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						
07/25/2018	\$ 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 Period	2018/1								
Period	Instructions:								
B Owner	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	Lafayette City Parish Consolidated Government								
	Lafayette Utilities System								
			()631092018/					
				063109 2018/1					
	705 West University Avenue								
	Lafayette, LA 70506-3543								
С	INSTRUCTIONS: In line 1, give any business or trade names used to id	dentify the busines	ss and operation of the syst	em unless these					
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address give	n in space B.					
System	1 IDENTIFICATION OF CABLE SYSTEM: LUS Fiber								
	MAILING ADDRESS OF CABLE SYSTEM:								
	700 St John Street, Suite 300 2 (Number, street, rural route, apartment, or suite number)								
	Lafayette, LA 70501								
	(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	with all communities.								
Served	CITY OR TOWN	STATE							
First	Lafayette	LA							
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda	MD	Α	1					
•	Alliance	MD	B	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.			->/							
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
Lafayette City Parish Consolidated Government			063109							
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#							
Lafayette	LA	Α		First						
Broussard	LA	A		Community						
Youngsville	LA	A								
Scott	LA	A								
				See instructions for additional information						
				on alphabetization.						
				on diphabetization.						
				Add rows as necessary.						
				Add rows as flecessary.						

		1
••••••••	 	
		1

Name Legal Name of Owner of Cable System: SYSTEM ID#

Lafayette City Parish Consolidated Government 063109

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	NO. OF CATEGORY OF SERVICE SUBSCRIBERS RATE			
Residential:						
 Service to first set 	9,052	\$ 24.95				
 Service to additional set(s) 						
 FM radio (if separate rate) 						
Motel, hotel						
Commercial						
Converter						
Residential	11,848	\$ 8.50				
Non-residential	645	\$ 8.50				
1	F	T	1			

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2					
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	CATEGORY OF SERVICE	RATE	
Continuing Services:		Installation: Non-residential			НВО	\$ 17.95
• Pay cable		Motel, hotel		PP	Cinemax	\$ 13.95
 Pay cable—add'l channel 		Commercial		PP	Showtime	\$ 15.95
Fire protection		Pay cable		PP	Starz	\$ 13.60
Burglar protection		Pay cable-add'l channel		PP	ESPN Hospitality	\$ 109.99
Installation: Residential		Fire protection			Playboy Monthly	\$ 16.99
First set		Burglar protection			NFL Redzone	\$ 47.00
 Additional set(s) 		Other services:			Fox Sports Pack	\$ 95.00
 FM radio (if separate rate) 		Reconnect	\$	10.00	Stingray Digital Music	\$ 30.00
Converter		Disconnect	\$	5.00	Wallfish Fee	\$ 35.00
		Outlet relocation	\$	60.00	Truck Roll	\$ 20.00
		Move to new address			DVR Service	\$ 11.99
					Set Top Box Rental	\$8.50

