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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED AMOUNT							
02/27/2018	\$ 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	2017/02									
Period										
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 63437 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM									
	Mid-Plains Telephone, LLC									
				6343	720172					
				63437	2017/02					
	525 Junction Rd									
	Madison, WI 53717-2152									
	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:									
	TDS Telecom, Inc.									
	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	e 1b					
Area	with all communities.									
Served	CITY OR TOWN	STATE								
First	Middleton WI									
Community	Below is a sample for reporting communities if you report multiple cha									
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	3 GRP#					
Sample	Alda	MD	Α		1					
	Alliance	MD	В		2					
	Gering	MD	В		3					

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

Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules" is 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 frit community that you list will serve as a form of system identification hereafter known as the "first community" Release use it as the first community on all future limits. Note: Entitles and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities with the drainer line-up? A" in the appropriate column below or leave the column blank. If you report any stations designated by a number (based on your reporting from Part 9.) When reporting the carriage of levision broadcast stations on a community-percentural bases, associate each retevent community with a channel line-up of esignated by an archive-letter(s) (losed on your Space G reporting) and a subscriber group designated by a number (based on your space of appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRPP First Community Middleton WI A First Community Add rows as Accessity. And rows as Accessity.	LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
Instructions: List each separate community served by the cable system. A 'community' is the same as a 'community unit' as defined in FCO rules: "a separate and distinct community or municipal onlity (including unincorporated communities within unincorporated careas and including single, discrete unincorporated careas." 47 C.F.R. § 75 (400). The first community hat you list will serve as a form of system identification hereafter known as the first community. Precision in the instruction in parentheses believe the identified dity or two. If all communities expected 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 distance to parenthy permitted base in the DES Griedule, associate each revenue community with a community with a community by a community with a community with a community of the community with a community with a community of the community with a community with a community of the community with a community of the community with a										
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channel line-up designated by an alpha-eletr(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# First Community See instructions for additional information on alphabetization. See instructions for additional information on alphabetization. Add rows as necessary.	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,									
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See instructions for additional information on alphabetization. Add rows as necessary.	Middleton	WI	Α		First					
Se instructions for additional information on alphabetization. Add rows as necessary.		WI	Α		Community					
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Add rows as necessary.										
					on alphabetization.					
					Add rows as necessary.					
				•						
				•						
				•						

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Mid-Plains Telephone, LLC

SYSTEM ID#
63437

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1			BLOCK 2			
	NO. OF				NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:							
Service to first set	3,956	20.00/mo					
Service to additional set(s)							
 FM radio (if separate rate) 							
Motel, hotel							
Commercial							
Converter							
Residential	3,956	0-8.00/mo					
Non-residential							
		l	7				

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	14-19.99/mo	Motel, hotel		
 Pay cable—add'l channel 		Commercial		
Fire protection		Pay cable		
Burglar protection		Pay cable-add'l channel		
Installation: Residential		Fire protection		
First set		Burglar protection		
 Additional set(s) 		Other services:		
• FM radio (if separate rate)		Reconnect		
Converter		Disconnect		
		Outlet relocation		
		Move to new address		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63437 Mid-Plains Telephone, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) **WISC** 3.1 N Madison, WI **WMTV** 15.1 Ν Madison, WI See instructions for **WHA** Ε Madison, WI 21.1 additional information **WKOW** 27.1 N Madison, WI on alphabetization. **WMSN** 47.1 Ν Madison, WI WMTV-DT4 Madison, WI 15.4 N-M 3.2 Madison, WI WISC-DT2 N-M WMTV-DT2 15.2 N-M Madison, WI WHA-DT2 21.2 E-M Madison, WI Madison, WI WHA-DT3 21.3 E-M **WKOW-DT2** 27.2 N-M Madison, WI WKOW-DT3 Madison, WI 27.3 N-M WMTV-DT3 15.3 N-M Madison, WI WMSN-DT2 Madison, WI 47.2 N-M

FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
Mid-Plains Tele	ephone, LLC				63437	
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bass Substitute Basis Substitute Basis 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 each multicast stream cast stream as "WETA Simulcast". Column 2: Give the its community of licens on which your cable is serviced.	ERS: TELEVISIO G, identify even system during ti ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With I CC rules, regula Inhere in space only on a subs and also in spa information conc orm. Ich station's call associated with -2". Simulcast e channel numl se. For example system carried th	y television standard programme accounting an June 24, 1984, or 76.63 (rd in the next prespect to any attions, or auth G—but do list ittute basis. In the standard programme as tation account of the standard programme as tation account of the station.	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried ute basis station eport origination coording to its ow- be reported in or as assigned to annel 4 in Wash	(1) stations carried to carriage of certariage of the certariage of the television statistington, D.C. This	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the stute basis and also on some other at the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- a stream separately; for example son for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.						
		CHANN	EL LINE-UP	AB		
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	
	T	[1	1	

FORM SA3E. PAGE 3. LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Mid-Plains Telephone, LLC	63437	Name				
PRIMARY TRANSMITTERS: TELEVISION						
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife 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: Giyee 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 by "F-LM" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent), "I-M" (for independent), "I-M" (for independent multicast), "E" (for noncommercial						
CHANNEL LINE-UP AC						
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STA CHANNEL OF (Yes or No) CARRIAGE	TION					
NUMBER STATION (If Distant)						

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Mid-Plains Tele	ephone, LLC	;			63437	ramo	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
PRIMARY TRANSMITTERS: TELEVISION							
				•	which the station is identified.		
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	AD			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			

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FORM SA3E. PAGE 3. LEGAL NAME OF OWN	FR OF CABLE SY	/STEM:			SYSTEM ID#	!		
Mid-Plains Tele					63437	Namo		
PRIMARY TRANSMITTE	• •							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
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		-			s such as HBO, ESPN, etc. Identify			
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	ave entered "Yone distant station	es" in column on during the	4, you must cor accounting perion	mplete column 5, s od. Indicate by ent	tating the basis on which your ering "LAC" if your cable system			
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explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the			
FCC. For Mexican or C Note: If you are utilizin				•	which the station is identifed. channel line-up.			
		CHANN	EL LINE-UP	AE		_		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	_		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOGATION OF STATION			
	NUMBER	STATION	,	(If Distant)				
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FORM SA3E. PAGE 3. LEGAL NAME OF OWN	IER OF CARLES	STEM:			SYSTEM ID#	
Mid-Plains Tele					63437	Name
	<u> </u>					
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 specife 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 by "F-M" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for						
<u> </u>		CHANN	EL LINE-UP	ΔF		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
	NUMBER	STATION		(If Distant)		
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FORM SA3E. PAGE 3.						,	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Mid-Plains Tele	phone, LLC	;			63437	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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 Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for inde							
For the retransmiss	ion of a distant	multicast stre	eam that is not s	subject to a royalty	payment because it is the subject		
the cable system and a tion "E" (exempt). For explanation of these th	a primary trans simulcasts, also rree categories	mitter or an as o enter "E". If , see page (v)	ssociation repre you carried the of the general i	senting the primal channel on any ot instructions locate	stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further of in the paper SA3 form. r to which the station is licensed by the		
	Canadian statio	ns, if any, give	e the name of th	ne community with	which the station is identifed.		
		CHANN	EL LINE-UP	AG			
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		
					<u> </u>		
							

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM	Namo	
Mid-Plains Tele	phone, LLC	<u>, </u>			63	437	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "For independent), "I-M" (for indepe							
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	T .	CHANN	EL LINE-UP	АН	I		
1. CALL	2. B'CAST		4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
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FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name	
Mid-Plains Tele	ephone, LLC	;			63437	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), 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 pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning o							
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Note: If you are utilizing				•			
		CHANN	EL LINE-UP	ΔΙ			
4 0411	2 D'CACT	3. TYPE		5. BASIS OF	C LOCATION OF STATION		
1. CALL SIGN	2. B'CAST CHANNEL	OF	4. DISTANT? (Yes or No)	CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION	((If Distant)			

