 062226	Name
NINET		COMPUTATION OF SUBSCRIBER GROU	JP	li		IBER GROUP SUBSCRIBER GROU	Р	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
					<u></u>			Syndicated
								Exclusivity
								Surcharge for
								Partially
		-						Distant Stations
								Stations
	-							
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	id Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	ıd Group	\$	0.00	
	ΓY-FIFTH	SUBSCRIBER GROU		ii .	ETY-SIXTH	SUBSCRIBER GROU		
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 G	roun	•	0.00	Gross Receipts Fourth	Group	\$	0.00	
C. See Accorpts Time G	. Jup	· ·	<u> </u>	Siede Redelpte i duiti	. 5.5up	*		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Algona Municipa		LE SYSTEM:				S	YSTEM ID# 062226	Name
E	LOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
NINETY	SEVENTH	SUBSCRIBER GRO	OUP	NIN	ETY-EIGHTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.111				Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
	<u> </u>							Stations
								Gtationio
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
C. 000 . (000,p.0	2.0 u p			o. oco i toco.pto oco	oa ooap	<u>·</u>		
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GRO	OUP	ONE I	HUNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
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	
333 33	- ep	1.			P	L'	3.30	
Base Rate Fee: Add the Enter here and in blook			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 062226	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
	ED FIRST	SUBSCRIBER GROU	JP	ONE HUNDRE	D SECONE	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIV	DOL	Base Rate Fee
			-					and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
	<u> </u>				<u></u>			Stations
								l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	İ
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRI	ED THIRD	SUBSCRIBER GROU	JP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
					<u></u>			l
								l
	<u> </u>				<u></u>			l
								l
								l
		_						l
								l
							<u></u>	l
	<u> </u>							l
	<u> </u>							l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	1
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	l
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE		E SYSTEM:				Sì	STEM ID# 062226	Name
ONE HUNDRE		COMPUTATION OF SUBSCRIBER GROU	JP		RED SIXTH	IBER GROUP 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 and
		-						Syndicated
								Exclusivity
					<u></u>	-		Surcharge for
								Partially
		-						Distant Stations
		-						Otations
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	EVENTH	SUBSCRIBER GROU		ii .		SUBSCRIBER GROU		
COMMUNITY/ AREA	•••••		0	COMMUNITY/ AREA	***************************************		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>			
		-						
					-			
		-						
						-		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
		·		S. 222 / Rossipto Fourth		•		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW Algona Municipa		LE SYSTEM:				S	062226	Name
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
					<u></u>			Exclusivity Surcharge
		-						for
								Partially Distant
								Stations
				-				
		_						
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED	ELEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRED) TWELVTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	YSTEM ID# 062226	Name
BL	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED THIS	RTEENTH	SUBSCRIBER GRO	JP	ONE HUNDRED FO	URTEENTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122.01.01.1	562	07.22 0.011	302	0,120.011	302	07.22 0.0.1	302	Base Rate Fee
								and
					<u></u>			Syndicated
								Exclusivity
						-		Surcharge for
					·····	-		Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					····			
						_		
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OW Algona Municip		LE SYSTEM:				S	062226	Name
ONE HUNDRED SEV				ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
		_						Syndicated
								Exclusivity Surcharge
		_						for
								Partially Distant
								Stations
		_						
Total DSEs		<u> </u>	0.00	Total DSEs		11	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	
ONE HUNDRED COMMUNITY/ ARE/		SUBSCRIBER GRO	UP 0	ONE HUNDRED T		I SUBSCRIBER GRO	UP 0	
COMMONT IT AIRL	¬		<u> </u>	COMMONT IT AIREA			<u> </u>	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:				S	YSTEM ID# 062226	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	NTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
		-						Syndicated
			<u></u>					Exclusivity Surcharge
		-						for
		-						Partially
								Distant
								Stations
		-	<u> </u>					
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	ITY-THIRD	SUBSCRIBER GROUP	· · · · · · · · · · · · · · · · · · ·	†		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
			<u></u>					
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		-	<u> </u>					
		-						
		-						
			. 					
			······································					
Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third G	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 th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 062226	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	1 SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TW	ENTY-SIXTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
					<u></u>		<u>.</u>	for
					 		····	Partially Distant
								Stations
					<u></u>			1
					<u> </u>			l
								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	1
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NE HUNDRED TWENTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-EIGHTH	SUBSCRIBER GROUP	ı	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
								l
								l
					<u></u>			l
		_						l
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					<u></u>		<u></u>	l
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								l
								l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	İ
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	1
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:				S	YSTEM ID# 062226	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-NINTH	SUBSCRIBER GROUP)	ONE HUNDRE	D THIRTIETH	I SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-				-		Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
					····	-		
Total DSEs	1		0.00	Total DSEs		!!	0.00	
Gross Receipts First Gr	roup	s	0.00	Gross Receipts Seco	and Group	\$	0.00	
e. 666 : 1666 . p. 6 : 1161 e.	ССР	<u>*</u>			ona Group	<u>,</u>		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	RTY-FIRST	SUBSCRIBER GROUP		1		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i>A</i>		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
				-				
						-		
					<u></u>			
						-		
			•		***************************************			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
								