LEGAL NAME OF OW					OVOTEM ID#	ıl
			covernment		SYSTEM ID#	Namo
			overnment		063109	
PRIMARY TRANSMITI In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program basis under specific F. Do not list the station station was carried. List the station here basis. For further in the paper SA3 f. Column 1: List ea each multicast stream cast stream as "WET. WETA-simulcast). Column 2: Give the its community of licer on which your cable scolumn 3: Indicated educational station, b (for independent multifor the meaning of the Column 4: If the splanation of local sence Column 5: If you lead to system and ton "E" (exempt). For	G, identify even system during the system during the stitions in effect or 76.61(e)(2) and (easis, as explaine Stations: With a CC rules, regular here in space of only on a subset, and also in spanformation concorm. The station's call in associated with A-2". Simulcast one channel numbers. For example, system carried the in each case where the system carried the sine explains of the station is outside wice area, see part of the station is outside wice area, see part of a distant at entered into one a part-time sign of a distant at entered into one a primary trans of a primary trans of simulcasts, also a system carried into the station of a distant at entered into the aprimary trans of simulcasts, also a system carried into the simulcasts and the simulcasts are simulcasts.	y television state accounting a June 24, 19, 4), or 76.63 (red in the next prespect to any ations, or auth G—but do listitute basis. ace I, if the state accounting substitute basis. The state account is sign. Do not red a station account a station account accoun	ation (including green) period, except 81, permitting the referring to 76.6 paragraph. If distant stations is a distant stations is a carried tute basis station report origination cording to its over the station is a network of the station is a network), "N-M" (I educational), or a general instruct 4, you must confict a general instruct 5, you must confict a general instruct 6, you must confict a general instruct 6, you must confict a general instruct 7, you must confict a general instruct 9, you carried the	(1) stations carried carriage of certal (e)(2) and (4))]; is carried by your die Special Statement of both on a substitus, see page (v) on program service er-the-air designate column 1 (list each the television statington, D.C. This park station, an indiffer network multiple of "E-M" (for nonections located in the thing of the television statington, perfect (for nonections located in the thing of the television statington, perfect (for nonections located in the thing of the televisions located in the primal subject to a royalted stating the primal channel on any of the television and the primal channel on any of the carried the thing the primal channel on any of the stating the stating the primal channel on any of the stating th	es". If not, enter "No". For an ex- e 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 ary transmitter, enter the designa- ther basis, enter "O." For a further	Primary Transmitters: Television
of a written agreemer the cable system and tion "E" (exempt). For explanation of these	nt entered into on a primary trans or simulcasts, also three categories ne location of ea Canadian statio	n or before Jumitter or an actor enter "E". If , see page (v) ch station. Fo	nne 30, 2009, be ssociation repre you carried the of the general or U.S. stations,	etween a cable sy esenting the prima channel on any o instructions locate list the communit	stem or an association representing by transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the	
		nnei line-ups,	use a separate			
			use a separate	space G for each		_
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	space G for each		
SIGN	CHANNEL NUMBER	CHANN 3. TYPE OF STATION	EL LINE-UP 4. DISTANT? (Yes or No)	AA 5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-
SIGN	CHANNEL NUMBER	CHANN 3. TYPE OF STATION N	4. DISTANT? (Yes or No)	AA 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Lafayette, LA	See instructions for
SIGN KATC KATC-CW	CHANNEL NUMBER 3.1 3.2	CHANN 3. TYPE OF STATION N N-M	4. DISTANT? (Yes or No)	AA 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Lafayette, LA Lafayette, LA	
SIGN KATC KATC-CW KLFY	3.1 3.2 10.1	CHANN 3. TYPE OF STATION N N-M N	4. DISTANT? (Yes or No) No No	AA 5. BASIS OF CARRIAGE	6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV	3.1 3.2 10.1 10.2	CHANN 3. TYPE OF STATION N N-M	4. DISTANT? (Yes or No) No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN	3.1 3.2 10.1 10.2 15.1	CHANN 3. TYPE OF STATION N N-M N-M I	4. DISTANT? (Yes or No) No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet	3.1 3.2 10.1 10.2 15.1 15.3	CHANN 3. TYPE OF STATION N N-M N-M I I-M	4. DISTANT? (Yes or No) No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I	3.1 3.2 10.1 10.2 15.1 15.3 22.1	CHANN 3. TYPE OF STATION N-M N-M I I-M I-M	A DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Carencro, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I	3.1 3.2 10.1 10.2 15.1 15.3	CHANN 3. TYPE OF STATION N N-M N-M I I-M	4. DISTANT? (Yes or No) No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Carencro, LA Baton Rouge, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I KLPB	3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2	CHANN 3. TYPE OF STATION N-M N-M I I-M I-M E E	A DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Carencro, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I	3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1	CHANN 3. TYPE OF STATION N N-M I I-M I-M E	A. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Carencro, LA Baton Rouge, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I KLPB	3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2	CHANN 3. TYPE OF STATION N-M N-M I I-M I-M E E	A DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Baton Rouge, LA Baton Rouge, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I KLPB KLPB-Kids KLPB-Create	3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2 24.3	CHANN 3. TYPE OF STATION N-M N-M I-M I-M E E	A DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Carencro, LA Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I KLPB KLPB-Kids KLPB-Create KXKW	3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2 24.3 32.1	CHANN 3. TYPE OF STATION N-M N-M I-M I-M E E	EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Carencro, LA Baton Rouge, LA Baton Rouge, LA Carencro, LA Carencro, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I KLPB-Kids KLPB-Create KXKW KAJN	CHANNEL NUMBER 3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2 24.3 32.1 40	CHANN 3. TYPE OF STATION N-M N-M I-M I-M E E	A DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Carencro, LA Baton Rouge, LA Baton Rouge, LA Carencro, LA Lafayette, LA	additional information
KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KDCG-H&I KLPB KLPB-Kids KLPB-Create KXKW KAJN KLAF	CHANNEL NUMBER 3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2 24.3 32.1 40 46.1	CHANN 3. TYPE OF STATION N N-M I I-M I-M E E I I-M I	EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	AA 5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA Lafayette, LA Lafayette, LA	additional information