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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Mid-Plains Tele	ephone, LLC	;			63437	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List 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	system during to ions in effect or 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 spanformation concurr. The station's call associated with a station's call associated with a concurrence of the concurren	he accounting In June 24, 198 (4), or 76.63 (red in the next prespect to any ations, or authors. Generally a significant of the state of the station acceptance of the station acceptance of the station acceptance of the station. Whether the station whether the station.	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried tute basis station eport origination cording to its over be reported in common as assigned to the annel 4 in Wash ation is a netwo	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitute, see page (v) on program services er-the-air designation column 1 (list each the television station of the television station of the station, an indext of the television, an indext of the station, an indext of the carried station, an indext of the station	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial ast), "I" (for independent), "I-M"	G Primary Transmitters: Television
(for independent multi- For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	cast), "E" (for no see terms, see ation is outside ce area, see pa ave entered "Yhe distant static ion on a part-ting ion of a distant a entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	oncommercial page (v) of the the local servage (v) of the es" in column on during the at multicast strength or before Jumitter or an as o enter "E". If y, see page (v) ons, if any, give	l educational), of egeneral instructivice area, (i.e. "or general instruction 4, you must confuccion for the general instruction accounting perioduse of lack of a seam that is not some 30, 2009, be association repreyou carried the or of the general in the confuccion for the general in the general in the general	r "E-M" (for nonco ctions located in the distant"), enter "Ye ions located in the mplete column 5, sod. Indicate by ent ctivated channel c subject to a royalty stween a cable sys senting the primal channel on any of instructions locate list the community me community with	mmercial educational multicast). The paper SA3 form. The paper SA3	
Note: If you are utilizing			EL LINE-UP	·	channel inte-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
Mid-Plains Tele	ephone, LLC				63437	
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licens on which your cable is search and read the stream on which your cable is search and read the stream as the stream as "WETA-simulcast".	ERS: TELEVISIC G, identify even system during the ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With I CC rules, regula In here in space only on a subs and also in spa information conc orm. In station's call associated with -2". Simulcast e channel numb se. For example system carried th	y television standard programme accounting an June 24, 1984, or 76.63 (rd in the next prespect to any attions, or auth G—but do list ittute basis. In the standard programme as tation account of the standard programme as tation account of the station.	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried ute basis station eport origination coording to its ow- be reported in our ass assigned to annel 4 in Wash	(1) stations carried to carriage of certariage of the certariage of the television statistington, D.C. This	and low power television stations) Id only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
(for independent multi- For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Yihe distant static icion on a part-tirision of a distant at entered into or a primary transisimulcasts, also aree categories e location of ea Canadian statio	oncommercial page (v) of the the local servage (v) of the ser in column on during the amelians becamulticast strenger or an aspender "E". If see page (v) ch station, given in any, give	e general instruct vice area, (i.e. "c general instruct 4, you must cor accounting perion accounting p	or "E-M" (for nonco- ctions located in the distant"), enter "Ye- ions located in the mplete column 5, sod. Indicate by entactivated channel of subject to a royalty etween a cable sys- senting the primal channel on any of instructions locate list the community me community with	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 because it is 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 identifed.	
		CHANN	EL LINE-UP	AK		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID:	Namo	
Mid-Plains Tele	phone, LLC	<u>; </u>			63437	<u></u>	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as cociated 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 in							
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		CHANN	EL LINE-UP	AL		1	
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	.1	
LEGAL NAME OF OWN					SYSTEM ID	Namo	
Mid-Plains Tele	ephone, LLC	;			63437		
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 specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for in							
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Note: If you are utilizing	ng multiple chai	nnei line-ups,	use a separate	space G for each	cnannei iine-up.		
	1	CHANN	EL LINE-UP	AM			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3. LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Mid-Plains Tele	phone, LLC	;			63437	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the duri	ne accounting 1 June 24, 199 4), or 76.63 (r d 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:
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 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the	CC rules, regular here in space only on a subsigned and also in spatformation concirm. In station's call associated with associated with a common associated with a common a part of the common associated with a common a part of the common a part of a distant entered into on a primary transistimulcasts, also a subsidere categories.	ations, or auth G—but do list titute basis. Ince I, if the state erning substitute sign. Do not read the station acceptate and the station acceptate and the station. In a station acceptate and the station. In a station whether the station. In a station and the local served age (v) of the served in column and uning the same basis because the station or defore Jumitter or an author and the station of the station and the station and the station of the station and the station of the station and the station and the station are station of the station and the station and the station and the station are stationary and the stationary and the stationary are stationary as a stationary and the stationary are stationary as a stationary	orizations: It it in space I (the space I (the space I (the space I) (the space I) (the space I) (the space I) (the space I (the space I) (the space II) (the space II) (the space II) (the space III) (the s	e Special Statemed both on a substitute, see page (v) or program services er-the-air designal column 1 (list each the television statifington, D.C. This list of the t	s". If not, enter "No". For an expaper SA3 form. Stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the designation in the paper SA3 form.	Television
	Canadian statio	ns, if any, given nnel line-ups,	e the name of thuse a separate	ne community with space G for each	to which the station is licensed by the which the station is identifed. channel line-up.	
	I	CHANN	EL LINE-UP	AN		
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	NER OF CARLESY	'STEM:			SYSTEM ID#	
Mid-Plains Tele					63437	Name
PRIMARY TRANSMITT	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).61(e)(2) and (4).61(e)(2) and (4).61(e)(2) and (4).61(e)(2) and (4).61(e)(2) and (4).61(e)(2						
		CHANN	EL LINE-UP	AO		
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					SYSTEMIC	Namo
Mid-Plains Tele					6343	37
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		CHANN	EL LINE-UP	AP		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
Mid-Plains Tele	phone, LLC	;			63437			
PRIMARY TRANSMITTE	RS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(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 independent), "I-M" (for independent multicast), "E" (for noncommercial								
		CHANN	EL LINE-UP	AQ				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Mid-Plains Tele	ephone, LLC	;			63437	ramo	
PRIMARY TRANSMITTE	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 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), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) reported							
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Note: If you are utilizing	ig multiple char	inei line-ups,	use a separate	space G for each	cnannel line-up.		
	T	CHANN	EL LINE-UP	AR			
1. CALL	2. B'CAST		4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
Mid-Plains Tele	phone, LLC				63437			
PRIMARY TRANSMITTE	RS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network"), "N-M" (for network multicast), "" (for independent), "I-M" (for ind								
		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			
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FORM SA3E. PAGE 3.					Account	VOTENIOD: 2017/02
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
Mid-Plains Tele	phone, LLC	,			63437	- Numb
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76, substitute program bas	ystem during the ons in effect or .61(e)(2) and (4 is, as explaine	ne accounting I June 24, 198 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
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Note: If you are utilizing	g multiple char	•	•	•	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	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID	Namo
Mid-Plains Tele	•				63437	/
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		CHANN	EL LINE-UP	AU		
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	IFR OF CABLE SY	/STFM·			SYSTEM ID#	<u> </u>			
Mid-Plains Tele					63437	Namo			
PRIMARY TRANSMITTE	<u> </u>								
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	G, identify every system during the lons in effect or 6.61(e)(2) and (sis, as explaine	television stance accounting June 24, 194, or 76.63 (rd in the next p	period, except 81, permitting the eferring to 76.6 paragraph.	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television			
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program									
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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.									
		-			s such as HBO, ESPN, etc. Identify				
cast stream as "WETA WETA-simulcast).	-2". Simulcast	streams must	be reported in o	column 1 (list each	ion. For example, report multi- n stream separately; for example				
its community of licens on which your cable sy	e. For example stem carried the	e, WRC is Cha ne station.	annel 4 in Wash	ington, D.C. This	on for broadcasting over-the-air in may be different from the channel				
educational station, by (for independent multion For the meaning of the	entering the le cast), "E" (for no ese terms, see	tter "N" (for no oncommercial page (v) of the	etwork), "N-M" (I educational), o e general instruc	for network multicate. Fer "E-M" (for noncontions located in the	pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). ne paper SA3 form. s". If not, enter "No". For an ex-				
cable system carried th	ave entered "Yo ne distant statio	es" in column on during the	4, you must cor accounting perion	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system				
of a written agreement	ion of a distant entered into o	multicast stre n or before Ju	eam that is not s ine 30, 2009, be	ubject to a royalty tween a cable sys	payment because it is the subject stem or an association representing transmitter, enter the designa-				
tion "E" (exempt). For sexplanation of these th	simulcasts, also ree categories	enter "E". If see page (v)	you carried the of the of the general i	channel on any ot instructions locate	d in the paper SA3 form. to which the station is licensed by the				
	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.				
		CHANN	EL LINE-UP	AV					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE					
	NUMBER	STATION		(If Distant)					
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Mid-Plains Tele	ephone, LLC	;			63437	
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 bas Substitute Pasis Substitute Pasis Substitute Basis 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 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 multice For the meaning of the Column 5: If you h cable system carried the cable system carried the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the Column	G, identify even by system during the ions in effect or ions. With in CC rules, regular here in space only on a substand also in spatioformation concurn. In station's call associated with example system carried the in each case we entered "Ye in each case we entered "Ye in edistant station ion on a part-time ion of a distant at entered into or a primary trans simulcasts, also are categories e location of ea	y television standard accounting in June 24, 194, or 76.63 (rd d 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 the local service (v) of the local service (period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: a tit in space I (the referring to respect to the reported in coording to its own be reported in coording in struction area, (i.e. "coording period area, (i.e. "coording period area that is not some 30, 2009, be respected in coording period area to the general in true."	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of both on a substitution, see page (v) on a program services the television station of the television of the televisio	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your dering "LAC" if your cable system expapacity. expapacity. expapare to be	G Primary Transmitters: Television
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AW		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
						

ACCOUNTING PERIOD: 2017/02 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 63437 Mid-Plains Telephone, LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). AM or FM CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION N/A

FORM SA3E. PAGE 5.							ACCOUNTING I	PERIOD: 2017/02
LEGAL NAME OF OWNER OF Mid-Plains Telephone,		EM:					SYSTEM ID# 63437	Name
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	IT AND PROGRAM LOG					
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or a	uthorizations	. For a further	Substitute
1. SPECIAL STATEMENT	_							Carriage: Special
 During the accounting per broadcast by a distant stat 		r cable system	carry, on a substitute basi	s, any nonne	twork telev	ision progra	m ⊠No	Statement and Program Log
Note: If your answer is "No"	, leave the	rest of this pag	ge blank. If your answer is	'Yes," you mι	ust comple	te the progra	am	. rogram 20g
period, was broadcast by a under certain FCC rules, res SA3 form for futher informatitites, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broat the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please a of every noi distant stati gulations, o tion. Do no ucy" or "NE n was broad sign of the s dcast static adian static th and day we "5/7." es when the Example: a er "R" if the and regulatic ogramming	m on a separa attach additional network televion and that your authorization to use general of the control of t	al pages. ision program (substitute pur cable system substitute s. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ged by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instructio "basketball". lo." m. station is lice station is idenorogram. Use cable system. 15 p.m. to 6:2 mming that ye; enter the let	during the ramming cons located List speciansed by the httified). In the time and the time are seen as a constant of the	accounting of another sta in the pape fic program e FCC or, in with the mo mes accurate should be n was require e listed pro	ation r onth ely	
9	UBSTITUT	E PROGRAM			EN SUBST		7. REASON	ı
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES TO	FOR DELETION	1
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ACCOUNTING PERIOD: 2017/02 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Mid-Plains Telephone, LLC

PART-TIME CARRIAGE LOG

SYSTEM ID#

63437

J

Part-Time Carriage Log

In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.

