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							
09/05/2018	\$ 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	2018/1									
Period										
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting conducts the busine If there were different owners during the accounting period, only the owner as ingle statement of account and royalty fee payment covering the entire accounting the system's first filing. If not, enter the system's ID LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	ess of the cable system on the last day of the counting perion	em the accounting period should s							
	MI-CONNECTION COMMUNICATION SYSTEMS									
	IIII GONNEGITON GONNIGHTON GTGTEMIG									
				629901						
				62990 2018/1						
				02330 2010/1						
	PO Box 90									
	MOORESVILLE, NC 28115									
_	INSTRUCTIONS: In line 1, give any business or trade names used to ic	dontify the business	and appration of the avet	om unless these						
С	names already appear in space B. In line 2, give the mailing address of									
System	1 IDENTIFICATION OF CABLE SYSTEM:	-								
	1									
	MAILING ADDRESS OF CABLE SYSTEM:									
	2 (Number, street, rural route, apartment, or suite number)									
	(City, town, state, zip code)									
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b						
Area Served	with all communities.	lo								
	CITY OR TOWN	STATE NC								
First Community	MOORESVILLE									
	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G. CH LINE UP	SUB GRP#						
	Alda	MD	A	30B GRP#						
Sample	Alliance	MD	В	2						
	Gering	MD	В	3						

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

-ORM SA3E. PAGE 1b.			CVCTEM ID#	1						
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
MI-CONNECTION COMMUNICATION SYSTEMS			62990							
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.										
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.										
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).										
When reporting the carriage of television broadcast stations on a community-by-commu channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns to	a subscriber grou									
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#							
MOORESVILLE	NC	Α	1	First						
DAVIDSON	NC	Α	1	Community						
CORNELIUS	NC	A	1	Community						
HUNTERSVILLE	NC	A	1							
TOTAL			······································							
				Can instructions for						
				See instructions for additional information						
	-			on alphabetization.						
				Add rows as necessary.						
				,						
			••••••							
			•							
	·									

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
MI-CONNECTION COMMUNICATION SYSTEMS
SYSTEM ID#

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			BLOC	K 2		
	NO. OF					NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
 Service to first set 	7,391	\$	24.41				
 Service to additional set(s) 							
 FM radio (if separate rate) 							
Motel, hotel	11	\$	12.41				
Commercial	278	\$	24.41				
Converter							
Residential	1,090	\$	6.99				
Non-residential	293	\$	6.99				
				1 ľ		1	T

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable		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			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN					SYSTEM ID#	Namo		
MI-CONNECTION	ON COMMUI	NICATION	SYSTEMS		62990	112		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON						
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during the classifier of the class	he accounting n June 24, 19 4), or 76.63 (i d in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of cert 1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:		
				s carried by your o	cable system on a substitute program	Television		
passis 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).								
	e channel numb	per the FCC h	as assigned to	the television stat	tion for broadcasting over-the-air in			
on which your cable s' Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th FCC. For Mexican or on Note: If you are utilizing	ystem carried the in each case way entering the lecast), "E" (for no ese terms, see leation is outside ice area, see parave entered "Yohe distant statication on a part-tite sion of a distant tentered into on a primary trans simulcasts, also aree categories e location of ea Canadian station multiple char	ne station. Whether the stater "N" (for noncommercial page (v) of the local sendage (v) of the es" in column on during the me basis becar multicast stream or before Jumitter or an appender "E". If a see page (v) ch station. For siff any, givennel line-ups,	tation is a netwo etwork), "N-M" ('I educational), o e general instructivice area, (i.e. "o general instructivice area, (i.e. "o general instructivice accounting perioduse of lack of a earn that is not so an earn that is not so an earn that is not so area that is not so are an earn that is	ork station, an indefor network multion "E-M" (for nonceptions located in the distant"), enter "Yelions located in the mplete column 5, and. Indicate by enactivated channel subject to a royalty etween a cable sy senting the prima channel on any of instructions locate list the community with space G for each	es". If not, enter "No". For an exe paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing any transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the h which the station is identifed.			
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			
WBTV-DT	23-3	N	No	(2.0.0.11)	N	1		
WBTV-Bounce	23-4	N	No		N	1		
WTVI-HD	11-3	E	No		N	See instructions for additional information		
						on alphabetization.		
WTVI-MH	11-4	E	No		N			
WTVI-ED	11-5	E	No		N	-		
WCNC-HD	22-1	N	No		N			
WCNC-LW	22-2	N	No		N	-		
WJZY-HD	47-3	I	No		N	-		
WSOC-TV	34-1	N	No		N			
wsoc-wx	34-2	N	No		N	_		
WCCB-DT	27-3	N	No		N			
WCCB-SD								
WCCB-METV	27-5	N	No		N			
WMYT-HD	39-1	ı	No		N	1		
WMYT-SD	39-2	I	No		N	•		
WMYT-SBN	39-3	<u>'</u>	No		N	-		
		<u> </u>		-		-		
WAXN-TV	50-1	<u> </u>	No	_	N	-		
WUNG-UNC-TV	44-3	E	No		N			

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **MI-CONNECTION COMMUNICATION SYSTEMS** 62990 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CARRIAGE SIGN (Yes or No) NUMBER **STATION** (If Distant) **WUNG-UNC-KD** 44-4 Ε No **WUNG-UNC-EX** Ν 44-5 Ε No WHKY-DT Ν 40-3 ı No Ν WHKY-DT 40-3 No N WHKY-DT 40-3 1 No WHKY-DT 40-3 Ν No

LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#				
MI-CONNECTION	ON COMMU	NICATION	SYSTEMS		62990	Name			
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON							
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the									
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(for independent multid For the meaning of the Column 4: If the st	cast), "E" (for neese terms, see ation is outside	oncommercia page (v) of th the local ser	l educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonce ctions located in the distant"), enter "Ye	es". If not, enter "No". For an ex-				
	ave entered "Y he distant statio	es" in column on during the	4, you must cor accounting perior	mplete column 5, and Indicate by en	stating the basis on which your tering "LAC" if your cable system				
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Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, be the name of the	list the community ne community with	ed in the paper SA3 form.				
		CHANN	EL LINE-UP	AC					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
	•								
	<u> </u>								

LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#			
MI-CONNECTIO	ON COMMU	NICATION	SYSTEMS		62990	Name		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
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cable system carried th	ave entered "Y he distant statio	es" in column on during the	4, you must cor accounting perior	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	subject to a royalty etween a cable sys	capacity. payment because it is the subject stem or an association representing ty transmitter, enter the designa-			
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also nree categories e location of ea	o enter "E". If , see page (v) ch station. Fo	you carried the) of the general in the U.S. stations,	channel on any ot instructions locate list the community	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing		nnel line-ups,		space G for each				
			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.		(0.7.7.1			evetem ID#	1
LEGAL NAME OF OWN			SVSTEMS		SYSTEM ID#	Name
			3131EWI3		02330	
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 each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the stations	ERS: TELEVISIO G, identify ever system during t ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With CC rules, regula here in space only on a subs and also in spa formation cond rm. ch station's call associated wit v-2". Simulcast is e channel numl is e. For example e. For example e. For example e. in each case v e entering the le cast), "E" (for n ese terms, see ation is outside	y television state accounting a June 24, 19 4), or 76.63 (in the next prespect to any ations, or auth G—but do list itute basis. ace I, if the state ring substitute basis ace I, if the state ring substitute basis ace I, if the state ring substitute basis. The station account of the station account of the station account of the station. Whether the station account of the station on the station account of the station account of the station. Whether the station account of the stat	ation (including g period, except 81, permitting the referring to 76.6 paragraph. If the distance of the second se	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services er-the-air designation of the television statistington, D.C. This ork station, an indefer network multicution "E-M" (for noncontrions located in the television), enter "Yestation, on the distant"), enter "Yestation, enter "Yestation, of the carried of the television statistington, but the television statistical the television s	s". If not, enter "No". For an ex-	G Primary Transmitters: Television
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		CHANN	EL LINE-UP	AE		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#			
MI-CONNECTION	ON COMMU	NICATION	SYSTEMS		62990	Name		
PRIMARY TRANSMITTE	ERS: TELEVISION	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
basis under specifc 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 licens on which your cable sy	se. For example stem carried the	e, WRC is Chane station.	annel 4 in Wash	ington, D.C. This	may be different from the channel			
Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identifed.								
		CHANN	EL LINE-UP	AF				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.					evetem ID#	1
MI-CONNECTION			SVSTEMS		SYSTEM ID# 62990	Name
			3131EWI3		02330	
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 Substitute station of the station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the	ERS: TELEVISION G., identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spand also in spand also in spand associated with a station's call associated with a channel number of the station of the station of the station of the station of the station's call associated with a channel number of the station of the sta	y television st he accounting n June 24, 19 4), or 76.63 (red in the next respect to any attions, or auth G—but do lis titute basis. ace I, if the sta berning substit sign. Do not re h a station acc streams must	ation (including g period, except 81, permitting the referring to 76.6 paragraph. y distant stations corizations: t it in space I (the ation was carried tute basis station report origination cording to its own the reported in contast assigned to except to except the station was assigned to excep	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the Special Statement of both on a substitution, see page (v) on program service er-the-air designation of the television statistical statement of the second program service the television statistical statement of the second program service the television statistical statement of the second program service the television statistical statement of the second program service the second program service that the second	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
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		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	

FORM SA3E. PAGE 3.						T				
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
MI-CONNECTIO	ON COMMU	NICATION	SYSTEMS		62990	Name				
PRIMARY TRANSMITTE	PRIMARY TRANSMITTERS: TELEVISION									
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		CHANN	EL LINE-UP	AH						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
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FURINI SAJE. PAGE 3.					0)/07511 10//				
MI-CONNECTION			SYSTEMS		SYSTEM ID# 62990	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	ON							
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FORM SA3E. PAGE 3.		(0.7.7.1			SYSTEM ID#	
MI-CONNECTION			SVSTEMS		5151EM ID# 62990	Name
			3131EWI3		02330	
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 Substitute station of the station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the	ERS: TELEVISION G., identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spand also in spand also in spand associated with a station's call associated with a channel number of the station of the station of the station of the station of the station's call associated with a channel number of the station of the sta	y television st he accounting n June 24, 19 4), or 76.63 (i d in the next respect to any attions, or auth G—but do lis titute basis. ace I, if the sta erning substit sign. Do not in h a station acc streams must	ation (including g period, except 81, permitting the referring to 76.6 paragraph. y distant stations corizations: t it in space I (the ation was carried tute basis station report origination cording to its own the reported in contast assigned to except to except the station was assigned to excep	(1) stations carried the carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services the calculumn 1 (list each the television statistical extension of the carried to the television statistical extension of the carried extension of	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program 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
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURINI SAJE. PAGE 3.					OVOTEM ID#	
MI-CONNECTION			SYSTEMS		SYSTEM ID# 62990	Name
PRIMARY TRANSMITTI	RS: TELEVISIO	ON				
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#		
MI-CONNECTION	ON COMMU	NICATION	SYSTEMS		62990	Name	
PRIMARY TRANSMITTERS: TELEVISION							
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(for independent multid For the meaning of the Column 4: If the st	cast), "E" (for n ese terms, see ation is outside	oncommercia page (v) of the the local serv	l educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonce ctions located in the distant"), enter "Ye	es". If not, enter "No". For an ex-		
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Column 6: Give the	e location of ea Canadian statio	ch station. Fo	or U.S. stations, be the name of the	list the community ne community with	to which the station is licensed by the which the station is identifed.		
		CHANN	EL LINE-UP	AL			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					evetem ID#	1
MI-CONNECTION			SVSTEMS		SYSTEM ID# 62990	Name
			3131EWI3		02330	
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bases Substitute Basis Subasis 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	ERS: TELEVISION G., identify ever by stem during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2)) and (6.61(e)(2)) and (6.61(e)(2)) and (6.61(e)(2)) and also in spand formation concurm. The station's call associated with a station's call associated with a spand and a spand a	y television st he accounting n June 24, 19, (4), or 76.63 (n ed in the next prespect to any ations, or auth G—but do lis- titute basis. ace I, if the sta cerning substiff sign. Do not re h a station accounts ber the FCC he e, WRC is Chane the station.	ation (including g period, except 81, permitting the referring to 76.6 paragraph. y distant stations cortizations: t it in space I (the ation was carried tute basis station report origination cording to its own the reported in contact as assigned to annel 4 in Wash	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your content of the Special Statement of both on a substitute, see page (v) on program services er-the-air designaticolumn 1 (list each the television stationington, D.C. This	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	G Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURINI SAJE. PAGE 3.					OVOTEM ID#	
MI-CONNECTION			SYSTEMS		SYSTEM ID# 62990	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.		(0.7.7.1			EVETEM	ID#
MI-CONNECTION			SVSTEMS		SYSTEM 629	Name
			3131EWI3		023	90
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		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.						1
LEGAL NAME OF OWN					SYSTEM ID#	Name
MI-CONNECTIO	ON COMMU	NICATION	SYSTEMS		62990	Nume
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), "I" (for independent), "I-M" (for						
Note. If you are utilized	y multiple chai	•	•	•	channer inte-up.	
	T	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	

FURINI SAJE. PAGE 3.					OVOTEM ID#	
MI-CONNECTION			SYSTEMS		SYSTEM ID# 62990	Name
PRIMARY TRANSMITTI	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 constant of	he accounting n June 24, 19 4), or 76.63 (r d in the next p	period, except 81, permitting the eferring 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	G Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.	.== == = = = = = = = = = = = = = = = =	(0.7.7.1			evetem ID#	1
MI-CONNECTION			SVSTEMS		SYSTEM ID# 62990	Name
			3131EWI3		02330	
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#			
MI-CONNECTION	ON COMMU	NICATION	SYSTEMS		62990	Name		
PRIMARY TRANSMITTERS: TELEVISION								
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	ave entered "Y he distant statio	es" in column on during the	4, you must cor accounting perior	mplete column 5, and Indicate by en	stating the basis on which your tering "LAC" if your cable system			
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
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FORM SA3E. PAGE 3.		(0.7.7.1			evetem ID#	1
MI-CONNECTION			SVSTEMS		SYSTEM ID# 62990	Name
			3131EWI3		02330	
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.	.== 0= 0.5. = 0.	(0.7.7.1			SYSTEM II	54
MI-CONNECTION			SVSTEMS		6299	Name
			3131EWI3		0293	70
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 is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of license.	ERS: TELEVISION G., identify ever system during to ions in effect on 6.61(e)(2) and (sis, as explained stations: With CC rules, regular to here in space only on a substant also in space on the station concord. The station's call associated with a system of the system of	y television st he accounting n June 24, 19 4), or 76.63 (i d in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta reming substit sign. Do not in h a station ac streams must	ation (including g period, except 81, permitting the referring to 76.6 paragraph. y distant stations corizations: t it in space I (the ation was carried tute basis station report origination cording to its own the reported in contast assigned to except to except the station was assigned to excep	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the Special Statement of both on a substitution, see page (v) on program service er-the-air designation of the television statistical statement of the second program service the television statistical statement of the second program service the television statistical statement of the second program service the television statistical statement of the second program service the second program service that the second	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program 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
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	ER OF CABLE SY	/STEM:			SYSTEM ID#					
MI-CONNECTIO			SYSTEMS		62990	Name				
PRIMARY TRANSMITTE	RS: TELEVISIO	ON								
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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).										
its community of licens on which your cable sy	e. For example stem carried the	e, WRC is Ch ne station.	annel 4 in Wash	ington, D.C. This	ion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial					
(for independent multic For the meaning of the Column 4: If the sta	cast), "E" (for nesse terms, see ation is outside	oncommercia page (v) of th the local ser	l educational), o e general instruc vice area, (i.e. "c	or "E-M" (for nonce ctions located in the distant"), enter "Ye	es". If not, enter "No". For an ex-					
	ave entered "Yone distant station	es" in column on during the	4, you must cor accounting perior	mplete column 5, and Indicate by en	stating the basis on which your tering "LAC" if your cable system					
of a written agreement the cable system and a	entered into o a primary trans	n or before Ju mitter or an a	ine 30, 2009, be ssociation repre	etween a cable system is senting the prima	payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further					
explanation of these the	ree categories location of ea Canadian statio	, see page (v ch station. Fo ns, if any, giv) of the general in or U.S. stations, we the name of the	instructions locate list the community ne community with	ed in the paper SA3 form. to which the station is licensed by the which the station is identifed.					
Note: If you are utilized	g maniple ona	• •	EL LINE-UP	•	onamer inte up.					
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)						