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	solidated G	overnment		063109	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa	G, identify ever system during to ions in effect on ions in expansion and also in spariformation concurr. In the station's call associated with expansion ions in expansion ions in expansion ions in expansion ions in expansion is outside to expansion is outside to expansion ion on a part-thicking ion of a distant at entered into on a primary transismulcasts, also ince categories in location of expansion ion ion expansion in expansion ion ion a part-thicking ion of a distant at entered into on a primary transismulcasts, also ince categories in location of expansion ion ion expansion ion in expansion ion ion ion ion ion expansion ion ion ion ion ion ion ion ion ion	y television standard and the accounting of June 24, 194, or 76.63 (in did in the next prespect to any ations, or auth G—but do listitute basis. In the standard area of the station acceptance of the station acceptance of the station acceptance of the station. In the station acceptance of the station acceptance of the station. In the station acceptance of the station of the station of the local service of the station of the station. In the station of the station of the station of the station. For the station of the station of the station of the station of the station. For one, if any, giving the station of the stat	g period, except 81, permitting the referring to 76.6 paragraph. If distant stations orizations: to it in space I (the ation was carried tute basis station report origination cording to its own be reported in containing the reported in containing to its own be reported in containing the reported in standard in Wash ation is a network of the decent instruction of the general instruction of the same that is not some 30, 2009, be sesociation repreyou carried the containing the report of the general in true. Substituting the report of the general in true.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce e Special Statemed both on a substitus, see page (v) on program services er-the-air designation of the television statifington, D.C. This light of the television statifington, D.C. This ligh	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your etering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- ether basis, enter "O." For a further ed in the paper SA3 form. expected to which the station is licensed by the enter which the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AB		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment		063109	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa	G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2)	y television state he accounting in June 24, 198 (4), or 76.63 (red) in the next perspect to any attions, or auth G—but do list titute basis. ace I, if the state erning substitions are station accounting the station. Whether the station whether the station. Whether the station accommercial page (v) of the ethe local servage (v) of the	g period, except 81, permitting the referring to 76.6° paragraph. I distant stations corrizations: to it in space I (the atton was carried tute basis station cording to its ower be reported in cordinate as assigned to the cordinate of its ower be reported in struction of the general instruction of the general in the cordinate of lack of a seam that is not some 30, 2009, be sesociation representation of the general in true. Substitutions, I de the name of the cordinate in the cordinate	(1) stations carrie (1) stations carrie (2) and (4))]; as carried by your cast (2) and (3)]; as carried by your cast (3) statement (4) both on a substitute, see page (v) or a program services (2) are the early designated (3) and (4) are the television station (4) are the television station (5) are the television station (6) are the television station (7). This for the television station (7), enter "Ye ions located in the mplete column 5, so the television station (6) are the television stations located in the mplete column 5, so the television of	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identified.	Primary Transmitters: Television
		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	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	solidated G	overnment		063109	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa	G, identify ever system during to ions in effect on ions in expansion and also in spariformation concurr. In the station's call associated with expansion ions in expansion ions in expansion ions in expansion ions in expansion is outside to expansion is outside to expansion ion on a part-thicking ion of a distant at entered into on a primary transismulcasts, also ince categories in location of expansion ion ion expansion in expansion ion ion a part-thicking ion of a distant at entered into on a primary transismulcasts, also ince categories in location of expansion ion ion expansion ion in expansion ion ion ion ion ion expansion ion ion ion ion ion ion ion ion ion	y television standard and the accounting of June 24, 194, or 76.63 (in did in the next prespect to any ations, or auth G—but do listitute basis. In the standard area of the station acceptance of the station acceptance of the station acceptance of the station. In the station acceptance of the station acceptance of the station. In the station acceptance of the station of the station of the local service of the station of the station. In the station of the station of the station of the station. For the station of the station of the station of the station of the station. For one, if any, giving the station of the stat	g period, except 81, permitting the referring to 76.6 paragraph. If distant stations orizations: to it in space I (the ation was carried tute basis station report origination cording to its own be reported in containing the reported in containing to its own be reported in containing the reported in standard in Wash ation is a network of the decent instruction of the general instruction of the same that is not some 30, 2009, be sesociation repreyou carried the containing the report of the general in true. Substituting the report of the general in true.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce e Special Statemed both on a substitus, see page (v) on program services er-the-air designation of the television statifington, D.C. This light of the television statifington, D.C. This ligh	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your etering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- ether basis, enter "O." For a further ed in the paper SA3 form. expected to which the station is licensed by the enter which the station is identified.	Primary Transmitters: Television
		CHANN	EL LINE-UP	AD		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment		063109	- Tunio
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable: FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Program ba Substitute Program ba Substitute Program ba Substitute Basis: basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licenson which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant state For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even- system during to ions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular in here in space only on a subs and also in spa information cond form. ch station's call associated with A-2". Simulcast e channel numb ise. For example system carried the in each case w in each cas	y television standard accounting in June 24, 194, or 76.63 (rd d in the next prespect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the local service (v) of the local service (period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in comparation in a sassigned to the station is a network ation is a network of the stational, on the stational of the stat	(1) stations carried e carriage of certa 1(e)(2) and (4))]; as a carried by your constructions as carried by your constructions. See page (v) on program services er-the-air designation of the television statifington, D.C. This ark station, an indefor network multice the television statifington, D.C. This ark station, an indefor network multice the television statifington, proceed in the form the television located in the constructions located in the construction of the television of the television of the column 5, so the television of the televis	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AE		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	solidated G	overnment		063109	- Tunio
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pa	G, identify even during the system during the solutions in effect on io.6.61(e)(2) and (sis, as explaine stations: With a CC rules, regular here in space only on a substand also in spation and also in spation and also in spation and also in spation associated with a cast of the station's call associated with a cast of the sine ach case we entered the cast), "E" (for not esset terms, see attoin is outside to a primary trans is included in a part-tilition of a distant the entered into of a primary trans simulcasts, also are categories a location of ea	y television standard accounting in June 24, 194, or 76.63 (rd in the next) respect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the local service (v) of the local service (v)	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in comparation in a sassigned to the station is a network ation is a network of the stational, on the stational of the stat	(1) stations carried e carriage of certa 1(e)(2) and (4))]; as a carried by your constructions as carried by your constructions. See page (v) on program services er-the-air designation of the television statifington, D.C. This ark station, an indefor network multice the television statifington, D.C. This ark station, an indefor network multice the television statifington, proceed in the form the television located in the constructions located in the construction of the television of the television of the column 5, so the television of the televis	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AF		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
		 				