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

- Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.–12:00 p.m."

		DATES	AND HOURS (OF PART-TIME CAR	RRIAGE			
CALL SIGN WHEN CARRIAGE OCCURRED			CALL SIGN	WHEN	WHEN CARRIAGE OCCURRED			
	DATE	HOUF FROM	TO		DATE	FROM	OURS TO	
N/A							_	
		_					_	
		_					_	
		_					_	
							_	
		 -						
		<u> </u>						
		 -						
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		<u> </u>						

U.S. Copyright Office

	SA3E. PAGE 7.			
LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
Mid	-Plains Telephone, LLC		63437	Name
Inst all a (as i page	COSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's section determined 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. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission compute this amount	service , see 715,777.60	K Gross Receipts
Instru Com Com If yo fee t	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: aplete block 1, showing your minimum fee. aplete block 2, showing whether your system carried any distant television stations. For 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. For any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.	arts of the DSE Scho	edule	L Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should $\mathfrak k$ $\mathfrak k$ 3 below.	e entered on line 1 d	T	
3 be				
	rt 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	
	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.			
	Line 1. Enter the amount of gross receipts from space K	\$	715,777.60	
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.			
	This is your minimum fee.	\$	7,615.87	
	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 checo	k	
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	<u></u> \$		
	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	\$	7,615.87	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	\$	725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	8,340.87	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		

Nama	LEGAL NAME OF OWNER OF	CABLE S	YSTEM:	SYSTEM ID#						
Name	Mid-Plains Telepho	ne, LL	C	63437						
	CHANNELS									
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations									
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
Channels	1 Enter the total number	har of a	hannels on which the cable							
			hannels on which the cable padcast stations	15						
	-,									
	2. Enter the total num	ber of a	ctivated channels							
		-	carried television broadcast stations	412						
	and nonbroadcast se	ervices								
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)									
Be Contacted										
for Further Information	Name Peggy S	myka	Telephone	(802) 485-9748						
illiorillation										
	Address 24 Depo	t Squ et rural r	are, Unit 2 oute, apartment, or suite number)							
	Northfie									
	(City, town, sta									
	Email	financ	e@tdstelecom.com Fax (optional)							
	CERTIFICATION (This	statem	ent of account must be certifed and signed in accordance with Copyright Office re	egulations.						
0										
Certifcation	• I, the undersigned, he	reby cei	tify that (Check one, but only one, of the boxes.)							
	(Owner other than	corpora	ntion or partnership) I am the owner of the cable system as identifed in line 1 of space	ce B: or						
	(oo. oo. u.u	ос.ро		50 5, 61						
	(Agent of owner ot	her tha	n corporation or partnership) I am the duly authorized agent of the owner of the cab	ole system as identified						
			that the owner is not a corporation or partnership; or	,						
	(Officer or partner	·) I am a	n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as	owner of the cable system						
	in line 1 of space	e B.		•						
		d correct	it of account and hereby declare under penalty of law that all statements of fact contain to the best of my knowledge, information, and belief, and are made in good faith.	ined herein						
	,	,	-							
		Χ	/s/ Sharon V. Tisdale							
	-	Enter c-	electronic signature on the line above using an "/s/" signature to certify this statement.							
	((e.g., /s/	John Smith). Before entering the first forward slash of the /s/ signature, place your curso on, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lot.							
		Typed	or printed name: Sharon V. Tisdale							
		Title:	Assistant Treasurer (Title of official position held in corporation or partnership)							
	ı	Date:	February 26, 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

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name				
Mid-Plains Telephone, LLC	63437	Name				
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO						
YES. Enter the total here and list the satellite carrier(s) below						
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 For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for		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	× 0.00274					
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	erest charge)					
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further ass contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.						
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.						
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyrigh please list below the owner, address, first community served, accounting period, and ID number as given filing.						
Owner Address						
First community served Accounting period ID number						

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

ACCOUNTING PERIOD: 2017/02

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that the color of the color of the color of the party of the color of the party of the part	

Note that local stations are not counted at all in computing DSEs. $\label{eq:DSEs}$

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.
- 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
 (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) 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 I		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

Ψ0,001.00							
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: 2017/02

DSE SCHEDULE. PAG	E 11. (CONTINUED)					
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437					
1						
	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	
	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 of DSEs for	In the column headed "DSE' mercial educational station, given			= as "1.0"; for	each network or noncom-	
Category "O"	mercial educational station, giv	re the DSE as	CATEGORY "O" STATION	JS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Stations	CALL SIGN	DSL	CALL SIGN	DGL	CALL SIGN	DSL
Add rows as						
necessary.						
Remember to copy						
all formula into new						
rows.						

Name		elephone, LLC					s	63437
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all dista 2: For each station, give the correspond with the inform 3: For each station, give the 4: Divide the figure in column 4: Energy in the column 5: For each independent solution 6: For each independent solution 6: Multiply the figure in column 6: Multiply the station's	he number of hours mation given in space he total number of humn 2 by the figure in mal point. This is the station, give the "typ lumn 4 by the figure	your cable system to J. Calculate on ours that the station column 3, and g "basis of carriage e-value" as "1.0." in column 5, and	n carried the statily one DSE for each broadcast over ive the result in certain value" for the state of the cach network give the result in	ion during the accounting ach station. In the air during the accounting the air during the accounting the acco	ounting period. his figure must cational station,	
Capacity	<i>0,</i> 10 101111	C	ATEGORY LAC	STATIONS: (COMPUTATION	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. NI JRS 0 ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAGI VALUE	5. TYPE	6. DS	βE
						x		
			÷	=		X	<u>=</u>	
			÷	=		x	=	
						x x		
							=	
	Add the DSEs	of CATEGORY LAC Sof each station. Im here and in line 2 of page		e,	▶	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations and efferations are spaced in the spaced in th	e the call sign of each start by your system in substituted on October 19, 1976 (or more live, nonnetwo). For each station give the This figure should correst Enter the number of days Divide the figure in column This is the station's DSE	itution for a program as shown by the lett ork programs during number of live, non spond with the informs in the calendar yearn 2 by the figure in	that your system er "P" in column 7 that optional carrie network programs nation in space I. rr. 365, except in a column 3, and giv	was permitted to of space I); and age (as shown by the carried in substi- a leap year. the the result in co	delete under FCC rules the word "Yes" in column 2 itution for programs that lumn 4. Round to no less	2 of were deleted s than the third	rm).
		SUI	BSTITUTE-BAS	IS STATIONS	S: COMPUTA	TION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=		÷		=
		÷		=		÷		=
		÷		=		÷		=
		÷		=		÷		=
	Add the DSEs	of SUBSTITUTE-BASI of each station. Im here and in line 3 of pa		2,	.	0.00		
5 Total Number of DSEs	number of DSE: 1. Number o 2. Number o	ER OF DSEs: Give the am s applicable to your system f DSEs from part 2 ● f DSEs from part 3 ● f DSEs from part 4 ●		in parts 2, 3, and	4 of this schedule	and add them to provide	0.00 0.00 0.00	
	TOTAL NUMBE	R OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2017/02

LEGAL NAME OF C		SYSTEM:					S	YSTEM ID# 63437	Name
Instructions: Blod In block A: • If your answer if schedule. • If your answer if	"Yes," leave the re	emainder of p		7 of the DSE sche	edule blank a	nd complete p	art 8, (page 16) of	the	6
ii your answer ii	140, complete bit			ELEVISION M	ARKETS				Computation of
_	1981?	schedule—[•	iller markets as de				gulations in	3.75 Fee
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	of distant st and regulation oe DSE Sche	ations listed in ons prior to Ju dule. (Note: Tl	part 2, 3, and 4 of ne 25, 1981. For fune letter M below r	f this schedul urther explan	e that your sys	ted stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC r. A Stations carrier 76.61(b)(c)] B Specialty static C Noncommeric D Grandfather for instructions for E Carried pursua *F A station pre	ed pursuant to a defined al education of a station (76. or DSE schedant to individually carried JHF station w	ulations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag dule). ual waiver of F ed on a part-tin vithin grade-B	ne or substitute ba contour, [76.59(d)(ese in effect of 6.57, 76.59(b) e)(1), 76.63(a) referring betitution of goes is prior to Justin estimate the statement of the	n June 24, 198 b), 76.61(b)(c), a) referring to 7 g to 76.61(d) grandfathered s	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			worksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	•	······································			•	<u> </u>		0.00	
								0.00	
		В	LOCK C: CO	MPUTATION OF	= 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				-	
Line 2: Enter the	sum of permitte	d DSEs fro	m block B ab	ove				-	
Line 3: Subtract (If zero, I				r of DSEs subjec 7 of this schedu		rate.	· ·	0.00	
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375	and enter si	um here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DSI	Es from line	3				x		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7))		0.00	