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	YSTEM ID# 062226	Name
BL	_OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED THIS	RTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED THI	RTY-FOURTH	SUBSCRIBER GROUP)	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	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		<u> </u>	0.00	
Gross Receipts First G	roun	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
Cross recorpts i not Cr	гоир	<u> </u>	0.00	Gross Rescipts See	ona Group	•	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED THIS	RTY-FIFTH	SUBSCRIBER GROUP	· · · · · · · · · · · · · · · · · · ·	ONE HUNDRED 1	HIRTY-SIXTH	SUBSCRIBER GROUP)	
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	
		•			-11- 0	•		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Foul	πn Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Page Pote Foot Add to	o bace ==4	to food for each auto-	oribor ====	on about in the hour	a above			
Base Rate Fee: Add th Enter here and in block			und group	as SHOWH III THE DOXE	o abuve.	\$		

LEGAL NAME OF OWN Algona Municipa						S	YSTEM ID# 062226	Name
B	LOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED THIRT	/-SEVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED TH	IIRTY-EIGHTI	H SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>							Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
		_						for
								Partially
								Distant Stations
								Otations
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Total DSEs		Ш	0.00	Total DSEs			0.00	ı
Gross Receipts First (Proup	¢	0.00	Gross Receipts Sec	and Group	\$	0.00	ı
Gross Neceipis i list (лоир	\$	0.00	Gross Receipts Sect	ona Group	\$	0.00	ı
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	1
	RTY-NINTH	SUBSCRIBER GROU		ii		SUBSCRIBER GROU		ı
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	ı
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
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	····							ı
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	ı
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	l
Base Rate Fee Third Base Rate Fee: Add tenter here and in block	he base ra	te fees for each subs				\$ \$	0.00	

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 062226	Name
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	1 SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-SECONI	SUBSCRIBER GROUP	1	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	***************************************		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
	<u> </u>							Partially Distant
								Stations
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	
ONE HUNDRED FOR	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:				S	YSTEM ID# 062226	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP)	ONE HUNDRED I	FORTY-SIXTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-				Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
	<u> </u>		<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-EIGHTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			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 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 the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:				S	YSTEM ID# 062226	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRE	ED FIFTIETH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant
		-						Stations
		=						
		-						
Total DSEs	<u> </u>		0.00	Total DSEs		11	0.00	
Gross Receipts First Gr	าดเมต	<u> </u>	0.00	Gross Receipts Seco	and Group	\$	0.00	
C. 000 : 1000.pt0 : 1101 C.	oup				ona Group	<u>,</u>		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIFT	TY-FIRST	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	-					-		
					<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 the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	YSTEM ID# 062226	Name
BL	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-FOURTH	I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIV	DOL	Base Rate Fee
			-				••••	and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
					····			Stations
					····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU		 		I SUBSCRIBER GROU	JP	
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 G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Algona Municipa						S	YSTEM ID# 062226	Name
	BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	FIFTY-EIGHTH	I SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			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 Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED I	FIFTY-NINTH	SUBSCRIBER GROU	JP	ONE HUND	RED SIXTIETH	I SUBSCRIBER GROUP)	
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	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