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FURM SAJE. PAGE 3.					OVOTEM ID#				
Lafayette City I			overnment		SYSTEM ID# 063109	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								
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Note: If you are utilizing	ng multiple chai	•	EL LINE-UP		cnannei iine-up.				
	0 010407		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.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Lafayette City	Parish Cons	solidated G	overnment		063109		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) or "Or no							
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	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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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE S	/STEM:			SYSTEM ID#	Name	
Lafayette City	Parish Cons	solidated G	overnment		063109		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2) and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast). "I' (for independent)," I' for independent)," For an explanation of local service area, see page (v) of the general instructions located in the							
		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.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Lafayette City	Parish Cons	solidated G	overnment		063109		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast							
Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AJ			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Lafayette City	Parish Cons	solidated G	overnment		063109	- Tunio	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network)", N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) or the st							
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AK			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.					CVCTEM ID#	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Lafayette City I			overnment		063109	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement	G, identify even by stem during the lons in effect on a 6.61(e)(2) and (6.61(e)(2) and (6.61(e	y television standard page (v) of the station. whether the station. whether "N" (for noncommercial page (v) of the es" in column on during the me basis became the station of the station of the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to the station was carried that basis station report origination cording to its own the reported in the station is a network as assigned to annel 4 in Wash station is a network etwork), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, i.e. "or general instructiv	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your content of the carried column 1 (list each of the carried column 1 (list each of the carried column 1). This work is the carried column 1 (for noncontent of the carried column 1), enter "Ye content of the carried column 5, enter "Ye content of the carried column 5, so d. Indicate by enter carried column 1 (subject to a royalty stween a cable system).	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also ree categories e location of ea Canadian statio	o enter "E". If , see page (v) ch station. Fo ns, if any, giv	you carried the of the general in or U.S. stations, e the name of the	channel on any ot instructions locate list the community ne community with	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.	
		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	
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Lafayette City	Parish Cons	solidated G	overnment		063109		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) or the st							
Note: If you are utilizir	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AM			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name	
Lafayette City	Parish Cons	solidated G	overnment		063109		
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: - Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. - List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as swcETA-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) wul							
		CHANN	EL LINE-UP	AN			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					CVCTEM ID#	
LEGAL NAME OF OWN			4		SYSTEM ID#	Name
Lafayette City I			overnment		063109	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss	G, identify even- system during ti- sons in effect or 6.61(e)(2) and (6.6	y television standard programmer to a counting on June 24, 19 4), or 76.63 (in the next) respect to any ations, or auth G—but do listitute basis. ace I, if the standard put the local service streams must be the FCC has streams must be the first of the station. Whether the station whether the station page (v) of the the local service streams must be the first of the local service streams on during the me basis became the local service multicast streams must be the local service streams on during the me basis became the local service multicast streams must be the local service streams.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to the station was carried that basis station report origination cording to its own the reported in control of the station is a network at the station is a network etwork), "N-M" ("I educational), one general instructivice area, (i.e. "or general instructivice, and instructivical of the station is a network of the station is a network etwork), "N-M" ("I educational), one general instructivice area, (i.e. "or general instructivical of a station is a network of accounting period ause of lack of a station is not seen that is not seen and the station is a network of the st	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each column 1 (list each column 1). This interest of the carried column 1 (list each column 1), and the carried column 1 (list each column 1), and the carried column 1 (list each column 1), and the column 1 (list each column 1), and the column 1 (list each column 1), and the column 1 (list each column 2), and the column 1 (list each column 3), and the column 3), and the column 3), and the column 3), and the carried column 3).	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the	a primary trans simulcasts, also tree categories e location of ea Canadian statio	mitter or an a o enter "E". If , see page (v ch station. Fo ns, if any, giv	ssociation repre you carried the) of the general i or U.S. stations, e the name of th	senting the primar channel on any ot instructions locate list the community ne community with	y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AO		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name	
Lafayette City I	Parish Cons	solidated G	overnment		063109		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational) wultica							
, , , , , , , , , , , , , , , , , , , ,	<u> </u>		EL LINE-UP				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE S'	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	solidated G	overnment		063109	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasi	G, identify ever system during to ions in effect of 6.61(e)(2) and (6.61(e)(2)	y television standard accounting in June 24, 194, or 76.63 (in din the next) respect to any ations, or auth G—but do listitute basis. In the standard account in a station account in a station account in a station. In the local service in column in during the same basis became the station account in a station. In the local service in column in during the same basis became the station in during the same basis became the station. In the local service in column in during the same basis became the same the same the same than the same that the same than	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the stion was carried the period of the stion was carried to the stion was carried to the period of the stion was station to the period of the stion was assigned to the stion is a network of the stion was assigned to the stion of the stions, in the stion of the stion of the stions, as the stion of the stion of the stion of the stions, as the stion of the stion of the stions, as the stion of the stion of the stion of the stion of the stions, as the stion of the	(1) stations carried the carriage of certain (e) (2) and (4))]; as a carried by your context of the special Statement of both on a substitution, see page (v) on a program service the er-the-air designation of the television statisticity of the television statisticity of the television statisticity of the television of the television statisticity of the television statisticity, enter "Yesions located in the mplete column 5, and Indicate by enticity at the television statisticity of the televisions located in the statisticity of the primal channel on any of instructions locate list the community is the statistic through the primal channel on any of instructions locate list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the	G Primary Transmitters: Television
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AQ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Lafayette City	Parish Cons	solidated G	overnment		063109	- Tunio	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) or the st							
Note: If you are utilizir	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AR			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Lafayette City I	Parish Cons	olidated G	overnment		063109	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
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 bass Substitute Basis is basis under specific FC • Do not list the station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and its carried the system and its carried system and its carr	ers: TELEVISIO G, identify eventy system 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 space only on a substand also in space formation concern. The station's call associated with a station's call associated with a station's call associated with a station and a channel numbers of the cast, "E" (for more than 10 cast), "E" (for more t	y television standard programment of the station accounting a June 24, 194, or 76.63 (respect to any ations, or auth G—but do listitute basis. In the station of the station account of the station account of the station account of the station. The station whether the station whether the station account of the station of the station of the station account of the station of the station of the station account of the station of the	ation (including period, except 81, permitting the referring to 76.6 paragraph. I distant stations orizations: It it in space I (the stion was carried to the station was carried to the stion was carried to the stion was examined to the station is a netwo etwork), "N-M" (if I educational), of egeneral instructive area, (i.e. "of general instructive area, (i.e. "of general instruction accounting period to the station is a network), and the station is a network egeneral instructive area, (i.e. "of general instruction accounting period ause of lack of a station is not station in the station is not station in the station is a network egeneral instruction accounting period ause of lack of a station is not station in the station is not station in the station is not station in the station in the station in the station is a network egeneral instruction i	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each column 1 (list each column 1). This in the carried column 1 (for noncontext of the carried column 1), enter "Ye ions located in the column 2), enter column 2), enter column 3), enter "Ye ions located in the column 4), enter column 5, enter column 5, enter column 5, enter column 6),	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). the paper SA3 form. sis. If not, enter "No". For an ex- epaper SA3 form. stating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
explanation of these the Column 6: Give the	ree categories e location of ea	, see page (v) ch station. Fo	of the general in U.S. stations,	nstructions locate list the community	d in the paper SA3 form. to which the station is licensed by the	
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name		
Lafayette City	Parish Cons	olidated G	overnment		063109			
PRIMARY TRANSMITTI	ERS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,61(e)(2) and (4), or 76,63 (referring to 76,611(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), "" (for indepen								
		CHANN	EL LINE-UP	AT				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name		
Lafayette City I	Parish Cons	olidated G	overnment		063109			
PRIMARY TRANSMITTE	ERS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 07.61(e)(2) and (4).61(e)(2) an								
		CHANN	EL LINE-UP	AU				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYS	STEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment			063109	Nume
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasi	G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television standard page (v) of the local servage (v) of the local se	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the attion was carried ute basis station eport origination cording to its own be reported in comparation in a network of the stational of the stationa	(1) stations carried the carriage of certain (e) (2) and (4))]; as a carried by your context of the special Statement of the	s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system	a ram r ify n il rcial	G Primary Transmitters: Television
FCC. For Mexican or 0	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	,	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AV			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	solidated G	overnment		063109	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you heable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even during the system during the solutions in effect on io.6.61(e)(2) and (sis, as explaine stations: With a CC rules, regular here in space only on a substand also in spation and also in spation and also in spation and also in spation associated with a cast of the station's call associated with a cast of the sine ach case we entered the cast), "E" (for not esset terms, see attoin is outside to a primary trans is included in a part-tilition of a distant the entered into of a primary trans simulcasts, also are categories a location of ea	y television standard accounting in June 24, 194, or 76.63 (rd in the next) respect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the local service (v) of the local service (v)	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in comparation in a sassigned to the station is a network ation is a network of the stational, on the stational of the stat	(1) stations carried the carriage of certain (e) (2) and (4))]; as a carried by your context of the special Statement of both on a substitution, see page (v) on a program service the er-the-air designation of the television statisticity of the television statisticity of the television statisticity of the television of the television statisticity of the television statisticity, enter "Yesions located in the mplete column 5, and Indicate by enticity at the television statisticity of the televisions located in the statisticity of the primal channel on any of instructions locate list the community is the statistic through the primal channel on any of instructions locate list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AW		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063109 **Lafayette City Parish Consolidated Government** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2018/1		
LEGAL NAME OF OWNER OF						9	SYSTEM ID#	Name		
Lafayette City Parish (Jonsolida	tea Governr	nent				063109			
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG	i						
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.										
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?										
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is	'Yes," you mu	ust complete	e the progran	ı	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 progran Column 3: Give the call: Column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 given Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the letted to delete under FCC rules a gram was substituted for pr	ce, please a of every not distant stati gulations, o tion. Do no ucy" or "NE n was broad sign of the sadcast static adian static ath and day /e "5/7." es when the Example: a er "R" if the and regulatic ogramming	am on a separa attach additional anetwork televition and that your authorizational truse general of the secondary of the seco	al pages. ision program (substitute pur cable system substitute some categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ged by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instructio "basketball". lo." m. station is licer station is iden program. Use cable system. 15 p.m. to 6:2 mming that ye; enter the letters	during the aramming of one located in List specification in the straight of th	accounting another stat n the paper c program FCC or, in with the mon es accurately hould be was required listed pro	th y			
effect on October 19, 1976.				WHE	EN SUBSTI	TUTE	- DE100H			
S		E PROGRAM			IAGE OCC		7. REASON FOR			
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES — TO	DELETION			
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ACCOUNTING PERIOD: 2018/1 FORM SA3E, PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063109 Lafayette City Parish Consolidated Government PART-TIME CARRIAGE LOG J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