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

	63437									-Plains Te	
			_	JED)	(CONTINU	ION MARKETS		BLOCK			
6	3. DSE	PERMITTED BASIS	2.	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	
Computation 3.75 Fee											
											•••
											•••
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Name	LEGAL NAME OF OWN Mid-Plains Tele									S	4931EM ID# 63437	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You I stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fo A—Part-time sp 76.59(B—Late-night pr 76.61(S—Substitute ca general Column 5: Indicate Column 6: Comparin block	must complete or to June 25, call sign for ea the DSE for the accounting the basis of cCC rules and ecialty progra (d)(1),76.61(e rogramming: (e)(3)). arriage under al instructions the station's I e the DSE figure. B, column 3 conformation you information you call significant the station's I enter the the the DSE figure.	e this works 1981, unde ach distant s nis station fr g period an- arriage on v regulations mming: Car)(1), or 76.6 Carriage und certain FCC in the pape DSE for the ures listed ir of part 6 for	or former station icor a sing d year ir which the cited be triage, or if of the current in column this stat	FCC rules go dentifed by the gle accounting in which the cale station was clow pertain to in a part-time bring to 76.61(e) rules, section regulations, or orm. Tegulations, or orm. 2, 3, and 4 must be dentified and 5 and	ver let per rria carr tho asi)(1) s 7 au	entifed by the letter "F" ning part-time and sub tter "F" in column 2 of priod, occurring between ge and DSE occurred ried by listing one of the use in effect on June 24 is, of specialty program)). 6.59(d)(3), 76.61(e)(3) thorizations. For further das computed in parts at the smaller of the two use accurate and is subject to the subject to the subject to the subject to the smaller of the two use accurate and is subject to the smaller and subject to the subject to t	stitute carri part 6 of the n January 1 (e.g., 1981/ e following I, 1981. Iming unde n, or 76.63 (r explanation 2, 3, and 4 of figures her	age. DSE schedule, 1978 and Jur 1) etters FCC rules, sereferring to on, see page (voof this schedule). This figure is	ections of the should be	e., those 981 se entere	
						ED	ON A PART-TIME AN					_
	1. CALL SIGN	2. PRIC			OUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE	
	0.014	502			- NOB		67 II II II IOL		,02		502	
								•••••				
Computation of the Syndicated Exclusivity Surcharge		"Yes," comple "No," leave b	ete blocks B locks B and E	C blank	and complete A: MAJOR	TE	art 8 of the DSE schedo ELEVISION MARKI t as defined by section 7	ET	rules in effect I	une 24	10812	
ouronarge	Yes—Complete	,		ioo majo	T toloviolon ma	ı	No—Proceed to			uno 2 1,		
	BLOCK B: Ca	arriage of VHI	F/Grade B C	Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSE	3	
	Is any station listed in commercial VHF stati or in part, over the ca	on 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			riate pern	nitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE	
	CALL SIGN	DSE	CALL S	IGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE	
												
								 				
		<u> </u>	TOTAL D	OSEs	0.00			<u> </u>	TOTAL DS	Es	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC	SYSTEM ID# 63437	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	715,777.60	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
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Exclusivity Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period? 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 DS	E	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	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.		
44	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 6343	
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). \$\begin{array}{c} \\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
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. bock 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 is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers located 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	
	_	our cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1		
	Section 2	Enter the amount of gross receipts from space K (page 7)	
	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)	

DSE SCHEDULE. PAGE 17.	ACCOUNTING PERIOD: 2	2017/02
	/STEM ID#	ne
Mid-Plains Telephone, LLC	63437 Naii	
Section 4 If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
A. Enter 0.01064 of gross receipts (the amount in section 1)	8	
B. Enter 0.00701 of gross receipts (the amount in section 1)	Comput	Ī
C. Multiply line B by 3.000 and enter here >	Base Rat	te ree
D. Enter 0.00330 of gross receipts (the amount in section 1)		
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. 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	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast s instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel lin Space G.)
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advance exclusion, you must:	ntage of this of	Ī
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each subscriber group. That total is the base rate fee for your system.	number of Syndic	d cated sivity arge
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below if your cable system is wholly located outside all major television markets, complete block A only.	7, you must Partia	ally ant
How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station carried to that community.	you for Part Permit Statio	tted
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Eac subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a system will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system groups.	's subscriber	
In each section:		
 Identify the communities/areas represented by each subscriber group. Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of subscribers in the group. 	the	

- lf:
- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- \bullet Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 63437 Mid-Plains Telephone, LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

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

LEGAL NAME OF OW Mid-Plains Tele						S	YSTEM ID# 63437	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECOND	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee
								and
								Syndicated Exclusivity
		H	···-	-	•••••	<u> </u>		Surcharge
								for
								Partially
								Distant
			····					Stations
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
••••••	•••••							
							····	
	•••••			-				
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
			scriber group	as shown in the boxe	s above.	•	0.00	
Enter here and in blo	บck 3, line 1,	space L (page /)				\$	0.00	

LEGAL NAME OF OWNE Mid-Plains Teleph						S	YSTEM ID# 63437	Name
		COMPUTATION O SUBSCRIBER GRO	UP	TE FEES FOR EAC	SIXTH	IBER GROUP 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 Fed
								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 Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO		00144444744		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>			-		
						-		
						- 		
		-						
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	
ee: Add th	e base rat			Base Rate Fee Fou		\$	0.00	

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
	BLOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA	······		0	COMMUNITY/ ARE	:A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated Exclusivity
			····	1				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	
	ELEVENTH	SUBSCRIBER GRO	OUP		TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	:A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
				-				
					<u></u>			
			····		•••••			
					<u></u>			
		•	····		•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
								
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
					·····			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	
F	IFTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
								
						-		
						-		
						-		
			<mark></mark>					
						-	<u></u>	
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
							_	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		H		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	····		<u></u>					and
								Syndicated Exclusivity
					•••••		····	Surcharge
								for
								Partially
			<u></u>					Distant
	····				·····			Stations
				1				
		-						
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	
N	INTEENTH	SUBSCRIBER GRO	UP		TWENTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u></u>					
	····							
		-						
		-	<u></u>					
				·	·····		····	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	the base rat	re fees for each subs		as shown in the boxe		\$	0.00	

LEGAL NAME OF OWN Mid-Plains Teleph						S	YSTEM ID# 63437	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	ITY-FIRST	SUBSCRIBER GRO		TWEN	TY-SECOND	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ILL OIGH	502	O/ILL CICIT	502	OF ILLE CICIT	502	OF ILLE GIGIT	562	Base Rate Fee
								and
								Syndicated
								Exclusivity
		-						Surcharge
		-						for
								Partially
	···		<mark></mark>			-		Distant
						-	····	Stations
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Total DSEs	<u>'</u>		0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWEN	TY-THIRD	SUBSCRIBER GRO	UP	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	
		-						
		-				-		
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	···				·····			
		-				-		
						-		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add ti Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437									
				TE FEES FOR EAC	CH SUBSCR	RIBER GROUP			
		SUBSCRIBER GRO		tt -		SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
	····							Exclusivity	
	····		····			-	····	Surcharge for	
								Partially	
								Distant	
								Stations	
						H			
						<u> </u>			
						<u> </u>			
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 (•	\$	0.00	Base Rate Fee Sec		\$	0.00		
TWENTY-SEVENTH SUBSCRIBER GROUP				11		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs			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: Mid-Plains Telephone, LLC 63437									
				TE FEES FOR EAC					
		SUBSCRIBER GRO				SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
						-		Syndicated	
						-		Exclusivity Surcharge	
						-		for	
								Partially	
		-						Distant	
						-		Stations	
		ļ			·····				
		-							
						Ц			
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 Seco	ond Group	\$	0.00		
THIRTY-FIRST SUBSCRIBER GROUP			ii		SUBSCRIBER GROU				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u></u>		····	-			
		<u> </u>							
		<u> </u>				-			
			 			-	<u> </u>		
	····				<u></u>	-			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add t			scriber group	as shown in the boxe	s above.	\$			

EGAL NAME OF OWNER OF CABLE SYSTEM: Wid-Plains Telephone, LLC 63437									
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP			
	RTY-THIRD	SUBSCRIBER GRO		tt -		SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
07.122.01011	202	07.122 01.01.1	302	37.EE 373.T	202	07.122.01011	302	Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
			<u></u>			-		Surcharge	
	····					-		for Partially	
	···	H						Distant	
								Stations	
			<mark></mark>						
			<mark></mark>						
			<mark></mark>						
Total DSEs			0.00	Total DSEs		<u> </u>	0.00		
Gross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$	0.00		
<u> </u>			0.00	Cross receipts eed	ona Group		0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	RTY-FIFTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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	····					-	<u></u>		
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			<u></u>						
T. I. DOF			0.00	T			0.00		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add t			scriber group	as shown in the boxe	es above.	\$			

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437									
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL		
9	JP	SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH			
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										
Surcharge	····	H								
for										
Partially										
Distant										
Stations										
		<u> </u>								
						-				
••••										
_	0.00			Total DSEs	0.00			Total DSEs		
-	0.00	\$	d Group	Gross Receipts Secon	0.00	Gross Receipts First Group \$ 0.00				
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G		
	JP	SUBSCRIBER GROU	FORTIETH		JP	SUBSCRIBER GROU	Y-NINTH	THIRT		
 	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
							-			
								••••••		
		_								
	•••••	-								
	0.00			Total DSEs	0.00			Total DSEs		
- 1	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G		
- 7			- 1-				e			
				Base Rate Fee Fourth	0.00	 		Base Rate Fee Third G		

EGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437									
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	RIBER GROUP			
	RTY-FIRST	SUBSCRIBER GRO		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 Fe	
								and	
								Syndicated Exclusivity	
	···						····	Surcharge	
								for	
								Partially	
								Distant	
								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		
FOR	TY-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		
				-			····		
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	···				••••				
	<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		
	he base rat	re fees for each subs		as shown in the boxe		\$	0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437								
		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROI	UP	•
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
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
			0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FORTY-SEVENTH SUBSCRIBER GROUP				II		SUBSCRIBER GROU		
COMMUNITY/ AREA 0			U	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-						
T. / I DOE			0.00	T 1 1 DOE			0.00	
	Total DSEs 0.00			Total DSEs	41- 0		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	иі Стоир	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	٠		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
								Stations
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
			0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FIFTY-FIRST SUBSCRIBER GROUP				ii .		SUBSCRIBER GROU		
COMMUNITY/ AREA	4		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 Group	\$	0.00	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437									
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		RIBER GROUP	IP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								Syndicated	
								Exclusivity Surcharge	
								for	
								Partially Distant	
		_						Stations	
			<u></u>						
Total DSEs	!	-	0.00	Total DSEs	•		0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First Group \$ 0.00				Base Rate Fee Sec		\$	0.00		
FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0			0 0	COMMUNITY/ ARE		SUBSCRIBER GROU	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		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: Mid-Plains Telephone, LLC 63437								
				TE FEES FOR EACH				
FIFTY-S	EVENTH	SUBSCRIBER GROU		FIF.	TY-EIGHTH	SUBSCRIBER GROU	IP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						 		and
						-		Syndicated Exclusivity
						-		Surcharge
								for
								Partially
								Distant
						 		Stations
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			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	
FIFT	Y-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>		<u></u>	
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							2.22	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Mid-Plains Teleph						S	YSTEM ID# 63437	Name
				TE FEES FOR EAC				
	KTY-FIRST	SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						-		Syndicated
	···							Exclusivity Surcharge
		H				-		for
								Partially
		_						Distant
						-		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			0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-THIRD SUBSCRIBER GROUP			11		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>			-		
			 			-	<u> </u>	
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add t Enter here and in bloc			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437									
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	D	•	
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	Į.	<u> </u>	0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00		
			0.00	Base Rate Fee Second		\$	0.00		
SIXTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0)P 0	COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GROUP	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 Fourth	Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$			