CALL SIGN DSE CALL SIGN	LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:					062226	Name
COMMUNITY AREA O	В				TE FEES FOR EA				
Computer Call Sign DSE		FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO		9
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base R Service CALL SIGN	COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	_
Base Rate Fee First Group S	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Syndi Surviva Surviva Syndi Exclusion Syndi Exclusion Syndi Exclusion Syndi Exclusion Surviva Surviv									Base Rate F
									and
Surcit for Part Dist Statistics Total DSEs			_						Syndicate
Total DSEs			_						Exclusivity
Part Dist Stati Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL									Surcharge
Stati Stati St									Partially
Total DSEs Total DSEs THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									Distant
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									Stations
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN			_						
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN			_						
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN		<u></u>							
Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SI	Total DSEs	•		0.00	Total DSEs	•		0.00	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA	Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA									
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG	Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs CALL SIGN DSE CAL		THIRD	SUBSCRIBER GRO	OUP		FOURTH	SUBSCRIBER GRO	UP	
Total DSEs	COMMUNITY/ AREA			0	COMMUNITY/ ARE	:A		0	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			_						
		<u></u>							
			-						
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Total DSEs			0.00	Total DSEs			0.00	
	Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
	p /	r				- nr	·		
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	ırth 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) \$ 0.00				scriber group	as shown in the boxe	es above.			

LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:				S	YSTEM ID# 062226	Name
Bl				TE FEES FOR EAC				
	FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u> </u>					Base Rate Fee
								and
								Syndicated
					<u></u>			Exclusivity Surcharge
					·····			for
								Partially
								Distant
								Stations
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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	and Group	\$	0.00	
(SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	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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			<u> </u>					
Total DSEs	ı		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Door Data For This I C			0.00	Base Bets For F	th Cro		0.00	
Base Rate Fee Third G	ioup	\$	0.00	Base Rate Fee Four	ui Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER Algona Municipal I		E SYSTEM:				S	YSTEM ID# 062226	Name
BL				TE FEES FOR EACH				
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.01011	202	07.22 0.011	202	07.122.01011	202	0/122 0/0/1	302	Base Rate Fee
								and
		-						Syndicated
		-						Exclusivity
								Surcharge
		-			<u></u>			for
								Partially Distant
								Stations
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
EL	EVENTH	SUBSCRIBER GRO	UP		TWELVTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
			···					
								
		-	<u> </u>					
		-						
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
								
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the	hase rat	e fees for each subs	criber group	as shown in the boxes	above			

Name	YSTEM ID# 062226							LEGAL NAME OF OWNE Algona Municipal
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	JRTEENTH			SUBSCRIBER GROU	RTEENTH	THIE
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							<u></u>	
Partially						-	···	
Distant								
Stations						-		
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		<u> </u>						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Froup	Gross Receipts First G
	0.00							
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
	0.00							FII
	0.00			\$	UP			FII
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	FTEENTH	FII COMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROU	IXTEENTH	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	FTEENTH	CALL SIGN
	0.00 JP	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs
	JP 0 DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	FII COMMUNITY/ AREA

<u> </u>	YSTEM ID# 062226					LE SYSTEM:		LEGAL NAME OF OWNE Algona Municipal
		RIBER GROUP	SUBSCR	TE FEES FOR EAC	BASE RA	COMPUTATION OF	BLOCK A: (В
9	JP	SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROU	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								
Exclusivity								
Surcharge for								
Partially					······································			
Distant								
Stations					······································			
<u>"</u>								
_								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	Base Rate Fee First G
=	•	\$ SUBSCRIBER GROU				SUBSCRIBER GROU		
=	•						INTEENTH	NII
-	JP			7	UP		INTEENTH	Base Rate Fee First G NII COMMUNITY/ AREA CALL SIGN
=	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
-	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
-	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
-	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	NII COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	WENTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	INTEENTH	CALL SIGN
	JP 0 DSE	SUBSCRIBER GROU	DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE	NII COMMUNITY/ AREA