Part-Time Carriage Log

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

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

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

		DATES	AND HOURS (OF PART-TIME CAR	RIAGE			
CALL SIGN	WHEN	CARRIAGE OCCU		CALL SIGN	WHEN CARRIAGE OCCURRED			
	DATE	HOUR FROM	rs TO		DATE	FROM	DURS TO)
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LEGA	AL NAME OF OWNER OF CABLE SYSTEM:	5	SYSTEM ID#	Name					
Laf	ayette City Parish Consolidated Government		063109						
all a (as pag	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts)								
InstruConConIf your feeIf you accommoder	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: hplete block 1, showing your minimum fee. hplete block 2, showing whether your system carried any distant television stations. hur system did not carry any distant television stations, leave block 3 blank. Enter the a from block 1 on line 1 of block 4, and calculate the total royalty fee. hur system did carry any distant television stations, you must complete the applicable p companying this form and attach the schedule to your statement of account.	arts of the DSE Sched	ule	L Copyright Royalty Fee					
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should back 3 below.	e entered on line 1 of							
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be slow.	entered on line 2 in blo	ck						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered on line							
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.	e is 1.064 percent of the	e						
	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.	\$ 1,83	33,235.36						
	This is your minimum fee.	\$ 1	9,505.62						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colui "Yes" in this block. • Did your cable system carry any distant television stations during the accounting per Yes—Complete the DSE schedule. No—Leave block 3 below blank and control of the property of	nn 4, you must check od?	n						
Block	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$							
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00						
	Line 3. Add lines 1 and 2 and enter here	\$	-						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 1	9,505.62	Cable systems					
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.	r	0.00	submitting additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE								
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 2	20,230.62	appropriate form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the							