Name	43437 63437	5						LEGAL NAME OF OWNE Mid-Plains Teleph
		BER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (BL
9		SUBSCRIBER GROU	VENTIETH	İ		SUBSCRIBER GRO	TY-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated								
Exclusivit								
Surcharge								
for Partially								
Distant								
Stations			·		<u> </u>			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gi
	JP	SUBSCRIBER GROU	Y-SECOND	SEVENT	UP	SUBSCRIBER GRO	TY-FIRST	SEVEN
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	n Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
SEVEN	NTY-THIRD	SUBSCRIBER GRO	UP	SEVEN	ITY-FOURTH	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
			<u></u>		<u></u>	-		Base Rate Fee
	····				····	-		Syndicated
						-		Exclusivity
								Surcharge
								for
								Partially
						-		Distant
	<mark></mark>		<u></u>			 		Stations
			<u></u>		·····	-		
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					••••			
					•••••			
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	
SEVE	NTY-FIFTH	SUBSCRIBER GRO	UP	SEV	ENTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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						-		
						1		
						+		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Mid-Plains Teleph						S	YSTEM ID# 63437	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
SEVENTY-	SEVENTH	SUBSCRIBER GRO	UP	SEVE	NTY-EIGHTH	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
	<u></u>							Syndicated
					·····		<u></u>	Exclusivity
	<u> </u>			 	·····		<u></u>	Surcharge for
			···			-		Partially
								Distant
								Stations
	<u>.</u>						<u></u>	
	<mark> </mark>							
	<mark></mark>		<u> </u>				<u></u>	
					·····		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroun	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Cross reserve riner e	поир			Cross rescripts ess	ona Oroap	<u> </u>		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	<u></u>	-						
			····		·····		<u> </u>	
	··		<mark></mark>			-		
	<u> </u>		<u></u>			-		
	<u>.</u>		<u></u>					
	<mark></mark>					-		
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 the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROUP	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
	<u></u>							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 Secon	nd Group	\$	0.00	
		SUBSCRIBER GROL		II		I 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>			
	···				···	- 		
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Mid-Plains Teleph						S	YSTEM ID# 63437	Name
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	UP	_
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
			<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	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO	UP 0	ii e		SUBSCRIBER GROU		
COMMUNITY/ AREA			<u>U</u>	COMMUNITY/ AREA	······		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-					
		<u> </u>		-	····			
		<u> </u>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER Mid-Plains Telepho						SY	63437	Name
				TE FEES FOR EACH				
EIGHT COMMUNITY/ AREA	Y-NINTH	SUBSCRIBER GROU	0	COMMUNITY/ AREA	NINTIETH	SUBSCRIBER GROUP	0	9 Commutation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
37.22 3.3.1	302	3,122 3,3,1	202	37.122.31311	202	37.22 37317	302	Base Rate Fee
								and
							<u> </u>	Syndicated
								Exclusivity Surcharge
								for
								Partially
							ļ	Distant
								Stations
								
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00	
	Y-FIRST	SUBSCRIBER GROU		İ	-SECOND	SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							ļ	
							<u> </u>	
							<u> </u>	
							ļ	
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWN Mid-Plains Telepl						S	YSTEM ID# 63437	Name
E	BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCR	RIBER GROUP		
	TY-THIRD	SUBSCRIBER GRO		tt -		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122.01011	302	07.22 0.0.1	202	07.22 0.0.1	202	0/122 0/0/1	332	Base Rate Fee
								and
								Syndicated
								Exclusivity
	<u></u>					-		Surcharge
	···	-				-		for Partially
	···	H						Distant
								Stations
	<u></u>							
	<u></u>						<u></u>	
	<u></u>							
Total DSEs		<u> </u>	0.00	Total DSEs		Į.Į.	0.00	
Gross Receipts First 0	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	
NINI	ETY-FIFTH	SUBSCRIBER GRO	DUP	N	NETY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						H		
		-				 		
	···	H				-		
			••••			-		
						-		
						-		
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	
	- ep	i.	3.30		- · P	L	3.30	
Base Rate Fee: Add t Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

O COMMUNITY/ AREA O COMPUTATION AREA O COMPUTATION OF BASE RATE FE and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fe Second Group \$ 0.00 O.00 Base Rate Fe Second Group \$ 0.00 O.00 COMMUNITY/ AREA O COMMUNITY/ AREA O	LEGAL NAME OF OWNER OF CAB Mid-Plains Telephone, LL					S	YSTEM ID# 63437	Name
O COMMUNITY/ AREA O COMPUTATION AREA O COMPUTATION OF BASE RATE FE and Syndicated Exclusivity Surcharge for Partially Distant Stations O .00	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
Computation CALL SIGN DSE CALL SIGN DSE GALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fe Second Group \$ 0.00 O.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDREDTH SUBSCRIBER GROUP O COMMUNITY/ AREA O		SUBSCRIBER GROU		H .		I SUBSCRIBER GROU	JP	۵
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 COMMUNITY/ AREA O COMMUNITY/ AREA O	COMMUNITY/ AREA		0	COMMUNITY/ AREA	······		0	
and Syndicated Exclusivity Surcharge for Partially Distant Stations 1 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 1 0.00 Base Rate Fee Second Group \$ 0.00 1 0.00 ONE HUNDREDTH SUBSCRIBER GROUP 1 0 COMMUNITY/ AREA 0	CALL SIGN DSE	CALL SIGN	DSE			11		of
Syndicated Exclusivity Surcharge for Partially Distant Stations								
Exclusivity Surcharge for Partially Distant Stations								
Surcharge for Partially Distant Stations					····			
1								
Distant Stations								for
0.00								
0.00 Total DSEs 0.00 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0					<u></u>			
0.00 Gross Receipts Second Group \$ 0.00 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0								Stations
0.00 Gross Receipts Second Group \$ 0.00 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0		<u> </u>						
0.00 Gross Receipts Second Group \$ 0.00 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0								
0.00 Gross Receipts Second Group \$ 0.00 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0								
0.00 Gross Receipts Second Group \$ 0.00 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0								
0.00 Gross Receipts Second Group \$ 0.00 0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0								
0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0	Total DSEs		0.00	Total DSEs			0.00	
BSCRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA O	Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
0 COMMUNITY/ AREA 0	Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	NINETY-NINTH	SUBSCRIBER GROU	JP	ONE H	UNDREDTH	I SUBSCRIBER GROU	JP	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					····			
				·				
<u></u>								
0.00 Total DSEs 0.00	Total DSEs		0.00	Total DSEs			0.00	
0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third Group	\$			th Group	\$	-	
Sisse Resemble Federal Group	S. 555 Probbipto Tillia Group	·		l coc i tocipio i dui	O. Jup	*		
0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDI	RED FIRST	SUBSCRIBER GRO	UP	ONE HUNDR	ED 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
	<u></u>							Base Rate Fee
								and
						 		Syndicated
			<u></u>					Exclusivity Surcharge
	····		···			-		for
	····		······································			-		Partially
	••••							Distant
								Stations
	<u>.</u>					-		
	····		····					
Total DSEs		_	0.00	Total DSEs		Ш	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Page Bate Fee First (Croup		0.00	Base Bate Fee Soo	and Craun		0.00	
Base Rate Fee First (SUBSCRIBER GRO		Base Rate Fee Sec		SUBSCRIBER GROU	0.00	
COMMUNITY/ AREA		OODOONIBEN GIVE	0	COMMUNITY/ ARE		OODOONBEN GROO	0	
OOMMONT IT TAKEN				OGINIMOTAT 17 7 ATCE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
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	····	-	···			-		
	••••							
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts 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			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Mid-Plains Telepl						S	YSTEM ID# 63437	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDE	RED FIFTH	SUBSCRIBER GRO	UP	ONE HUN	DRED SIXTH	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
			<u></u>			-		and
						-		Syndicated Exclusivity
						-		Surcharge
	···	H				-		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	SEVENTH	SUBSCRIBER GRO)UP	ONE HUND	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
						-		
						-		
	<mark></mark>		<u></u>			-		
	<u></u>						<u></u>	
	<u></u>						<u> </u>	
	···		<u></u>			•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Mid-Plains Teleph						S	YSTEM ID# 63437	Name
Е	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDR	ED NINTH	SUBSCRIBER GRO	UP	ONE HUND	RED TENTH	SUBSCRIBER GROU	JP	•
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>		<u></u>					
	<u></u>						<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
		·				·		
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00	
	LEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						 		
						 		