9	062226					LE SYSTEM:		Algona Municipal l
9				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	-SECOND			SUBSCRIBER GROU	Y-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicated								
Exclusivity								
Surcharge		H						
for								
Partially								
Distant		_						
Stations								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
	Р	SUBSCRIBER GROUP	-FOURTH	TWENTY	JP	SUBSCRIBER GROU	Y-THIRD	TWENT
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	STEM ID# 062226	SY				LE SYSTEM:		Algona Municipal I
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	ITY-SIXTH			SUBSCRIBER GROU	Y-FIFTH	
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 Seco	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0	SUBSCRIBER GROUP	Y-EIGHTH	TWEN	JP	SUBSCRIBER GROU	EVENTH	TWENTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNE Algona Municipal		E SYSTEM:	-			S	YSTEM ID# 062226	Name
				TE FEES FOR EAC				
TWENT	Y-NINTH	SUBSCRIBER GRO	DUP		THIRTIETH	I SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			<u></u>					Syndicated
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								Surcharge for
			····					Partially
								Distant
								Stations
								
	 							
	 							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIRT	TY-FIRST	SUBSCRIBER GRO	DUP	THIRT	Y-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
	rour	•			h Crave	•		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	ıı Group	>	0.00	
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Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 062226						ER OF CABL Utilities	Algona Municipal
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	Y-FOURTH			SUBSCRIBER GROU	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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062226 Name				LE SYSTEM:		Algona Municipal
RIBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (Bl
SUBSCRIBER GROUP	/-EIGHTH			SUBSCRIBER GROU	SEVENTH	
Computation		COMMUNITY/ AREA	0			COMMUNITY/ AREA
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I SUBSCRIBER GROUP	ORTIETH		UP	SUBSCRIBER GROU	TY-NINTH	THIR
0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
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			0.00	\$	Group	Total DSEs Gross Receipts Third G

						062226	Name
	COMPUTATION C					LID	
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oss Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
se Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	D SUBSCRIBER GRO		ii .		SUBSCRIBER GRO	UP -	
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ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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al DSEs		0.00	Total DSEs	DSE		DSE	
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	es					062226	Name
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FORTY-FIF	TH SUBSCRIBER GR	OUP 0	COMMUNITY/ ARE		I SUBSCRIBER GRO	UP 0	9
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Fotal DSEs	Į.	0.00	Total DSEs		Н	0.00	
	¢	0.00		and Croup	¢	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	B B-4- F 0			0.00	
	¥	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-SEVEN	TH SUBSCRIBER GR	'			SUBSCRIBER GRO	•	
		'		RTY-EIGHTH		•	
	TH SUBSCRIBER GR	OUP	FO	RTY-EIGHTH		UP	
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LEGAL NAME OF OWNER Algona Municipal I		E SYSTEM:				S	YSTEM ID# 062226	Name
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GROU				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FIFT	Y-FIRST	SUBSCRIBER GRO	JP	FIFT	Y-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
	oup	\$	0.00	Total DSEs Gross Receipts Fourt	h Group	\$	0.00	
Total DSEs Gross Receipts Third G	·	\$			·	\$		

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	062226	Name
Bl	_OCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
FIF	TY-THIRD	SUBSCRIBER GRO	OUP	FIF	TY-FOURTH	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIF	TY-FIFTH	SUBSCRIBER GRO	OUP		FIFTY-SIXTH	SUBSCRIBER GRO	UP	
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Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
C. 230 Rossipio Tilita C	5 up	•		S1000 1 000 pto 1 00	Стоир			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third G	ne base rat					\$	0.00	