FORM SA3E. PAGE 3.						T		
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
MI-CONNECTIO	ON COMMU	NICATION	SYSTEMS		62990	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON NC						
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 multicast), "								
-		CHANN	EL LINE-UP	A \A/	·			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 4.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 62990									
Н	PRIMARY TRANSMITTERS: RADIO 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 Transmitters: Radio	receivable if (1) on the basis of For detailed info located in the process of Column 1: located in the process of Column 3: If signal, indicate Column 4: G	it is carried by monitoring, to primation about aper SA3 form dentify the call state whether to the radio statistics by placing live the station	the syst be receive the the sign of e he station on's sign a check i's location	-Band FM Carriage: Under Community with the second at the headend, with the second at the seco	the system's hearystem's FM anter ystem's FM anter in this point, see a ed by the cable systems.	adend, and (2) nna, during ce page (vi) of the ystem as a se ed by the FCC	it can b rtain sta e genera parate a	e expected, ted intervals. Il instructions Ind discrete		
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION		

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2018/1
LEGAL NAME OF OWNER OF MI-CONNECTION CON			MS			SYSTEM ID# 62990	Name
SUBSTITUTE CARRIAGE In General: In space I, identi					n that your cable system	n carried on a	I
substitute basis during the ac explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or authorizations	. For a further	Substitute
SPECIAL STATEMENT During the accounting per broadcast by a distant state	iod, did you			s, any nonnet	twork television progra	m X No	Carriage: Special Statement and
Note: If your answer is "No		rest of this pag	ge blank. If your answer is	'Yes," you mu			Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ace, please a of every nor distant stati gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static addian st	am on a separa attach additionannetwork televion and that your authorization it use general of the separation of the separation of the separation of the station broadca on's location (the separation of the sepa	al pages. ision program (substitute pur cable system substitute s. See page (vi) of the geneategories 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 purposed 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 licenstation is idenorogram. Use cable system. 15 p.m. to 6:2 mming that yet; enter the letters	during the accounting ramming of another stans located in the pape List specific program nsed by the FCC or, in tiffied). numerals, with the modulate the times accurate 8:30 p.m. should be our system was requireter "P" if the listed pro	ation r onth ely	
	ELIESTITI IT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRED	7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION	
					_		
					<u> </u>		
					<u> </u>		
					_		
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							ĺ

ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 6.

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	S AND HOURS (OF PART-TIME CAR	RIAGE			
CALL SIGN -	WHEN	CARRIAGE OCC		CALL SIGN -	WHEN CARRIAGE OCCURRED			
	DATE	HOU FROM	RS TO		DATE	FROM	OURS	то
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LEGA	L NAME OF OWNER OF CABLE SYSTEM: CONNECTION COMMUNICATION SYSTEMS		SYSTEM ID# 62990	Name					
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts)									
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.									
3 be ▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low. rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sh block 4 below.								
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mo least the minimum fee, regardless of whether they carried any distant stations. This for system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. This is your minimum fee.								
	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 colu "Yes" in this block. • Did your cable system carry any distant television stations during the accounting pe Yes—Complete the DSE schedule. No—Leave block 3 below blank and	mn 4, you must	check						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE	\$	0.00						
	schedule. If none, enter zero 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 Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space O, page 9.	<u>\$</u>	11,119.10 0.00	Cable systems submitting additional deposits under Section 111(d)(7)					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)								
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ (See page (i) of	11,844.10 the	appropriate form for submitting the additional fees.					
	general instructions located in the paper SA3 form for more information.)								

Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:	SYSTEM ID#							
Name	MI-CONNECTION C	OMMUNICATION SYSTEMS	62990							
	CHANNELS									
М	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										
		er of channels on which the cable sion broadcast stations	24							
	system carned televi	iion broadcast stations								
	2. Enter the total numb	er of activated channels								
		stem carried television broadcast stations	132							
	and nonbroadcast se	rvices								
N	INDIVIDUAL TO BE O	ONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual								
		his statement of account.)								
Individual to										
Be Contacted for Further	Name Sean Wi	bur Teleph	none 704-360-1820							
Information	Traine Double									
	Address 420 S Ad	ademy								
	(Number, stree	t, rural route, apartment, or suite number)								
	Mooresv (City, town, sta	ille, NC 28115								
	(enj, term, en	(a) (b)								
	Email	swilbur@mi-connection.net Fax (optional)								
_	CERTIFICATION (This	statement of account must be certifed and signed in accordance with Copyright Office	ce regulations.							
0										
Certifcation	• I, the undersigned, her	eby certify that (Check one, but only one, of the boxes.)								
	(Owner other than	corporation or partnership) I am the owner of the cable system as identifed in line 1 of	space B; or							
		ner than corporation or partnership) I am the duly authorized agent of the owner of the	e cable system as identified							
	in line 1 of space	B and that the owner is not a corporation or partnership; or								
		I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed	d as owner of the cable system							
	in line 1 of space	В.								
		atement of account and hereby declare under penalty of law that all statements of fact or								
	[18 U.S.C., Section 100	correct to the best of my knowledge, information, and belief, and are made in good faith. 1(1986)]								
		V								
		/s/ David Auger								
		inter an electronic signature on the line above using an "/s/" signature to certify this stateme	ent.							
	· · · · · · · · · · · · · · · · · · ·	e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your of F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's	·							
	_	Typed or printed name: /s/David Auger								
	_	ritle: CEO								
		Title: CEO (Title of official position held in corporation or partnership)								
	1	Date: August 30, 2018								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name							
MI-CONNECTION COMMUNICATION SYSTEMS 62990								
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 Name Mailing Address								
INTEREST ASSESSMENTS								
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q							
Line 1 Enter the amount of late payment or underpayment	Interest Assessment							
Line 2 Multiply line 1 by the interest rate* and enter the sum here								
xdays								
Line 3 Multiply line 2 by the number of days late and enter the sum here								
x 0.00274								
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)								
(interest charge)								
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.								
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.								
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.								
Owner Address								
First community served Accounting period								
ID number								

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: 2018/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1)

calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of 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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



	Distant Stations Carried		Identification o	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
3	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

¥5,5555							
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: 2018/1

DSE SCHEDULE. PAG	DSE SCHEDULE. PAGE 11. (CONTINUED)												
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#												
1	MI-CONNECTION COMMUNICATION SYSTEMS 629												
	SUM OF DSEs OF CATEGOR												
	Add the DSEs of each station There the sum hard and in line		0.00										
	Enter the sum here and in line	0.00											
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5												
_	of space G (page 3).												
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-												
of DSEs for	mercial educational station, give the DSE as ".25."												
Category "O"			CATEGORY "O" STATION		_								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
Add rows as													
necessary.						······							
Remember to copy													
all formula into new													
rows.													