	•••				····			
			<u></u>					
	<u></u>		<mark></mark>				<u></u>	
			<u></u>				<u></u>	
	<u></u>						····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Mid-Plains Teleph						S	YSTEM ID# 63437	Name
				TE FEES FOR EAC				
ONE HUNDRED THI	RTEENTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED FO		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA							U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						-		Base Rate Fee
	···		<u></u>					and Syndicated
			<u></u>			-		Exclusivity
								Surcharge
						-		for
	···		<u></u>		·····	-		Partially Distant
		H	<u></u>					Stations
			<u> </u>			-		
			<u></u>		·····	-		
			<u></u>			<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	IFTEENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>			-		
						-		
			<u></u>			-		
			<u>-</u>		·····	-		
			<u></u>			-		
			<u></u>		·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 63437	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED E	IGHTEENTH	I 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
	<u></u>				<u></u>			Base Rate Fee
	<mark></mark>			-	·····			and Syndicated
	···				••••			Exclusivity
								Surcharge
								for
								Partially
								Distant
	<u> </u>		······································		····			Stations
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Froup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED NI	NTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···				•••••			
	<mark></mark>			-	·····			
	···	-		·				
		=						
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	I:				- -			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAG	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GRO		ONE HUNDRED TWE	NTY-SECOND	SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
		-				<u> </u>		Surcharge
						<u> </u>		for
			<u></u>					Partially
			<u></u>		<mark>.</mark>			Distant
			<u></u>		·····			Stations
	····		<u></u>					
			<u></u>					
						-		
						+		
	····					 		
Total DSEs			0.00	Total DSEs		!!	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
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>		<mark>.</mark>			
			<u></u>		·····	<u> </u>		
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					····	-		
						H		
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 OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU	Р	ONE HUNDRED T	WENTY-SIXTH	SUBSCRIBER GROUP)	٥
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	····				<u> </u>			Base Rate Fo
	····				·····			Syndicated
	····						····	Exclusivity
								Surcharge
								for
								Partially
	····				·····			Distant Stations
								Otations
					<u></u>			
						1		
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	ond Group	\$	0.00	
NE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP)	
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	ırth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRI	ED THIRTIETH	I SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	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 TH	IRTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED THI	IRTY-SECONE	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE Mid-Plains Telepho						S	YSTEM ID# 63437	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	RIBER GROUP		
	TY-THIRD	SUBSCRIBER GROUP				I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						-		Syndicated
						-	<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	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second		\$	0.00	
	RTY-FIFTH	SUBSCRIBER GROUP		ii .		I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·					-		
						-		
						-		
					<mark></mark>	-		
					···	-		
								
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 the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Mid-Plains Telepho						SY	63437	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED THIRTY- COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GROUP	0	ONE HUNDRED THIR COMMUNITY/ AREA	TY-EIGHTH	SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
							*	and
								Syndicated
							ļ	Exclusivity
		-						Surcharge
								for Partially
							·····	Distant
								Stations
								
		-						
								
								
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second		\$	0.00	
ONE HUNDRED THIR	TY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED I	FORTIETH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
								
								
								
		-						
								
								
								
							†	
Total DSEs	- "		0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rat Base Rat and Syndica Exclusi Surcha for Partia Dista	LEGAL NAME OF OWNE Mid-Plains Teleph						S	YSTEM ID# 63437	Name
COMMUNITY/ AREA DOE	Bl	_OCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee First Group \$ 0.00 Gross Receipts First Group \$ 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DATE OF Partial DSEs COMMUNITY/ AREA 0 0 COMM	ONE HUNDRED FOR	RTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-SECONI	SUBSCRIBER GROUP)	۵
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rat and a specific process of the control of the c				0					Computation
Total DSEs Gross Receipts First Group ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SI				DSE	H				of
Syndicing Exclusion Sourchaster Sourchaster Station Total DSEs				<u></u>					
Total DSEs									Syndicated
Surcha for for John John John John John John John John			_						Exclusivity
Partia Dista Statio Total DSEs									Surcharge
Total DSEs Total									for
Total DSEs Gross Receipts First Group Base Rate Fee First Group S ONDE HUNDRED FORTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL									Partially
Total DSEs O.00 Gross Receipts First Group South Note of Property of State of Stat									Stations
Gross Receipts First Group Sase Rate Fee First Group Base Rate Fee Second Group ONE HUNDRED FORTY-FURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DS									Otations
Gross Receipts First Group Base Rate Fee First Group ONE HUNDRED FORTY-FURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Gross Receipts First Group Base Rate Fee First Group ONE HUNDRED FORTY-FURTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Gross Receipts First Group Base Rate Fee First Group ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Gross Receipts First Group Base Rate Fee First Group S ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL S									
Gross Receipts First Group Base Rate Fee First Group ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Base Rate Fee First Group ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA OCCIDIONAL SIGN DSE CALL SIGN DSE CALL SIGN	Total DSEs				Total DSEs			•	
ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DS	Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG	Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	ONE HUNDRED FOR	RTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
Total DSEs O.00 Total DSEs O.00 Gross Receipts Third Group O.00 Gross Receipts Fourth Group O.00 Total DSEs O.0	COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00						·····			
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
	Γotal DSEs			0.00	Total DSEs			0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 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 base rate fees for each subscriber group as shown in the boxes above.	Base Rate Fee: Add th	ne hase rat	te fees for each subs	criher group	as shown in the hove	es ahove			

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba CALL SIGN DSE CALL SIGN DS	9 Computation of Base Rate For and Syndicate Exclusivities Surcharge for Partially Distant Stations
COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba SE SE SE SE SE SE SE SE SE S	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Back SIGN DSE SIGN DSE SIGN DSE SIGN DSE SIGN DSE DATE SIG	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba CALL SIGN DSE CALL SIGN DS	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	and Syndicate Exclusivit Surcharge for Partially Distant
Total DSEs O.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Syndicate Exclusivit Surcharge for Partially Distant
Total DSEs O.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Exclusivit Surcharge for Partially Distant
Total DSEs O.00 Gross Receipts First Group Sase Rate Fee First Group ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O	for Partially Distant
Total DSEs O.00 Gross Receipts First Group Sase Rate Fee First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA OCCUMMUNITY/ AREA	Partially Distant
Total DSEs O.00 Gross Receipts First Group Sase Rate Fee First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA OCCUMMUNITY/ AREA	Distant
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
siross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 NE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
ross Receipts First Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 NE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
siross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 NE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
Gross Receipts First Group \$ 0.00 Sase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 DINE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 DINE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 DINE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
CALL SIGN DES CALL SIGN DES CALL SIGN DES	
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 Fourth Group \$ 0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	

LEGAL NAME OF OWNE Mid-Plains Telepho						SY	STEM ID# 63437	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	FIFTIETH	SUBSCRIBER GROU	Р	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			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROL	JP	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u>.</u>		<u></u>	
					·			
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		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	s	0.00	Gross Receipts Fourth	Group		0.00	
Cross recorpts mile C	Гоцр		0.00	Oroso rescipto i surti	ГОГОИР	*		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
				TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	<u></u>							and
								Syndicated
						-		Exclusivity Surcharge
	····	-	····			•		for
								Partially
								Distant
	<u></u>							Stations
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	••••	-						
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 E	ETV EIETU	SUBSCRIBER GRO	NID.	ONE HUNDRED	FIETY CIVIL	1 SUBSCRIBER GROU	ID.	
COMMUNITY/ AREA		30B3CNBLN GNC	0	COMMUNITY/ ARE		1 30B3CKIBEK GKO	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	<u></u>	-	<u></u>					
	····		····	·	······			
	••••							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
	0				outh Outs		_	
Gross Receipts Third	Эгоир	\$	0.00	Gross Receipts Fou	nui Gioup	\$	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.	\$		

LEGAL NAME OF OWN Mid-Plains Telep						S	YSTEM ID# 63437	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED	FIFTY-EIGHTH	SUBSCRIBER GROUP	1	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						<u> </u>		Base Rate Fee
						-		and Syndicated
						-		Exclusivity
								Surcharge
								for
			<u></u>					Partially
			<u></u>			-		Distant Stations
						-		Stations
Total DCCs			0.00	Tetal DCFs			0.00	
Total DSEs	_		0.00	Total DSEs				
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU	Р	ONE HUND	RED SIXTIETH	SUBSCRIBER GROUP	•	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>			-		
						-		
			<u></u>					
			<u></u>					
						-		
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 OWNE Mid-Plains Teleph						S	YSTEM ID# 63437	Name
В				TE FEES FOR EACH				
COMMUNITY/ AREA	FIRST	SUBSCRIBER GRO	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fed
					···			Syndicated
								Exclusivity
								Surcharge
								for
	···							Partially Distant
					<u></u>			Stations
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Total DSEs	•	-	0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon	nd Group	\$	0.00	
THIRD SUBSCRIBER GROUP					FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
		-				-		
			criber group	as shown in the boxes	above.	•	0.00	
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Name	63437	31				LE SYSTEM:		Mid-Plains Telepho	
				TE FEES FOR EACH				BL	
9	0	SUBSCRIBER GROUP	SIXTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	FIFTH	COMMUNITY/ AREA	
Computation									
of Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
and	<u>.</u>								
Syndicated						-			
Exclusivity									
Surcharge									
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	ross Receipts First Group \$ 0.00			
	0.00	\$	d Group	Base Rate Fee Second	0.00	Base Rate Fee First Group \$ 0.00			
	D	SUBSCRIBER GROUP	EIGHTH		JP	SEVENTH SUBSCRIBER GROUP			
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Total DSEs Gross Receipts Third G	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC SYSTEM ID# 63437								
				TE FEES FOR EACH				Bl	
9		SUBSCRIBER GROU	00144		SUBSCRIBER GRO	NINTH	001111111111111111111111111111111111111		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and		-	<u>.</u>						
Syndicated Exclusivity		-				H			
Surcharge		-			<u> </u>		··		
for			······						
Partially									
Distant			ļ						
Stations			<u> </u>			H			
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		H							
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	Receipts First Group \$ 0.00			
	0.00	\$	d Group	Base Rate Fee Secon	Base Rate Fee First Group \$ 0.00				
	JP .	SUBSCRIBER GROU	TWELVTH		ELEVENTH SUBSCRIBER GROUP				
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC SYSTEM ID# 63437								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	JRTEENTH			SUBSCRIBER GRO	RTEENTH		
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F						 			
and					.	H			
Syndicated			.						
Exclusivity Surcharge		-				H			
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	0.00		1	Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	Gross Receipts First Group \$ 0.00			
	0.00	\$	d Group	Base Rate Fee Secon	Base Rate Fee First Group \$ 0.00				
	IP	SUBSCRIBER GROU	IXTEENTH	S	FIFTEENTH SUBSCRIBER GROUP				
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