	062226					_E 5151EW.	R OF CABL	Algona Municipal
		RIBER GROUP	SUBSCR	TE FEES FOR EAC	BASE RA	COMPUTATION OF	OCK A: 0	Bl
9	UP	SUBSCRIBER GROU	ΓΥ-EIGHTH	i i		SUBSCRIBER GRO	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE		DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:	-			S	YSTEM ID# 062226	Name
BL	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
SIXT	Y-FIRST	SUBSCRIBER GRO	DUP	SIX	TY-SECONE	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXT	Y-THIRD	SUBSCRIBER GRO	DUP	SIX	TY-FOURTH	SUBSCRIBER GROU	JP	
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Total DSEs	<u> </u>		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 the Enter here and in block			scriber group	as shown in the boxes	s above.	\$		

Algona Municipa		LE SYSTEM:					062226	Name
				TE FEES FOR EAC				
	XTY-FIFTH	SUBSCRIBER GRO		iii		I SUBSCRIBER GRO	0 0	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		U	Computation
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5.000 . 1000 pto . 1101 s	2.0up				oa	<u> </u>		
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Base Rate Fee First (iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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SIXTY	-SEVENTH)UP	SI	XTY-EIGHTH		UP	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	0 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	0 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	0 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	0 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA CALL SIGN	-SEVENTH	SUBSCRIBER GRO	OUP 0	SI COMMUNITY/ ARE	XTY-EIGHTH	SUBSCRIBER GRO	UP 0	
SIXTY COMMUNITY/ AREA CALL SIGN Fotal DSEs	DSE	SUBSCRIBER GRO	DUP DSE	CALL SIGN	DSE DSE	SUBSCRIBER GRO	DSE	
SIXTY COMMUNITY/ AREA	DSE	CALL SIGN	DUP DSE DSE 0.000	CALL SIGN CALL SIGN Total DSEs	DSE DSE	CALL SIGN	DSE 0.00	
SIXTY COMMUNITY/ AREA CALL SIGN Total DSEs	SEVENTH	CALL SIGN	DUP DSE DSE 0.000	CALL SIGN CALL SIGN Total DSEs	DSE DSE	CALL SIGN	DSE 0.00	

ABLE SYSTEM: PS				S	062226	Name
		11				
H SUBSCRIBER GR	OUP 0	ii .		SUBSCRIBER GRO	UP 0	9
						Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-		Base Rate F and
				-		Syndicated
						Exclusivity
						Surcharge
						for
						Partially Distant
						Stations
-	0.00	Total DSEs			0.00	
\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ST SUBSCRIBER GR	OUP	SEVEN	TY-SECOND	SUBSCRIBER GRO	UP	
	0	COMMUNITY/ ARE	A		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	Total DSEs	DSE	CALL SIGN	DSE	
CALL SIGN				CALL SIGN		
	0.00	Total DSEs			0.00	
	0.00	Total DSEs	rth Group		0.00	
	CALL SIGN CALL SIGN \$ \$	CALL SIGN DSE CALL S	A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP OCOMMUNITY/ ARE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN Total DSEs Gross Receipts Sectors ST SUBSCRIBER GROUP SEVEN	A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIPTION OF BASE RATE FEES FOR EACH SUBSCRIPTION OF BASE RATE FEES FOR EACH SUBSCRIPTION OF SEVENTIETH COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE	A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN	A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	062226	Name
BI	LOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
SEVEN ⁻	TY-THIRD	SUBSCRIBER GRO	DUP	SEVEN	ITY-FOURTH	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
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			·····				·····	
						-		
Total DSEs			0.00	Total DSEs	·		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	IY-FIFIH	SUBSCRIBER GRO		11		I SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third G	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			scriber group	II as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	YSTEM ID# 062226	Name
BI	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
SEVENTY-S	SEVENTH	SUBSCRIBER GRO	OUP	SEVE	NTY-EIGHTH	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 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
	<u>-</u>							Distant
							·····	Stations
	<u>-</u>		<u></u>			-		
	<u> </u>							
								