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS										
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.										
Capacity		С	ATEGORY LA	C STATIONS:	COMPUTAT	ION OF DSEs					
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. N JRS C ED BY S	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAC VALUE	5. TYPE		SE.			
						x					
						X					
			÷		= =	x x					
			÷	:	=	x	=				
			÷	:	=	x	=				
			÷ ÷		=	x x	=				
	Add the DSEs of	F CATEGORY LAC Seach station. here and in line 2 of page		le,		0.00					
Computation of DSEs for Substitute-Basis Stations	 Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). 										
		SU	BSTITUTE-BAS	SIS STATION	S: COMPUTA	ATION OF DSEs	T				
	1. CALL 2 SIGN	P. 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			
		÷		=		4		=			
		÷		=		-	-	=			
		÷		=		-		=			
		÷		=		-	-	=			
	Add the DSEs of	F SUBSTITUTE-BASI each station. here and in line 3 of pa		le,		0.00					
5 Total Number of DSEs	number of DSEs a	OF DSEs: Give the am pplicable to your systen SEs from part 2 ● SEs from part 3 ●		es in parts 2, 3, and	4 of this schedul	e and add them to provide	0.00 0.00				
	3. Number of D	SEs from part 4 ●				>	0.00				
	TOTAL NUMBER	OF DSEs					•	0.00			

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/1

LEGAL NAME OF C			SYSTEMS				S	YSTEM ID# 62990	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 aı	nd complete p	art 8, (page 16) of	the	6
	, ,			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	and regulations and regulations	ons prior to Jui dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permit	ted stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfatherec instructions fc E Carried pursua *F A station pre	ed pursuant on as defined al education d station (76.) or DSE sched ant to individ viously carrie JHF station v	lations cited be to the FCC madd in 76.5(kk) (7 all station [76.565) (see paragulule). Use waiver of Fed on a part-ting grade-Botton in the state of	ne or substitute ba contour, [76.59(d)(se in effect of 6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 19 b), 76.61(b)(c), a) referring to g to 76.61(d) grandfathered une 25, 198'	76.63(a) referring		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			worksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
							<u> </u>		
								0.00	
		В	LOCK C: CO	MPUTATION OF	3.75 FFF				
Line 1: Enter the	total number of				0.70122			-	
Line 2: Enter the	sum of permitte	ed DSEs fro	m block B abo	ove				-	
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.		0.00	
Line 4: Enter gro	ess 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 s	um here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	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 I (page 7)			0.00	

II-CONNECT	TION COMMUN	ICATION S	SYSTEMS					62990	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation 6
<mark></mark>									
								•••••	
								••••••	
									
<mark></mark>									
<mark></mark>				 					
••••••••••									
								••••••	
					 				
				<u> </u>	 				
								••••••	
					 				
				 	 				
	<mark></mark>				 				Ì

Name	MI-CONNECTION			STEMS					S	48TEM ID# 62990		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage. Column 1: List the call sign for each distant station identified by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on file in the Licensing Division.											
		PERMITT	ED DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS				
	1. CALL SIGN	2. PRIO		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE		
					····							
					••••							
					••••					***************************************		
					••••							
7 Computation of the	,	"Yes," comple	ete blocks B and C	•	pa	art 8 of the DSE sched	ule.					
Syndicated			BLOC	K A: MAJOR	TE	ELEVISION MARK	ET					
Exclusivity												
Surcharge	• Is any portion of the o	cable system v	vithin a top 100 majo	or television mar	ke	t as defned by section 7		rules in effect J	une 24,	1981?		
	Yes—Complete	blocks B and	IC.			No—Proceed to	part 8					
	BLOCK B: C	arriage of VH	F/Grade B Contour	Stations	_	BLOCK	C: Compu	tation of Exem	pt DSEs	3		
	Is any station listed in commercial VHF stati or in part, over the ca	ion that place:				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		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE		
												
							 					
			-									
				ļ			 					
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS	SYSTEM ID# 62990	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,045,028.60	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as 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 D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the foure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D 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)	OSE	
	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	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	STEM ID#
Name	ľ	MI-CONNECTION COMMUNICATION SYSTEMS	62990
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.	
8 Computation of Base Rate Fee	6 was 6 In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did v	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	_	X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1).	-
		Base Rate Fee	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
MI-CONNECTION COMMUNICATION SYSTEMS	62990	
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4		8
A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$		•
B. Enter 0.00701 of gross receipts (the amount in section 1)		Computation of
		Base Rate Fee
C. Multiply line B by 3.000 and enter here ► \$		
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 broadc	ast signals shall	
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chann	•	9
Space G. In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fe	e to exclude	_
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take a		Computation of
exclusion, you must:		Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant		and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee fo		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	.	Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in		Partially
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B b if your cable system is wholly located outside all major television markets, complete block A only.	elow. However,	Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant sta	ation you	Permitted Stations
carried to that community. Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were leading.	ocatod	
outside the station's local service area. A subscriber located outside the local service area of a station is distant to that st		
the same token, the station is distant to the subscriber.)	F	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the		
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 sys	stem's subscriber	
groups. 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 a	II of the	
subscribers in the group. • If:		
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,		
any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in part 6 of this schedule.	block B,	
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 page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (tr 		
DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not ne actual calculations on the form.		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 62990 MI-CONNECTION COMMUNICATION SYSTEMS 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.

EGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 62990									
В				TE FEES FOR EAC				-	
		SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	9	
COMMUNITY/ AREA	Moores	sville		COMMUNITY/ ARE	A Davidso	on		Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	of		
O/ ILL OIGH	DOL	O/ IEE O'O'Y	502	CALL CIGIT	502	O/ LEE GIGIT	DSE	Base Rate Fe	
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
	<u></u>		 	.				Partially	
								Distant	
	-							Stations	
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$ 380	6,660.58	Gross Receipts Sec	ond Group	\$ 2	29,906.29		
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	Corneli	us		COMMUNITY/ ARE	COMMUNITY/ AREA Huntersville				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs		ll.	0.00	Total DSEs		Ш	0.00		
Gross Receipts Third C	Group	\$ 380	6,660.58	Gross Receipts Fou	rth Group	\$	41,801.15		
									
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$	0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 62990									
BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP				
	SUBSCRIBER GRO				SUBSCRIBER GROU		(
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0						
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Com		
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	H		1		-				
otal DSEs		0.00	Total DSEs			0.00			
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
dase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
SEVENTH	SUBSCRIBER GRO)UP		EIGHTH	SUBSCRIBER GROU	JP			
OMMUNITY/ AREA		0	COMMUNITY/ ARE						
			COMMUNITY ARE	Α		0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	CALL SIGN				CALL SIGN				
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CALL SIGN DSE	CALL SIGN				CALL SIGN				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		DSE	CALL SIGN Total DSEs	DSE		DSE			

LEGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 62990									
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP	0 9								
0 COMMUNITY/ AREA	O Comput								
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN D	DSE of								
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	0.00								
Group \$ 0.00 Gross Receipts Second Group \$ 0.	0.00								
Group \$ 0.00 Base Rate Fee Second Group \$ 0.	0.00								
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIBER GROUP									
0 COMMUNITY/ AREA	0								
DSE CALL SIGN DSE CALL SIGN D	DSE								
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	DSE								
	0.00								

LEGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 62990									
			TE FEES FOR EAC	CH SUBSCR	IBER GROUP				
	SUBSCRIBER GRO				SUBSCRIBER GROU				
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0						
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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otal DSEs		0.00	Total DSEs			0.00			
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
		_							
sase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
	SUBSCRIBER GRO			SIXTEENTH	SUBSCRIBER GROU				
FIFTEENTH	L'		COMMUNITY/ ARE	SIXTEENTH	<u> </u>				
FIFTEENTH OMMUNITY/ AREA	L'	UP		SIXTEENTH	<u> </u>	UP			
FIFTEENTH OMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROU	UP 0			
FIFTEENTH OMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROU	UP 0			
FIFTEENTH OMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROU	UP 0			
FIFTEENTH OMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH COMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH COMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH COMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
FIFTEENTH COMMUNITY/ AREA CALL SIGN DSE	SUBSCRIBER GRO	UP 0	COMMUNITY/ ARE	SIXTEENTH A	SUBSCRIBER GROI	UP 0			
CALL SIGN DSE	SUBSCRIBER GRO	DSE	CALL SIGN	SIXTEENTH A DSE	SUBSCRIBER GROI	DSE			
CALL SIGN DSE	SUBSCRIBER GRO	DSE DSE DOMESTIC OF THE PROPERTY OF THE PROPER	COMMUNITY/ ARE CALL SIGN Total DSEs	SIXTEENTH A DSE	CALL SIGN	DSE O.000			
COMMUNITY/ AREA	SUBSCRIBER GRO	DSE DSE DOMESTIC OF THE PROPERTY OF THE PROPER	COMMUNITY/ ARE CALL SIGN Total DSEs	SIXTEENTH A DSE The Group	CALL SIGN	DSE O.000			

NI	LEGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 62990									
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: C	Bl		
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROU	NTEENTH			
Computa	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA			
of	CALL SIGN DSE CALL SIGN DSE					CALL SIGN	DSE	CALL SIGN		
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and										
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	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G		
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- 	0.00	\$		Base Rate Fee Secon	0.00	\$				
	JP	\$ SUBSCRIBER GROU		T	JP	\$ SUBSCRIBER GROU		NII		
	I							NII		
- - - - -	JP			T	JP			NII		
- - - - - - -	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
- - 	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII OMMUNITY/ AREA		
- - - - - - - - - - -	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
- 	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0	SUBSCRIBER GROL	VENTIETH	T' COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	NII COMMUNITY/ AREA		
	JP 0 DSE	SUBSCRIBER GROL	VENTIETH	CALL SIGN	DSE	SUBSCRIBER GROU	NTEENTH	CALL SIGN		
	JP O O O O O	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	OMMUNITY/ AREA CALL SIGN Cotal DSEs		
	JP 0 DSE	SUBSCRIBER GROL	DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs		
	JP O O O O O O	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	COMMUNITY/ AREA		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 62990								
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA		- OOBOOKIBEK GROV	0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	of			
								Base Rate Fee
				-				and
			<u>.</u>					Syndicated Exclusivity
								Surcharge
			<u> </u>					for
								Partially Distant
								Stations
			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
TWE	NTY-THIRD	SUBSCRIBER GRO	UP	11		I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-					
			<u> </u>					
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			<u>.</u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

BLOCK A:	INICATION SYST	EMS				YSTEM ID# 62990	Na
			TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
	SUBSCRIBER GRO				SUBSCRIBER GROU		(
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α			Comp
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	00
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY-SEVENTH	SUBSCRIBER GRO	UP	TWE	NTY-EIGHTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	+					·····	
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Fotal DSEs		0.00	Total DSEs			0.00	
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Fotal DSEs Gross Receipts Third Group	\$			orth Group	\$		

LEGAL NAME OF OW MI-CONNECTIO		.E SYSTEM: NICATION SYSTE	EMS			S	YSTEM ID# 62990	Name
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH				
		SUBSCRIBER GROU		III		SUBSCRIBER GROU		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
	·····			· ·····				Syndicated Exclusivity
				·				Surcharge
		-						for
	·····							Partially
								Distant Stations
		-						
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GROU		ii		SUBSCRIBER GROU		
COMMUNITY/ ARE/	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

	ABLE SYSTEM: IUNICATION SYS	TEMS			S	YSTEM ID# 62990	Name
BLOCK A	A: COMPUTATION C	OF BASE RA	ATE FEES FOR EA	CH SUBSCF	RIBER GROUP		
	RD SUBSCRIBER GRO		H		I SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
dase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TH SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	
Total DSEs	CALL SIGN				CALL SIGN		
		0.00	Total DSEs			0.00	

F CABLE SYSTEM: SYSTEM ID MMUNICATION SYSTEMS 6299	NI
K A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
ENTH SUBSCRIBER GROUP THIRTY-EIGHTH SUBSCRIBER GROUP	<u> </u>
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	-			EMS			MI-CONNECTION
MPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	Bl
	SUBSCRIBER GROU	Y-SECOND			SUBSCRIBER GROU	TY-FIRST	
0 COMMUNITY/ AREA 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE				DSE	CALL SIGN	DSE	CALL SIGN
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	-						
	-						
0.00 Total DSEs 0.00			Total DSEs	0.00			otal DSEs
0.00 Gross Receipts Second Group \$ 0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0.00 Base Rate Fee Second Group \$ 0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
DOCUMED COOLD FORTY COUNTY CURCOMPED COOLD	OUDCODIDED ODGI			IP	SUBSCRIBER GROU	THIPD	FOR ⁻
	SUBSCRIBER GROU	Y-FOURTH	İ		OODOONIDEN ONO	1-IIIIND	
0 COMMUNITY/ AREA 0	SUBSCRIBER GROU	Y-FOURTH	İ				
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Nam	0_000						COMMU	MI-CONNECTION
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	OMPUTATION OF	OCK A: C	Bl
9		SUBSCRIBER GROU	RTY-SIXTH			SUBSCRIBER GROL	TY-FIFTH	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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Exclusiv	<u></u>						<u>-</u>	
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Partial	<u></u>		<u>.</u>					
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Station								
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	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
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	I					·		FORTY-S
_	JP			FOR	JP	·		FORTY-S
 - - - -	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
-	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
= - - - - -	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
-	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
- - - - - - - -	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
= - - - - - - - - -	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
-	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
	JP 0	SUBSCRIBER GROL	Y-EIGHTH	FOR COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	FORTY-S
	JP O O O O O O	CALL SIGN	Y-EIGHTH DSE	FOR COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE O.00	CALL SIGN	DSE	FORTY-SOMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROL	Y-EIGHTH DSE	FOR COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	FORTY-SOMMUNITY/ AREA

LEGAL NAME OF OW MI-CONNECTIO		LE SYSTEM: NICATION SYSTE	EMS			S	YSTEM ID# 62990	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
								Syndicated
					<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 Seco	nd Group	\$	0.00	
F	IFTY-FIRST	SUBSCRIBER GROU	JP	FIFT	Y-SECONE	SUBSCRIBER GROU	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