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
Name	Lafayette City Parish Consolidated Government	063109							
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations.								
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services								
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)								
for Further Information	Name Chad Governale Telephone 337-291-8128								
	Address 700 St John Street, Suite 300 (Number, street, rural route, apartment, or suite number)								
	Lafayette, LA 70501								
	(City, town, state, zip)								
	Email cgovernale@lus.org Fax (optional) 337-210-4558								
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.								
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)								
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or								
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	d							
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	stem							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]								
	X "/s/" Terry Huval								
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility setting								
	Typed or printed name: Terry Huval								
	Title: Director of Utilities (Title of official position held in corporation or partnership)								
	Date: July 24, 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 lav

LEGAL NAME OF OWNER OF CABLE SYSTEM:	YSTEM ID#	Name			
Lafayette City Parish Consolidated Government	063109	Name			
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?					
X NO					
YES. Enter the total here and list the satellite carrier(s) below					
Name Mailing Address Mailing Address Mailing Address					
INTEREST ASSESSMENTS					
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underparted an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	yment.	Q			
Line 1 Enter the amount of late payment or underpayment	-	Interest Assessment			
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days				
Line 3 Multiply line 2 by the number of days late and enter the sum here					
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-				
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance 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 o filing.	riginal				
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:

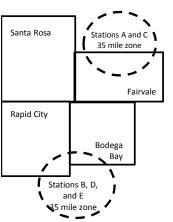
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

¥5,00 1100											
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	SE 11. (CONTINUED)									
4	Legal name of owner of cable system: Lafayette City Parish Consolidated Government 063109									
1										
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station									
	Enter the sum here and in line		0.00							
	Instructions:									
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"	CALL SIGN	DOE	CATEGORY "O" STATION CALL SIGN		CALL SIGN	DOE				
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Add rows as				.						
necessary.										
Remember to copy										
all formula into new										
rows.										
				1						

	LEGAL NAME OF C	WNER OF CABLE SYSTEM:					BOL CONED	SYSTEM ID#				
Name	Lafayette Cit	y Parish Consolidat	ed Government					063109				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 1: Lis Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-v Column 6	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. CATEGORY LAC STATIONS: COMPUTATION OF DSEs										
			ATEGORY LAG	STATIONS:								
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	URS OF HOURS ED BY STATION M ON AIR		4. BASIS OF CARRIAG VALUE	GE VAI	5. TYPE 6. D					
					=	x	<u> </u>					
			÷			x						
			<u>†</u>			х х						
			÷ ÷			x	-					
						x						
						x						
			÷		=	x	=					
	Add the DSEs of	OF CATEGORY LAC S of each station. on here and in line 2 of page		e,		0.	00					
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference broadcast of space I). Column 2: Feat your option. Column 3: Eecolumn 4: I	e the call sign of each state by your system in substitute on October 19, 1976 (and or more live, nonnetwork). For each station give the This figure should correst cater the number of days Divide the figure in column this is the station's DSE	tution for a prograr as shown by the lei ork programs during number of live, not spond with the infor in the calendar ye in 2 by the figure in (For more informati	n that your system ter "P" in column that optional carronetwork programmation in space I ar: 365, except in column 3, and gion on rounding, s	n was permitted to a fine page (as shown by as carried in substance). a leap year. we the result in case page (viii) of the	to delete under FCC rid the word "Yes" in colur stitution for programs to column 4. Round to no the general instruction	ules and regular- nn 2 of hat were deleted less than the third	orm).				
		SUI	BSTITUTE-BAS	SIS STATION		ATION OF DSEs						
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE				
		÷		=			÷	=				
		÷		=			÷	=				
		÷		=			÷	=				
		÷		=								
		÷					÷					
	Add the DSEs of	OF SUBSTITUTE-BASI	S STATIONS:	e,		0.	00					
5		R OF DSEs: Give the am applicable to your system		s in parts 2, 3, and	1 4 of this schedul	e and add them to prov	ride the tota					
Total Number	1. Number of	DSEs from part 2 ●				-	0.00					
of DSEs	2. Number of	DSEs from part 3 ●				<u> </u>	0.00					
	3. Number of	DSEs from part 4 ●				>	0.00					
	TOTAL NUMBE	R OF DSEs					_•	0.00				

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

	OWNER OF CABLE Parish Conso		overnment				S	YSTEM ID# 063109	Name
In block A: • If your answer if schedule.	ck A must be com "Yes," leave the re	emainder of pocks B and C	below.			nd complete pa	art 8, (page 16) of	the	6
			BLOCK A: 1	ELEVISION M	ARKETS				Computation of 3.75 Fee
effect on June 24	List the call signs under FCC rules instructions for the Satellite Television Enter the approp (Note the FCC ru A Stations carring 76.61(b)(c)] B Specialty static C Noncomeric D Grandfatherec instructions for E Carried pursuation of the Station present the station present the station of th	schedule—I C below. BLOC s of distant st and regulation be DSE Sche on Extension riate letter in ules and reguled pursuant on as define- al education. d station (76. d r DSE schec ant to individ viously carrie JHF station v	CK B: CARR ations listed in ons prior to Jun dule. (Note: Ti and Localism dicating the ba llations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag dule) waiver of F ed on a part-tin vithin grade-B	part 2, 3, and 4 one 25, 1981. For fine letter M below rector 2010.) usis on which you delow pertain to the rector action and the rector actions of 2010.) rector 2010.) rector 2010. rector 3010.	MITTED DS f this schedule urther explana refers to an ex- carried a perm use in effect or 76.57, 76.59(b (e)(1), 76.63(a 63(a) referring ubstitution of g	PART 6 AND 7 BES The that your system of permitted the station of permitted station of June 24, 198 (a), 76.61(b)(c), of the permitted the station of June 24, 198 (b), 76.61(d) of the permitted station of the permitted	tem was permitte led stations, see to st stream as set for 31. 76.63(a) referring 6.61(e)(1	d to carry he rth in the	3.73166
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
						<u> </u>			
									