	-							
	-							
T-4-1 DOE-			0.00	T-4-1 DOE-		11	0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO)UP		EIGHTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>-</u>							
	<u>-</u>	-						
	-	-						
	-							
	-							
	<u> </u>							
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	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	
	•	1			r	Ŀ		
Base Rate Fee: Add th		e fees for each subspace L (page 7)	scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER Algona Municipal I		LE SYSTEM:	-			S	YSTEM ID# 062226	Name
BL	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
EIGHT	Y-FIRST	SUBSCRIBER GRO)UP	EIGH	TY-SECONE	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
			····					Stations
			<mark></mark>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GRO	UP	EIGH	TY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
			····					
		-						
	ļ							
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 the Enter here and in block			scriber group	as shown in the boxes	s above.	\$		

BLOCK /						062226	Name
FIGURY FIE	A: COMPUTATION C					LID	
EIGHTY-FIF OMMUNITY/ AREA	TH SUBSCRIBER GRO	0 0	EI COMMUNITY/ ARE		SUBSCRIBER GRO	0	9
OWWONT IT AREA			COMMONT IT ARE				Computat
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate I
							and
							Syndicate Exclusivit
		·····					Surcharg
							for
							Partially
							Distant
							Stations
		·····					
		·····			-		
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY-SEVEN	TH SUBSCRIBER GRO	OUP	EIG	HTY-EIGHTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		·····	-		4		
			.l L				
otal DSEs		0.00	Total DSEs			0.00	
otal DSEs	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
	\$			rth Group	\$		

								LEGAL NAME OF OWNE Algona Municipal
				TE FEES FOR EACH				
u		SUBSCRIBER	NINTIETH			SUBSCRIBER GRO	ΓΥ-NINTH	
O Computation				COMMUNITY/ AREA	0			COMMUNITY/ AREA
	SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity								
Surcharge for								
Partially								
Distant		-						
Stations								
.00_	0.00			Total DSEs	0.00			Total DSEs
.00_	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
.00	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	RIBER GROUP	SUBSCRIBER	Y-SECOND	NINET	UP	SUBSCRIBER GRO	TY-FIRST	NINE
0	0		***************************************	COMMUNITY/ AREA	0			COMMUNITY/ AREA
OSE	SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	······							
			-					
								
.00	0.00			Total DSEs	0.00			Total DSEs
.00	0.00	\$	n Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
						_		
					0.00	\$		Base Rate Fee Third G

LEGAL NAME OF OWNER OF Algona Municipal Utilit					\$	062226	Name
			ATE FEES FOR EA				
NINETY-TH	IRD SUBSCRIBE		NINI COMMUNITY/ ARE		1 SUBSCRIBER GRO	UP 0	9
JONINUNITY AREA		0	COMMONT TO ARE	:A			Computati
CALL SIGN DS	E CALL SIG	N DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate F
							and Syndicate
							Exclusivit
							Surcharge
							for
							Partially Distant
							Stations
					-		3
Total DSEs		0.00	Total DSEs	'		0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
NINETY-FI	TH SUBSCRIBE	R GROUP	N	INETY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DS	E CALL SIG	N DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						0.00	
Fotal DSEs		0.00	Total DSEs				
Total DSEs Gross Receipts Third Group	<u> </u>	0.00	Total DSEs Gross Receipts Fou	ırth Group	\$	0.00	
	\$			urth Group	\$		
	\$				\$		

	SYSTEM ID# 062226					LE STSTEM.	R OF CABL	Algona Municipal
				TE FEES FOR EACH				
9	ROUP	SUBSCRIBER GRO	ΓΥ-EIGHTH			SUBSCRIBER GROU	SEVENTH	
Computation	0		***************************************	COMMUNITY/ AREA	0			COMMUNITY/ AREA
****	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity			<u></u>					
Surcharge		-					<u> </u>	
for	······································							
Partially Distant		-					<u>.</u>	
Stations							 	
Jialions					·		<u> </u>	
							-	
		-					-	
		-						
<u> </u>	0.00		•	Total DSEs	0.00		•	Total DSEs
<u> </u>	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	ROUP	SUBSCRIBER GRO	INDREDTH	ONE HI	UP	SUBSCRIBER GRO	TY-NINTH	NINE
				ONETIC				
0	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	_	CALL SIGN	DSE		O DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
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	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
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	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
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	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	