MI-CONNECTION COMMI	BLE SYSTEM: JNICATION SYST	EMS			S	YSTEM ID# 62990	Nam
BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	SUBSCRIBER GRO		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Comput
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u> </u>						Base Rat
							and
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	H		1				Surcha
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		<u></u>					Station
							
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	s	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SUBSCRIBER GRO)UP		FIFTY-SIXTH	SUBSCRIBER GROU	JP	
	SUBSCRIBER GRO			FIFTY-SIXTH			
	SUBSCRIBER GRO)UP		FIFTY-SIXTH		JP	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
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COMMUNITY/ AREA		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
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CALL SIGN DSE		0 0	COMMUNITY/ ARE	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
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CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DUP DSE DSE O.000	COMMUNITY/ ARE CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE O.000	
COMMUNITY/ AREA	CALL SIGN	DUP DSE DSE O.000	COMMUNITY/ ARE CALL SIGN Total DSEs	FIFTY-SIXTH A DSE Interpretation of the content o	SUBSCRIBER GROU	DSE O.000	

LEGAL NAME OF OWN MI-CONNECTION			EMS			S	YSTEM ID# 62990	Name
				TE FEES FOR EAC				
		SUBSCRIBER GROU		TT .		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 Exclusivity
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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	
					р			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROU		<u> </u>		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0 	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				••				
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

SYSTEM ID# IICATION SYSTEMS SYSTEM ID# 62990				EMS			LEGAL NAME OF OWNE MI-CONNECTION (
OMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
SUBSCRIBER GROUP SIXTY-SECOND SUBSCRIBER GROUP O COMMUNITY AREA					SUBSCRIBER GRO	TY-FIRST	
O COMMUNITY/ AREA Compu			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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		····					
0.00 Total DSEs 0.00			Total DSEs	0.00			Total DSEs
\$ 0.00 Gross Receipts Second Group \$ 0.00	nd Group \$	and Group	Gross Receints Secon	0.00	\$	roup	Gross Receipts First Gr
Orosa Nescripta descrita discup	u croup	ina Group	Gross receipts decor	0.00	<u> </u>	Toup	or one recomplete institution
\$ 0.00 Base Rate Fee Second Group \$ 0.00	nd Group \$	ond Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
SUBSCRIBER GROUP SIXTY-FOURTH SUBSCRIBER GROUP	Y-FOURTH SUBSCRIBER GROUP	TY-FOURTH	SIXT	JP	SUBSCRIBER GRO	TY-THIRD	SIXT
0 COMMUNITY/ AREA 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE	DSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		1	Total DSEs	0.00		'	Total DSEs
0.00 Total DSEs			11				
	h Group \$	th Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTY-FIFTH SUBSCRIBER GROUP JNITY/ AREA O COMMUNITY/ AREA O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTY-SIXTH SUBSCRIBER GROUP O COMPUTATION O COMP
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndicat Exclusive Surchard for Partially Distant Station.
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate A DESTRUCTION OF STATE
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndicat Exclusive Surchary for Partially Distant Stations SES 0.00 Total DSEs 0.00
Base Rate and Syndicat Exclusiv Surchare for Partiall Distant Station:
Syndicat Exclusiv Surchard for Partiall Distant Station Statio
Exclusive Surchard for Partially Distant Stations SES 0.00 Total DSEs 0.00
Surchary for Partiall Distant Station SES 0.00 Total DSES 0.00
for Partiall Distant Stations SES 0.00 Total DSES 0.00
Partiall Distant Station: SES 0.00 Total DSES 0.00
Distant Stations Distant Stations Total DSEs Do not stations Distant Stations
Station: Sta
SES
Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00
ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00
SIXTY-SEVENTH SUBSCRIBER GROUP SIXTY-EIGHTH SUBSCRIBER GROUP
JNITY/ AREA 0 COMMUNITY/ AREA 0
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
SES
Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00
ate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00

MI-CONNECTION COMMI	BLE SYSTEM: JNICATION SYST	EMS			5	YSTEM ID# 62990	Nai
			TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	SUBSCRIBER GRO		H .		SUBSCRIBER GROU		ç
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Comp
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	9
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Γotal 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 Seco	ond Group	\$	0.00	
	SUBSCRIBER GRO				SUBSCRIBER GROU		
SEVENTY-FIRS				TY-SECOND	<u> </u>		
SEVENTY-FIRS		DUP	SEVEN	TY-SECOND	<u> </u>	UP	
SEVENTY-FIRS	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS'	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS'	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS'	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS'	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS'	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS'	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS'	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS' COMMUNITY/ AREA CALL SIGN DSE	SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GROU	UP 0	
SEVENTY-FIRS' COMMUNITY/ AREA CALL SIGN DSE	SUBSCRIBER GRO	DUP 0	SEVEN COMMUNITY/ AREA CALL SIGN	TY-SECOND A DSE	SUBSCRIBER GROU	DSE	
COMMUNITY/ AREA	CALL SIGN	DUP DSE DSE 0.00	SEVEN COMMUNITY/ AREA CALL SIGN Total DSEs	TY-SECOND A DSE	CALL SIGN	DSE O.00	

MI-CONNECTION COMM	UNICATION SYST	rems				62990	Nam
BLOCK A	: COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	D SUBSCRIBER GRO				SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Comput			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
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							Distan
		<u>.</u>			-		Station
			·		-		
otal DSEs		0.00	Total DSEs		-	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	s	0.00	Base Rate Fee Sec	ond Group	s	0.00	
	\$	0.00	Base Rate Fee Sec		\$	0.00	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	DUP	SEV	ENTY-SIXTH	\$ I SUBSCRIBER GROU	UP	
SEVENTY-FIFT	·			ENTY-SIXTH			
SEVENTY-FIFT	·	DUP	SEV	ENTY-SIXTH		UP	
SEVENTY-FIFT	H SUBSCRIBER GRO	OUP 0	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	UP 0	
SEVENTY-FIFT	H SUBSCRIBER GRO	OUP 0	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	UP 0	
SEVENTY-FIFT	H SUBSCRIBER GRO	OUP 0	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	UP 0	
SEVENTY-FIFT	H SUBSCRIBER GRO	OUP 0	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	UP 0	
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SEVENTY-FIFT	H SUBSCRIBER GRO	OUP 0	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	UP 0	
SEVENTY-FIFT	H SUBSCRIBER GRO	OUP 0	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	UP 0	
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SEVENTY-FIFT	H SUBSCRIBER GRO	DUP	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	DSE	
SEVENTY-FIFT COMMUNITY/ AREA CALL SIGN DSE	H SUBSCRIBER GRO	DUP DSE DSE 0.00	SEV COMMUNITY/ ARE	ENTY-SIXTH	I SUBSCRIBER GRO	DSE	
SEVENTY-FIFT COMMUNITY/ AREA CALL SIGN DSE	H SUBSCRIBER GRO	DUP	SEV COMMUNITY/ ARE CALL SIGN	DSE	I SUBSCRIBER GRO	DSE	
COMMUNITY/ AREA	CALL SIGN	DUP DSE DSE 0.00	CALL SIGN CALL SIGN Total DSEs	DSE THE Group	CALL SIGN	DSE	