								0.00	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	e total number of						-	-	
Line 2: Enter the	e sum of permitte	ed DSEs fro	m block B ab	ove				<u> </u>	
	line 2 from line 1 leave lines 4–7 b			•		rate.	<u>.</u>	0.00	
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply I	line 4 by 0.0375	and enter s	um here				X 0.00		partially permited/ partially nonpermitted
Line 6: Enter tot	al number of DS	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
Line 7: Multiply	line 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7 <u>)</u>			0.00	

	OF OWNER OF CABLE		overnment					O63109	NI a saa a
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)	T		
1. CALI 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
···			-						
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	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE											
Name	Lafayette City F	Parish Con	solidated Gove	ernment						063109		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fot A—Part-time spi 76.59(B—Late-night price of the column 5: Indicate Column 5: Indicate Column 6: Comparion block	or to June 25, call sign for eat the DSE for the DSE for the accounting the basis of CC rules and ecialty progra (d)(1),76.61(e rogramming: (e)(3)). Carriage under all instructions the station's the the DSE fig. B, column 3 (e) information you	1981, under forme ach distant station nis station for a sin g period and year arriage on which the regulations cited b mming: Carriage, c)(1), or 76.63 (refe Carriage under FC certain FCC rules, in the paper SA3 to SE for the current ures listed in column of part 6 for this state gu give in columns	r FCC rules govidentifed by the gle accounting in which the car he station was of elow pertain to a part-time boring to 76.61(e) C rules, section regulations, or form. a accounting per ins 2 and 5 and attion. 2, 3, and 4 musting the gleen recommendation.	/er let perial ari tho asi asi au io lis	entifed by the letter "F" ning part-time and subter "F" in column 2 of priod, occurring betweer ge and DSE occurred ge and DSE occurred by listing one of the se in effect on June 24 is, of specialty program (a). 10.6.59(d)(3), 76.61(e)(3) thorizations. For further das computed in parts at the smaller of the two see accurate and is subjected.	stitute carri part 6 of the n January 1 (e.g., 1981/ e following 4, 1981. nming unde o, or 76.63 (or explanation 2, 3, and 4 of figures her	age. DSE schedule, 1978 and Jun 1) letters r FCC rules, se referring to on, see page (v of this schedule, This figure	ene 30, 1 ections vi) of the ale should b	981 ne enterei		
		PERMITT	ED DSE FOR STA	TIONS CARRI	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS				
	1. CALL SIGN	2. PRIO	OR 3. AC	COUNTING ERIOD		4. BASIS OF CARRIAGE	5. PF	RESENT DSE	6. P	ERMITTED DSE		
		 							•••••			
										••••••		
7 Computation of the Syndicated	Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. BLOCK A: MAJOR TELEVISION MARKET											
Exclusivity			5200	117111111111111111111111111111111111111								
Surcharge	Is any portion of the of Yes—Complete	-		or television mar	ke	t as defned by section 7 No—Proceed to		rules in effect J	lune 24,	1981?		
	BLOCK B: C	arriage of VHI	-/Grade B Contour	Stations		BI OCK	C: Compu	tation of Exem	nt DSE	3		
	Is any station listed in commercial VHF stati or in part, over the ca	block B of pa ion that places ble system? tation below wi	art 6 the primary sti s a grade B contou th its appropriate per	ream of a r, in whole		Was any station listed nity served by the cab to former FCC rule 76 Yes—List each st.	in block B le system p .159) ation below	of part 7 carrie rior to March 3 with its appropri	ed in any 31, 1972	commu- ? (refe		
	NO—Litter zero a	and proceed to	part o.			X No—Enter zero a	na proceed t	o part o.				
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN .	DSE		
				 								
			TOTAL DOEs	0.00			<u> </u>	TOTAL DS	Ee.	0.00		
			TOTAL DSEs	0.00				TOTAL DS	,∟o	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government	SYSTEM ID# 063109	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,833,235.36	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the 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 fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	OF OTION 4. OF OONE SO TELEVIOLON MARKET		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the 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)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

	LEGAL NAN	ME OF OWNER OF CABLE SYSTEM:	STEM ID#							
Name		Lafayette City Parish Consolidated Government	063109							
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.								
8 Computation of Base Rate Fee	You mu 6 was 6 In blo If you If you blank What if	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers cated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.								
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS								
	• Did y	rour 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									
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). B. Enter 0.00701 of gross receipts (the amount in section 1). C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. D. Multiply line B by line C and enter here. E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	-							
		Base Rate Fee								