062226 Name				LE SYSTEM:	ER OF CABL Utilities	Algona Municipal
ACH SUBSCRIBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (Bl
RED SECOND SUBSCRIBER GROUP	SECOND	ONE HUNDRED	JP	SUBSCRIBER GROU	ED FIRST	ONE HUNDRI
Computation		COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE of		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee						
and						
Syndicated						
Exclusivity				-		
Surcharge						
for						
Partially						
Distant	<u></u>				<mark></mark>	
Stations						
			.			
			 		-	
						
					<u> </u>	
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0.00		Total DSEs	0.00			Total DSEs
econd Group \$ 0.00	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
econd Group \$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	iroup	Base Rate Fee First G
RED FOURTH SUBSCRIBER GROUP	D FOURTH	ONE HUNDREI	JP	SUBSCRIBER GROU		ONE HUNDRE
	D FOURTH	ONE HUNDREI COMMUNITY/ AREA	JP 0			
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	COMMUNITY/ AREA
EA0		COMMUNITY/ AREA	0	SUBSCRIBER GROU	ED THIRD	CALL SIGN
DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNER O		E SYSTEM:				S	YSTEM ID# 062226	Name
BLO	CK A: C	OMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED	FIFTH :	SUBSCRIBER GROU	JP	ONE HUNDI	RED SIXTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
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								Stations
					 			
					<u></u>	-		
					<u>-</u>			
								
Total DSEs			0.00	Total DSEs		Щ	0.00	
Gross Receipts First Grou	р	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Grou	р	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED SEV	/ENTH	SUBSCRIBER GROU	JP	ONE HUNDRE	ED 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		Ш	0.00	
Gross Receipts Third Grou	up	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Grou	nb	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
e: Add the b	ase rate			Base Rate Fee Fourth		\$	0.00	

a Municipal Utilities 06	62226 Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
ONE HUNDRED NINTH SUBSCRIBER GROUP ONE HUNDRED TENTH SUBSCRIBER GROUP	
JNITY/ AREA O COMMUNITY/ AREA	0 Computation
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE of
	Base Rate F
	and
	Syndicate
	Exclusivit
	Surcharge
	for
	Partially
	Distant
	Stations
]
SEs Total DSEs	0.00
0.00	0.00
Receipts First Group \$ 0.00 Gross Receipts Second Group \$	
	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ UNDRED ELEVENTH SUBSCRIBER GROUP ONE HUNDRED TWELVTH SUBSCRIBER GROUP	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ HUNDRED ELEVENTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA	0.00
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	JP 0	SUBSCRIBER GROU	IXTEENTH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	IXTEENTH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	IXTEENTH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
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LEGAL NAME OF OWNE Algona Municipal		LE SYSTEM:				S	062226	Name
				TE FEES FOR EAC				
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Total DSEs			0.00	Total DSEs			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 Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th	e hase rat	e fees for each subsc	criber group	as shown in the hoxe	s ahove			

Name	YSTEM ID# 062226					_E 5Y51EM:	R OF CABI	Algona Municipal
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	ENTY-SIXTH	iii		SUBSCRIBER GROUP	NTY-FIFTH	ONE HUNDRED TWEE
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			Total DSEs	0.00			Total DSEs
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		SUBSCRIBER GROUP		H				IE I II INDOED TAKENTY
	,	COBCONIBEN CINCOI	ITY-EIGHTH	ONE HUNDRED TWE	,	SUBSCRIBER GROUP	-SEVENTH	NE HUNDRED TWENTY
	0	CODOCNIDEN CINCOL	ITY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	SEVENTH	COMMUNITY/ AREA
	_	CALL SIGN	DSE	i i		CALL SIGN	DSE	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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			•	LE SYSTEM:		LEGAL NAME OF OWNE Algona Municipal
PUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	UBSCRIE	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
<u> </u>	IIRTIETH S			SUBSCRIBER GROUP	ITY-NINTH	ONE HUNDRED TWEN
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	SECOND S			SUBSCRIBER GROUP	RTY-FIRST	
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0.00 Total DSEs 0.00 0.00 Gross Receipts Fourth Group \$ 0.00	roup			\$	Group	Fotal DSEs Gross Receipts Third G