	EGAL NAME OF OWNER OF CABLE SYSTEM: NI-CONNECTION COMMUNICATION SYSTEMS 62990							Name
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	······		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-	<u></u>			Base Rate Fee and
		-						Syndicated
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Total DSEs			0.00	Total DSEs		Ц	0.00	İ
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
	О.ОЦР	<u>·</u>			С. Сир			1
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVE COMMUNITY/ AREA		SUBSCRIBER GRO	JP 0	COMMUNITY/ AREA		I SUBSCRIBER GRO	JP 0	İ
COMMUNITY AREA				COMMUNITY AREA				İ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
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Total DCCs			0.00	Total DCFs			0.00	1
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Gross Receipts Third	и отоир	\$	0.00	Gross Receipts Fourt	ιι σιουρ	\$	0.00	1
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW MI-CONNECTION		E SYSTEM: NICATION SYSTE	MS	SYSTEM ID# 62990				Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP SUBSCRIBER GRO	JP	•
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
								Syndicated
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								Partially
								Distant Stations
Total DSEs			0.00	Total DSEs	_	ļļ.	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
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Base Rate Fee First		\$	0.00	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	EIGHT COMMUNITY/ AREA		I SUBSCRIBER GRO	JP 0	
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

	BLE SYSTEM: UNICATION SYS	ГЕМЅ				62990	Nan
BLOCK A	: COMPUTATION C	F BASE RA	ATE FEES FOR EA	CH SUBSCR	RIBER GROUP		
	H SUBSCRIBER GRO	OUP	Ħ		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Comput
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rat
							and
							Syndica
						<u></u>	Exclusi
						<u></u>	Surcha
			-				for Partia
			1			····	Dista
		····	•				Statio
					Ц		
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY-SEVENT	H SUBSCRIBER GRO	OUP	EIG	HTY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Δ		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
Total DSEs	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		DSE	CALL SIGN Total DSEs	DSE		DSE	

LEGAL NAME OF OW MI-CONNECTION		.E SYSTEM: NICATION SYSTE	MS		SYSTEM ID# 62990			Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACI		RIBER GROUP I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
					<u>.</u>			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		\$	0.00	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GROU)P 0	NINET		SUBSCRIBER GROU	JP 0	
COMMONT IT AREA	`			OOMMONT IT AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u></u>			
								
					<u></u>			
					<u></u>			
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: MI-CONNECTION COMMUNICATION SYSTEMS 629							Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fee and
								Syndicated
				-				Exclusivity Surcharge
		-						for
								Partially Distant
								Stations
Total DSEs	•		0.00	Total DSEs	·		0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GROU	<u>JP</u>	COMMUNITY/ AREA		I SUBSCRIBER GRO	UP 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	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: NI-CONNECTION COMMUNICATION SYSTEMS 629							Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER 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 and
								Syndicated
						-		Exclusivity Surcharge
						•		for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NIN	ETY-NINTH	SUBSCRIBER GROU	JP	ONE HU	JNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
					<u> </u>			
	·····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	า Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

FION SYSTEMS 62990 Na	S'			EMS		COMMUI	MI-CONNECTION
JTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	IBER GROUP	I SUBSCR	SE RATE FEES FOR EAC	BASE RA	COMPUTATION C	LOCK A: C	Bl
CRIBER GROUP ONE HUNDRED SECOND SUBSCRIBER GROUP	SUBSCRIBER GROU	D SECOND	ONE HUNDR	UP	SUBSCRIBER GRO	ED FIRST	ONE HUNDR
0 COMMUNITY/ AREA 0 Comp			COMMUNITY/ ARE	0			COMMUNITY/ AREA
				DSE	CALL SIGN	DSE	CALL SIGN
Base F							
					-	. <mark>.</mark>	
Sync Excl					-	-	
Surc						1	
1							
Par							
Dis		<u></u>			-		
Sta				<u> </u>	-		
						1	
					-	-	
						4	
0.00 Total DSEs			.00 Total DSEs	0.00			Total DSEs
0.00 Gross Receipts Second Group \$ 0.00	\$	nd Group	.00 Gross Receipts Sec	0.00	\$	roup	Gross Receipts First G
0.00 Base Rate Fee Second Group \$ 0.00	\$	nd Group	.00 Base Rate Fee Sec	0.00	\$	roup	3ase Rate Fee First G
CRIBER GROUP ONE HUNDRED FOURTH SUBSCRIBER GROUP	SUBSCRIBER GROU	D FOURTH	ONE HUNDR	UP	SUBSCRIBER GRO	ED THIRD	ONE HUNDRE
0 COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
L SIGN DSE CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DSE	OSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		<u></u>			-	. <mark>.</mark>	
		<u></u>				-	
					-	<u></u>	
0.00 Total DSEs 0.00			00 Total DSEs	0.00			Fotal DSEs
	\$	n Group			\$	Group	
	\$	n Group			\$	Group	Fotal DSEs Gross Receipts Third G

LEGAL NAME OF OWN MI-CONNECTION			EMS			S	YSTEM ID# 62990	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	RED FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		_						and
								Syndicated
								Exclusivity
								Surcharge
	····		···		·····	-		for
	····		····					Partially Distant
	••••	-				-		Stations
		=				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	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	
		_						
							<u></u>	
		-				-		
		H	•••		•••••	-	····	
			<u></u>			-		
			<mark></mark>				<u> </u>	
	···		<u>-</u>					
						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 Enter here and in bloc			criber group	as shown in the boxe	es above.	\$		

	YSTEM ID# 62990	5			EMS			LEGAL NAME OF OWNE MI-CONNECTION
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	_OCK A: (BI
9		SUBSCRIBER GROU	ED TENTH	i i		SUBSCRIBER GRO	ED NINTH	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate Exclusivit						-		
Surcharg							-	
for						-		
Partially								
Distant						-		
Stations	<u></u>		<u> </u>			-		
			······································				·	
		_				-		
-					<u> </u>			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	TWELVTH	ONE HUNDRED	JP	SUBSCRIBER GRO	LEVENTH	ONE HUNDRED E
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
					1	CALL SIGN	DSE	CALL SIGN
1	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL SIGIV		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALE GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL CIGIN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALLOON		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	OALL GION		
	DSE	CALL SIGN	DSE	Total DSEs	0.00	OALL GION		Fotal DSEs
		CALL SIGN				\$	Group	
	0.00			Total DSEs	0.00		Group	Fotal DSEs Gross Receipts Third C