LEGAL NAME OF OWNER Mid-Plains Telepho			•			S	YSTEM ID# 63437	Name
BL	OCK A: 0	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
SEVEN	ITEENTH	SUBSCRIBER GRO	UP	Ele	GHTEENTH	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
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon	nd Group	\$	0.00	
NINTEENTH SUBSCRIBER GROUP				Т	WENTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	n 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 OWNE Mid-Plains Telepho						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GRO			Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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								Syndicated
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Total DSEs	•		0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWENT	Y-THIRD	SUBSCRIBER GRO	JP	TWENT	Y-FOURTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DCFa			0.00	Total DSE-			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third G	roup	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
	·	\$				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437								Name
				TE FEES FOR EACH				
	Y-FIFTH	SUBSCRIBER GRO			ITY-SIXTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
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T 1 1 DOE			0.00	T 1 1 DOE	<u> </u>		0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$ 0.00		
3ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWENTY-SEVENTH SUBSCRIBER GROUP				TWENT	Y-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u>. </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subso	criber group	as shown in the boxes a	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437									
				TE FEES FOR EACH						
9		SUBSCRIBER GROU	HIRTIETH			SUBSCRIBER GRO	TY-NINTH			
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate Fe										
and										
Syndicated Exclusivity										
Surcharge							·			
for						-				
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Distant						<u> </u>				
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	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	d Group	Gross Receipts Secon	0.00	Gross Receipts First Group \$ 0.00				
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr		
	IP	SUBSCRIBER GROU	-SECOND	THIRTY	JP	THIRTY-FIRST SUBSCRIBER GROUP				
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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				Total DSEs	0.00			Total DSEs		
	0.00									
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437								Name
				TE FEES FOR EACH				
	ry-THIRD	SUBSCRIBER GRO			Y-FOURTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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								Syndicated
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	ss Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00			
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon	d Group	\$	0.00	
THIRTY-FIFTH SUBSCRIBER GROUP				THIE	RTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
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Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Mid-Plains Telepho			•			SY	STEM ID# 63437	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU			Y-EIGHTH	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
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second	d Group	\$	0.00	
THIRTY-NINTH SUBSCRIBER GROUP					FORTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u> </u>		0.00	Total DSEs	1	П	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		re fees for each subsc	riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC SYSTEM ID# 63437								
				TE FEES FOR EACH				
	RTY-FIRST	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
								Base Rate Fee
								and
								Syndicated
								Exclusivity
		-						Surcharge for
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Total DSEs			0.00	Total DSEs		=	0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon	nd Group	\$	0.00	
FOR	TY-THIRD	SUBSCRIBER GRO	UP	FORT	Y-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Mid-Plains Telepho						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH				
	Y-FIFTH	SUBSCRIBER GRO			RTY-SIXTH	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
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Total DSEs			0.00	Total DSEs	-		0.00	
Gross Receipts First Gr	s Receipts First Group \$		0.00		Receipts Second Group \$ 0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-SEVENTH SUBSCRIBER GROUP				FORT	ΓΥ-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSFs			0.00	
			0.00	Total DSEs	_		0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
Total DSEs Gross Receipts Third G Base Rate Fee Third G	·	\$			·	\$		

Mid-Plains Telepho		LE SYSTEM:				S	43437 63437	Name
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GRO			FIFTIETH	SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
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Total DSEs	II		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FIF	TY-FIRST	SUBSCRIBER GRO	UP	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	
			0.00	Total DSEs			0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
Total DSEs Gross Receipts Third G	·	\$			•	\$		

Name	63437							Mid-Plains Teleph
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	TY-THIRD	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
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	JP			F	UP			FIF
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA CALL SIGN
	DSE	SUBSCRIBER GROU	DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE DSE	CALL SIGN CALL SIGN Total DSEs
	DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE DSE O.00	SUBSCRIBER GROU	DSE DSE	FIF COMMUNITY/ AREA
	DSE O.00	CALL SIGN	DSE Group	CALL SIGN CALL SIGN Total DSEs	DSE DSE O.00	SUBSCRIBER GROU	DSE DSE	CALL SIGN CALL SIGN Total DSEs

	YSTEM ID# 63437						R OF CABL	Mid-Plains Teleph
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity		<u> </u>						
Surcharge for		-						
Partially								
Distant								
Stations						-		
						-		
							 	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First G
	JP	SUBSCRIBER GROU	SIXTIETH		UP	SUBSCRIBER GRO	TY-NINTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	COMMUNITY/ AREACALL SIGN
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		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	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	0.00	CALL SIGN		Total DSEs	DSE			CALL SIGN CALL SIGN Total DSEs
	DSE	\$		CALL SIGN	DSE	CALL SIGN		

Name	YSTEM ID# 63437					LE SYSTEM:		Mid-Plains Teleph
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	'-SECOND		UP 0	SUBSCRIBER GRO	TY-FIRST	
Computation	0			COMMUNITY/ AREA				COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated		-						
Exclusivity Surcharge		H			-			
for		+						
Partially						-		
Distant								
Stations								
		-			·		··	
	0.00		ļ	Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	IP	SUBSCRIBER GROU	/-FOURTH	SIXT	HIRD SUBSCRIBER GROUP			SIX
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DCE	OALL CLON	DSE	CALL SIGN	DSE	CALL SIGN
	DOL		DSE	CALL SIGN				
	DOL		DOE	CALL SIGN				
	DOL		DSE	CALL SIGN				
	502		DSE	CALL SIGN				
	DOL		DSE	CALL SIGN				
	DOL		DSE	CALL SIGN				
			Doe	CALL SIGN				
			Doe	CALL SIGN				
			DSE	CALL SIGN				
			DSE	CALL SIGN				
			DSE	CALL SIGN				
			DSE	CALL SIGN				
			DSE	CALL SIGN				
			DSE	CALL SIGN				
	0.00		DSE	Total DSEs	0.00			Total DSEs
		\$			0.00	\$	Group	Total DSEs Gross Receipts Third C

	YSTEM ID# 63437	S						LEGAL NAME OF OWNE Mid-Plains Teleph
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	KTY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity	····							
Surcharge for	····	-				-		
Partially		+						
Distant		<u>-</u>						•••••
Stations								
		<u> </u>						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	Y-EIGHTH	SIX	UP	SUBSCRIBER GRO	SEVENTH	SIXTY-
	0				0			COMMUNITY/ AREA
				COMMUNITY/ AREA				
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		0.00	CALL SIGN	DSE	
	DSE	CALL SIGN		CALL SIGN		CALL SIGN		Total DSEs Gross Receipts Third C

Mid-Plains Telepho		LE SYSTEM:				S	43437 63437	Name
				TE FEES FOR EACH				
	Y-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
								Base Rate Fee
								and
								Syndicated
								Exclusivity
			···			-	<u></u>	Surcharge for
						-	·····	Partially
								Distant
								Stations
	<u> </u>							
			<u></u>		<mark></mark>	<u> </u>		
	<u> </u>					1		
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	
SEVEN	Y-FIRST	SUBSCRIBER GRO	UP	SEVENT	Y-SECOND	SUBSCRIBER GRO	UP	
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	
			0.00	Total DSEs			0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fourti	h Group	\$	0.00	
Total DSEs Gross Receipts Third G	·	\$			·	\$		

LEGAL NAME OF OWNE Mid-Plains Telepho			•			S	YSTEM ID# 63437	Name
				TE FEES FOR EACH				
	Y-THIRD	SUBSCRIBER GRO		H	/-FOURTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						<u> </u>		and
		-				<u> </u>		Syndicated
						<u> </u>		Exclusivity
								Surcharge
		-	<u>.</u>					for
								Partially Distant
			·				<u></u>	Stations
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						H	····	
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						††····		
Total DSEs	<u> </u>		0.00	Total DSEs	!		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SEVEN	Y-FIFTH	SUBSCRIBER GRO	UP	SEVE	NTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
		-						
						<u> </u>		
						<u> </u>		
	 		<u> </u>				<u></u>	
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			 				<u> </u>	
			 					
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						1		
			<u> </u>			1		
Total DSEs		1	0.00	Total DSEs	1		0.00	
					0			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

Mid-Plains Telepho		E SYSTEM:				S	43437 63437	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU		H	TY-EIGHTH	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
					<mark></mark>	-		and
		-			<u></u>	-		Syndicated Exclusivity
								Surcharge
								for
						-		Partially
								Distant
		-						Stations
						<u> </u>		
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			<u> </u>					
Total DSEs	0110	.	0.00	Total DSEs	ad Croup	•	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	ia Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVENT	Y-NINTH	SUBSCRIBER GROU	JP		EIGHTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			_	
i							0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE		DSE	CALL SIGN		
	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		
Total DSEs			0.00	CALL SIGN Total DSEs		CALL SIGN	DSE	
Total DSEs		CALL SIGN		CALL SIGN		CALL SIGN	DSE	
	roup		0.00	CALL SIGN Total DSEs	n Group	\$	DSE	