Name	YSTEM ID# 062226	S					ER OF CABL I Utilities	Algona Municipal
		IBER GROUP	SUBSCR	TE FEES FOR EACI	BASE RA	COMPUTATION OF	SLOCK A: 0	В
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	0.00		_	Total DSEs	0.00		-	Total DSEs
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=	0.00	\$	d Group	Base Rate Fee Seco	JP		-	Base Rate Fee First G ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN
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Algona Municipal Utilities	;				S	YSTEM ID# 062226	Name
	COMPUTATION O		TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
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otal 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	
NE HUNDRED THIRTY-NINT	SUBSCRIBER GRO	OUP	ONE HUNDRE	D FORTIETH	SUBSCRIBER GRO	UP	
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otal DSEs		0.00	Total DSEs			0.00	
otal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	

TATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP				.E 3131EWI.	R OF CABL	Algona Municipal
	BSCRIBE	E FEES FOR EACH				
BER GROUP ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP	ECOND SL	ONE HUNDRED FORT		SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED FOR
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	OURTH SL			SUBSCRIBER GROUP	TY-THIRD	
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	LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226									
ì	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
9	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP					ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
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4	ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP					HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP				
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226									
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation				
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								Base Rate Fee	
								and	
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Total DSEs	ļ		0.00	Total DSEs			0.00		
Gross Receipts First Gro	ross Receipts First Group \$				nd Group	\$			
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second Group \$ 0.00					
ONE HUNDRED FIFT	NE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA	MMUNITY/ AREA0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-			<u></u>				
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						-			
							····		
					 		····		
									
Total DSEs			0.00	Total DSEs		П	0.00		
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
							$\neg \neg $		
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
d the	e base rat			Base Rate Fee Fourt	·	\$	0.00		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226								
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
9	ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP					ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP OMMUNITY/ AREA 0			
Computation	COMMUNITY/ AREA 0							COMMUNITY/ AREA	
of	CALL SIGN DSE CALL SIGN DSE				DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and									
Syndicated									
Exclusivity Surcharge									
for							<u> </u>		
Partially		-	<u>-</u>						
Distant		-			<u> </u>				
Stations									
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-	0.00			Total DSEs	0.00	OSEs			
=	0.00	\$	d Group	Gross Receipts Seco	0.00	\$ 0.00		Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP					NE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP			
	COMMUNITY/ AREA0					IMUNITY/ AREA 0			
<u>. </u>	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 Fourt	0.00	\$	Group	Total DSEs Gross Receipts Third G	

9	LEGAL NAME OF OWNER OF CABLE SYSTEM: Algona Municipal Utilities SYSTEM ID# 062226									
9	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
-	ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP					ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP				
Computatio	0	JNITY/ AREA COMMUNITY/ AREA			COMMUNITY/ AREA					
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate F										
and		-								
Syndicate										
Exclusivity Surcharge										
for										
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7	<u> </u>									
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$ 0.00		Gross Receipts First Gr		
	Rate Fee Second Group \$ 0.00				0.00	\$	oup	Base Rate Fee First Gro		
]	ONE HUNDRED SIXTIETH SUBSCRIBER GROUP					HUNDRED FIFTY-NINTH SUBSCRIBER GROUP				
	COMMUNITY/ AREA 0				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 Fourtl	0.00	\$	roup	Total DSEs Gross Receipts Third G		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Algona Municipal Utilities 062226 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Algona Municipal Utilities 062226 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Algona Municipal Utilities 062226 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. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH 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 FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Algona Municipal Utilities 062226 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. EIGHTEENTH SUBSCRIBER GROUP SEVENTEENTH 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 NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Algona Municipal Utilities 062226 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. ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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