LEGAL NAME OF OWN MI-CONNECTION			EMS			S	YSTEM ID# 62990	Name
				TE FEES FOR EAC				
ONE HUNDRED THI	RTEENTH	SUBSCRIBER GRO				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	OF ILL STORY	502	OF LEE GIGIT	502	OF ILLE STORY	502	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
							<u>.</u>	Partially
			<u></u>				<u> </u>	Distant
								Stations
	···							
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	···		•••••••••••••••••••••••••••••••••••••••					
Total DSEs			0.00	Total DSEs	!		0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F	IFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE		- CODOGNIBENT ONCO	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···			-		
	···		····					
			•••••••••••••••••••••••••••••••••••••••			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN MI-CONNECTION			EMS			S	YSTEM ID# 62990	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE		SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	:A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
					<u></u>			Syndicated
		 			<u></u>		<u> </u>	Exclusivity
								Surcharge for
	····		···		·····		<u></u>	Partially
	····	-			•••••		····	Distant
							•••••	Stations
	<u></u>		 		·····			
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	
ONE HUNDRED N	INTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>		<u> </u>	
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		-			<mark>.</mark>			
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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	ırth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW MI-CONNECTIO		LE SYSTEM: NICATION SYSTE	MS			S	YSTEM ID# 62990	Name
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		RIBER GROUP SUBSCRIBER GROUF)	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED TW	/ENTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	ITY-FOURTH	I SUBSCRIBER GROUF)	
COMMUNITY/ AREA	Α		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	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI		LE SYSTEM: NICATION SYSTE	MS			S	YSTEM ID# 62990	Name
		COMPUTATION OF SUBSCRIBER GROUP		TE FEES FOR EACH		RIBER GROUP)	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							<u></u>	Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
					<u>.</u>			for Partially
								Distant
					<u>.</u>			Stations
						.		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	id Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NE HUNDRED TWENT		SUBSCRIBER GROUP	0	ONE HUNDRED TWEN	ITY-EIGHTH	SUBSCRIBER GROUP	0	
COMMONT IT AIRLA				COMMONT IT AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						.		
		-						
	<u></u>	-						
							<u></u>	
Total DCFa			0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third	I Group	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
1.111.1000.010 111110	-:-wh	•		S. 222 . Goo.pto i ouiti	P			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			MS			S	YSTEM ID# 62990	Name
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	RIBER GROUP		
		SUBSCRIBER GROUP		11		I SUBSCRIBER GROUP	ı	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.22 0.0.1	302	07.122.01011		07.122.010.1	100	07.122 0.011	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
		-						for
		-						Partially
		-						Distant Stations
							····	Stations
		-						
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED THIS	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-SECONE	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					-			
		-						
	-					-		
		_						
					<u> </u>			
							····	
Total DSEs	"		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
C.000 Receipts Tilliu C	J. 0up	.*	<u> </u>	STOOS RECEIPTS FOURT	. Group	Ψ	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN		LE SYSTEM: NICATION SYSTE	MS			S	YSTEM ID# 62990	Name
ONE HUNDRED TH	HIRTY-THIRD	COMPUTATION OF SUBSCRIBER GROUP		H	TY-FOURTH	RIBER GROUP I SUBSCRIBER GROUF		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fee
					···			and Syndicated
		-						Exclusivity
								Surcharge
								for Partially
					···			Distant
								Stations
		<u> </u>						
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
		SUBSCRIBER GROUP		ii .		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	l Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI			TEMS			S	YSTEM ID# 62990	Name
	BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
ONE HUNDRED THIRT		SUBSCRIBER GROU		TI .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.1220.00				Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
						-		for
								Partially
						-		Distant Stations
	·····		····		·····	-		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Groun	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
oroso recorpto i mot	Стоир	<u>*</u>		Cross recorpts occ	ond Group	•		
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
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Total DSEs	ı		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	
Total DSEs Gross Receipts Third Base Rate Fee Third Base Rate Fee: Add Enter here and in blo	Group the base rai	\$ te fees for each subs	0.00	Gross Receipts Fou	rth Group	\$ \$	0.00	

MI-CONNECTION COMMUNI	SYSTEM: CATION SYSTEI	мѕ			SY	STEM ID# 62990	Name
		BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FORTY-FIRST SU	JBSCRIBER GROUP		t i		SUBSCRIBER GROUP		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	Computatio
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 Group \$		0.00	Gross Receipts Secon	nd Group	\$	0.00	
<u>.</u>				г	·		
Base Rate Fee First Group \$		0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FORTY-THIRD SU	IBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA		0	COMMUNITY/ AREA	0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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				<u></u>			
		0.00	Total DSEs			0.00	
Total DSEs							
Total DSEs Gross Receipts Third Group \$		0.00	Gross Receipts Fourth	h Group	\$	0.00	

'	62990						COMMU	MI-CONNECTION
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (Bl
9		SUBSCRIBER GROUP	RTY-SIXTH	Ħ		SUBSCRIBER GROUP	RTY-FIFTH	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	ross Receipts First G
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First G
		OLIDOODIDED ODOLID		H				NE HINDRED FORTY
	'	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FO)	E HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP MMUNITY/ AREA		
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	-SEVENTH	
		CALL SIGN	DSE	11		SUBSCRIBER GROUP	DSE	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	48TEM ID# 62990	S			EMS			LEGAL NAME OF OWNE
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	FIFTIETH			SUBSCRIBER GRO	ΓΥ-NINTH	ONE HUNDRED FOR
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP	SUBSCRIBER GRO	TY-FIRST	ONE HUNDRED FIF
	COMMUNITY/ AREA 0							COMMUNITY/ AREA
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	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OW MI-CONNECTION		LE SYSTEM: NICATION SYSTE	EMS			S	YSTEM ID# 62990	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH			JP	0
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
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								Exclusivity
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	4		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	d 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			criber group	as shown in the boxes	above.	\$		

TION COMMUNICATION SYSTEMS 6299)# Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
D FIFTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP	9
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DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	•••
	Base Rate
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First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	_
First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
RED FIFTY-NINTH SUBSCRIBER GROUP ONE HUNDRED SIXTIETH SUBSCRIBER GROUP	
AREA 0 COMMUNITY/ AREA 0)
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LEGAL NAME OF OWNE			EMS			5	62990	Name
ВІ				TE FEES FOR EAC				
		SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	Moores	sville		COMMUNITY/ ARE		on		Computation
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			<u></u>					for
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								Stations
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			<u> </u>					
								
								
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 386	5,660.58	Gross Receipts Sec	ond Group	\$ 2	229,906.29	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Corneli	us		COMMUNITY/ AREA	A Hunter	sville		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third (Group	\$ 386	5,660.58	Gross Receipts Fou	rth Group	\$	41,801.15	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				II				
Base Rate Fee: Add th		te fees for each subs space L (page 7)	criber group	as shown in the boxe	s above.	\$	0.00	

	IUNICATION SYS	TEMS				62990	Name
	A: COMPUTATION C		TE FEES FOR EAC				
	TH SUBSCRIBER GR				SUBSCRIBER GRO		9
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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	
SEVEN ⁻	TH SUBSCRIBER GR	OUP		EIGHTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
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Fotal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	-	

	COMMU	NICATION SYST	EMS				62990	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
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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	
	ELEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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	DSE	CALL SIGN			DSE	CALL SIGN		
Total DSEs			0.00	Total DSEs			0.00	
Total DSEs		CALL SIGN				CALL SIGN		
Total DSEs Gross Receipts Third	Group		0.00	Total DSEs Gross Receipts Fou	rth Group		0.00	
Total DSEs	Group		0.00	Total DSEs	rth Group		0.00	

Mana	YSTEM ID# 62990				=IVIS	NICATION SYSTE		LEGAL NAME OF OWNE MI-CONNECTION
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	IRTEENTH			SUBSCRIBER GROU	RTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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D	0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon S COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	CALL SIGN	TOUP FTEENTH DSE	CALL SIGN CALL SIGN Total DSEs
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MPUTATION OF BASE RABSCRIBER GROUP O CALL SIGN DSE		GHTEENTH	SUBSCRIBER GROU	JP 0 DSE	Gomputation of Base Rate Fand Syndicated Exclusivity Surcharge
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	ii e	WENTETH	SUBSCRIBER GROU		
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0.00			l.		
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	YSTEM ID# 62990	31			EMS	NICATION SYSTE	COMMU	LEGAL NAME OF OWNE MI-CONNECTION
				TE FEES FOR EACH				
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LEGAL NAME OF OWNER O MI-CONNECTION CO			EMS			5	YSTEM ID# 62990	Name
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BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL	of
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Nonpermitted 3.75 Stations

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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

SYSTEM ID# 62990 Name			EMS			MI-CONNECTION
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LEGAL NAME OF OWNE MI-CONNECTION			TEMS			S	62990	Name
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Nonpermitted 3.75 Stations

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LEGAL NAME OF OWNE MI-CONNECTION (EMS			S	62990	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
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Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER MI-CONNECTION (EMS		_	S	YSTEM ID# 62990	Name
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	l							
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	

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MI-CONNECTION COMMUNICATION SYSTEMS 62990 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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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MI-CONNECTION COMMUNICATION SYSTEMS 62990 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-FIRST SUBSCRIBER GROUP ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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FORM SA3E. PAGE 20.

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