LEGAL NAME OF OWNE Mid-Plains Telepho						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GRO			/-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u>.</u>			and
		-				<u> </u>		Syndicated
						H	<u></u>	Exclusivity
		-			<u></u>	-		Surcharge
								for Partially
			<u> </u>			 		Distant
						+		Stations
					······	<u> </u>		5 1
		-						
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GRO	UP	EIGHT	Y-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
								
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Total DSEs	'		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

LEGAL NAME OF OWNE Mid-Plains Teleph			•	initied 3.73 Stat		S	YSTEM ID# 63437	Name
		COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EACH		RIBER GROUP	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		- COBOOTIBELY GIVE	0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
		-			<u></u>			Surcharge
					<u></u>			for Partially
				•••••	<u>-</u>			Distant
								Stations
			·				<u></u>	
		-						
				•••••	<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
EIGHTY-S	SEVENTH	SUBSCRIBER GRO	UP	EIGH	TY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
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	1							
Total DSEs			0.00	Total DSEs			0.00	
	roup	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
Total DSEs Gross Receipts Third G	roup	<u>\$</u>			n Group	\$	-	

LEGAL NAME OF OWNE Mid-Plains Teleph						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GRO		OOMAN DUTY (177	NINTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-	<u></u>					and
		-				-		Syndicated
	-		<u></u>		.	 	····	Exclusivity Surcharge
		-	-		·			for
								Partially
								Distant
		-	<u> </u>					Stations
		-	<u></u>			-		
						 		
					·····	 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GRO	UP	i i	/-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 63437					LE SYSTEM:		Mid-Plains Teleph	
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and		-							
Syndicated									
Exclusivity Surcharge		 			-				
for		-							
Partially		-				-			
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	0.00	II.	<u> </u>	Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	iroup	Base Rate Fee First G	
	IP	SUBSCRIBER GROU	TY-SIXTH		UP	SUBSCRIBER GRO	TY-FIFTH		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
		-							
		Ш							
		-							
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C	

LEGAL NAME OF OWNE Mid-Plains Telepho						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GRO			Y-EIGHTH	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
					.	H	····	Exclusivity
		-	<u></u>		<mark>.</mark>	-		Surcharge
			. 		<u>-</u>			for Partially
			<u></u>		<u>-</u>	-		Distant
			<u> </u>		·			Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINET	Y-NINTH	SUBSCRIBER GRO	UP	ONE HU	NDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
OALL OIGH	DOL	O/ LEE GIGIT	DOL	O/ILL GIGIT	DOL	O/ LEE OIGIV	DOL	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
							$\overline{}$	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ase Rate Fee: Add th			criber group	as shown in the boxes	above.	\$		

Name	63437	S			· 			LEGAL NAME OF OWNE Mid-Plains Telepho
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (BL
9	IP	SUBSCRIBER GROU	SECOND			SUBSCRIBER GRO	ED FIRST	ONE HUNDRE
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNE Mid-Plains Teleph						S	YSTEM ID# 63437	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRI	ED FIFTH	SUBSCRIBER GRO	UP	ONE HUNDI	RED SIXTH	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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Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED S	SEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	ED EIGHTH	SUBSCRIBER GROU	JP	
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Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
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Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Mid-Plains Telepho						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH				
	D NINTH	SUBSCRIBER GRO		i i	ED TENTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED EL	EVENTH	SUBSCRIBER GRO	JP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	JP	
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

0 9 Computation OSE of Base Rate Fee	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH	BASE RA	2014011747101105		
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	SUBSCRIBER GROU	IXTEENTH	ONE HUNDRED S	JP	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
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Name	YSTEM ID# 63437						one, LLC	Mid-Plains Teleph
		IBER GROUP	SUBSCRI	TE FEES FOR EACH				
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9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNER Mid-Plains Telepho						Sì	(STEM ID# 63437	Name
			BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-SECONE	SUBSCRIBER GROUP		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 Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0.00	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	1	Ш	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	e base rat	re fees for each subsc		Base Rate Fee Fourth		\$	0.00	

LEGAL NAME OF OWNER Mid-Plains Telepho						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-SIXTH	SUBSCRIBER GROUP	,	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NE HUNDRED TWENTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-EIGHTH	SUBSCRIBER GROUP	1	
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LEGAL NAME OF OWNE Mid-Plains Telepho						S	YSTEM ID# 63437	Name
				TE FEES FOR EACH	SUBSCR	RIBER GROUP		
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Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
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ONE HUNDRED THIR	TY-FIRST	SUBSCRIBER GROUP	1	ONE HUNDRED THIRT	Y-SECOND	SUBSCRIBER GROUP		
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	YSTEM ID# 63437							LEGAL NAME OF OWNE Mid-Plains Teleph
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
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	JP 0	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THI COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN
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Name	YSTEM ID# 63437	S						LEGAL NAME OF OWNE Mid-Plains Telepho
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	OCK A: (BL
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	JP	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED	JP	SUBSCRIBER GRO	TY-NINTH	ONE HUNDRED THIRT
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		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	BLOCK A: (BI
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		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED FORT	0	SUBSCRIBER GROUP		
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	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE		DSE	CALL SIGN	DSE		DSE	CALL SIGN

Name 9 Computation of	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC SYSTEM ID# 63437									
		BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
		SUBSCRIBER GROUP	RTY-SIXTH	ONE HUNDRED FO		SUBSCRIBER GROUP	RTY-FIFTH	ONE HUNDRED FOR		
	COMMUNITY/ AREA 0							COMMUNITY/ AREA		
	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>									
					·		<mark></mark>			
	····									
					·		<u></u>			
					·····		<u>-</u>			
					·····		<u>-</u>			
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Gross Receipts First Group \$			
	Base Rate Fee Second Group \$ 0.00					First Group \$ 0.00				
	ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP					IE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP				
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR)	SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FORTY		
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR COMMUNITY/ AREA	0	SUBSCRIBER GROUP	-SEVENTH			
		CALL SIGN	TY-EIGHTH			SUBSCRIBER GROUP	DSE			
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	0			COMMUNITY/ AREA	0			CALL SIGN		
	DSE		DSE	CALL SIGN	DSE		DSE	COMMUNITY/ AREA		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437									
	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
	NE HUNDRED FORTY-NINTH SUBSCRIBER GROUP			ONE HUNDRED	9				
COMMUNITY/ AREA	OMMUNITY/ AREA 0			COMMUNITY/ AREA	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE		CALL SIGN	DSE	of	
O/ILL GIGIT	DOL	CALL CIGIT	DOL	OALL GIGIT	DOL	O'ALL GIGIT	DOL	Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially	
					ļ		<u></u>	Distant	
								Stations	
							····		
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						-			
otal DSEs _		0.00		Total DSEs	0.00		0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Gr	tate Fee First Group \$ 0.00		0.00	Base Rate Fee Secon	0.00				
ONE HINDBED EIET	V EIDST	SUBSCRIPER CROIL	ID	ONE HINDBED EIET	/ SECOND	SUBSCRIPER CROIL	ID		
	FTY-FIRST SUBSCRIBER GROUP			ONE HUNDRED FIFTY					
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
							<u></u>		
			l		·				
							···-		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G			0.00	Gross Receipts Fourth	Groun	•	0.00		
	roup	\$	0.00		Cloup	<u>\$</u>	0.00		
	roup	\$	0.00		ГОГОЦР	\$	0.00		
Base Rate Fee Third G	·	\$	0.00	Base Rate Fee Fourth		\$	0.00		

9 Computation of	YSTEM ID# 63437	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC 63437								
		BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
		SUBSCRIBER GROU	/-FOURTH	ONE HUNDRED FIFT	JP 0	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP				
	COMMUNITY/ AREA 0							COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate Fe										
and						-				
Syndicated										
Exclusivity Surcharge							··			
for						-	···			
Partially		-			·					
Distant										
Stations										
							. <mark>.</mark>			
					<u>.</u>					
					ļ					
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G		
	Base Rate Fee Second Group \$ 0.00				0.00	\$	roup	3ase Rate Fee First Gi		
	ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP					IE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP				
	COMMUNITY/ AREA0							COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
						-				
							<mark>.</mark>			
					<u>.</u>					
					.1	I				
				••••						
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G		

Name 9 Computation of	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mid-Plains Telephone, LLC SYSTEM ID# 63437									
		BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
		SUBSCRIBER GROUP	ONE HUNDRED FIR)	ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP					
	COMMUNITY/ AREA 0							COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate Fe										
and										
Syndicated										
Exclusivity										
Surcharge						-				
for										
Partially										
Distant	<u></u>				 		·			
Stations		-					-			
		H			 					
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	····	-			 	-	·			
		-								
	····									
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	d Group	Gross Receipts Second Group		\$	roup	Gross Receipts First G		
	Base Rate Fee Second Group \$ 0.00				0.00	\$	roup	Base Rate Fee First G		
	ONE HUNDRED SIXTIETH SUBSCRIBER GROUP					NE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP				
	COMMUNITY/ AREA0							COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
		•			·		·····			
						-				
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G		

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Mid-Plains Telephone, LLC 63437 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 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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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Mid-Plains Telephone, LLC 63437 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Mid-Plains Telephone, LLC 63437 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. NINTH SUBSCRIBER GROUP TENTH 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 **ELEVENTH SUBSCRIBER GROUP** TWELVTH 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

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Mid-Plains Telephone, LLC 63437 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Mid-Plains Telephone, LLC 63437 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. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH 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 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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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Mid-Plains Telephone, LLC 63437 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. TWENTY-FIFTH SUBSCRIBER GROUP TWENTY-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 TWENTY-SEVENTH SUBSCRIBER GROUP TWENTY-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 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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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Mid-Plains Telephone, LLC 63437 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-FIFTH SUBSCRIBER GROUP ONE HUNDRED FORTY-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 ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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