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 063109	Mana
Lafayette City Parish Consolidated Government	063109	
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4 A. Enter 0.01064 of gross receipts		8
(the amount in section 1) ▶\$		
B. Enter 0.00701 of gross receipts		Computation
(the amount in section 1) \$		of
C. Multiply line B by 3.000 and enter here >		Base Rate Fee
D. Enter 0.00330 of gross receipts (the amount in section 1) * \$		
E. Subtract 4.000 from total DSEs (the figure in section 3) and enter here		
(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	
Dase Nate 1 ee		
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broads		
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple changes Space G.	nel line-ups in	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate for	ee, to exclude	Computation
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take exclusion, you must:	advantage of this	of
		Base Rate Fee and
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determin		Syndicated
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for	or each group.	Exclusivity Surcharge
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B to the station is not exempt in also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B to the station is not exempt in also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B to the station is not exempt in also compute a Syndicated Exclusivity Surcharge for each subscriber group.		Partially Distant
if your cable system is wholly located outside all major television markets, complete block A only.		Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant st carried to that community.	ation you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were	located	
outside the station's local service area. A subscriber located outside the local service area of a station is distant to that s the same token, the station is distant to the subscriber.)	tation (and, by	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant	t. Each	
subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note to		
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 sy groups.	stem's subscriber	
In each section:		
• Identify the communities/areas represented by each subscriber group.	-11 -5 41	
 Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to a subscribers in the group. 	all of the	
• 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, 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in	block B,	
part 6 of this schedule.	,	
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 in the paper SA3 form. 	instructions	
 Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the 	e preceding	
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (t DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not not actual calculations on the form.	hat is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063109 **Lafayette City Parish Consolidated Government** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government SYSTEM ID# 063109									
Bl		COMPUTATION OF		TE FEES FOR EAC	CH SUBSCR	IBER GROUP			
		SUBSCRIBER GROU	P			SUBSCRIBER GRO	UP	9	
COMMUNITY/ AREA				COMMUNITY/ ARE			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
•••••								and	
						-		Syndicated	
					·····	-		Exclusivity	
					····		<u></u>	Surcharge for	
							····	Partially	
						- 		Distant	
			†					Stations	
						-			
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00		
<u></u>									
Gross Receipts First Gr	roup	\$ 1,833,	,235.36	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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 G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third G	Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fou	rth Group	\$	0.00		
				II.					
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$	0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government 063109									
BL		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC		IBER GROUP 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	
			<u>.</u>		<mark>.</mark>			and Syndicated	
	•		·		••••	-		Exclusivity	
		-						Surcharge	
								for Partially	
			·					Distant	
								Stations	
			<u>.</u>						
	 		<u> </u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	and Group	\$	0.00		
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
SEVENTH SUBSCRIBER GROUP					EIGHTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
	·		-						
		-							
			<u>.</u>		····		<u></u>		
		-							
	·	-	<u>.</u>		····				
	•		<u>-</u>		····	H			
			<u>.</u>						
Total DSEs			0.00	Total DSEs		II	0.00		
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$			

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government O63109										
В	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCE	RIBER GROUP				
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	_		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee		
								and		
		-						Syndicated		
								Exclusivity Surcharge		
			. 		·····			for		
		-			••••			Partially		
								Distant		
								Stations		
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	···		······································			•		1		
								1		
								I		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00			0.00			
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
						L OLIDOODIDED ODOL	•			
COMMUNITY/ AREA	LEVENIA	SUBSCRIBER GRO	<u> 0</u>	COMMUNITY/ AREA		I SUBSCRIBER GRO	0			
COMMONT IT AIREA			<u>v</u> .	COMMONT IT AIRE						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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					<u></u>			1		
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Total DSEs			0.00	Total DSEs			0.00	I		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Third	Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Foun	rth Group	\$	0.00			
Base Rate Fee: Add t Enter here and in bloo			criber group	as shown in the boxe	s above.	\$				

onsolidated Government 0	TEM ID# 063109 Nar
A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
TH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP	0 9
O COMMUNITY/ AREA	O Compu
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE o
	Base Ra
	an
	Syndi Exclu
	Surch
	fo
	Parti
	Dist
	Stati
	0.00
\$ 0.00 Gross Receipts Second Group \$	0.00
\$ 0.00 Base Rate Fee Second Group \$	0.00
TH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP	
O COMMUNITY/ AREA	0
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
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CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN	DSE
CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN O.00 Total DSEs	DSE
	0.00

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government SYSTEM ID# 063109									
				TE FEES FOR EACH					
	ITEENTH	SUBSCRIBER GROU		11	HTEENTH	SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
07.22 0.011	302	07.122 01011		57 LE 575.1	202	07.122.01.01.1	302	Base Rate Fee	
								and	
		-						Syndicated	
								Exclusivity	
		-						Surcharge for	
		-						Partially	
								Distant	
								Stations	
		-							
							<u> </u>		
		-					<u></u>		
							<u></u>		
••••••									
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secor	d Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00		
NIN	ITEENTH	SUBSCRIBER GROU	JP	TV	WENTIETH	SUBSCRIBER GROU	Р		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
			·						
		-					<u> </u>		
		-							
		-					<u> </u>		
		-							
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	Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth Group \$ 0.00			0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$			

onsolidated Government 0	EM ID# 63109 Nam
A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
ST SUBSCRIBER GROUP TWENTY-SECOND SUBSCRIBER GROUP	<u> </u>
0 COMMUNITY/ AREA	0 Comput
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE of
	Base Rat
	and
	Syndica
	Exclusi Surcha
	for
	Partia
	Dista
	Statio
	0.00
\$ 0.00 Gross Receipts Second Group \$	0.00
\$ 0.00 Base Rate Fee Second Group \$	0.00
RD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP	
0 COMMUNITY/ AREA	0
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
···· ··········· ·········· ······	
·····∤-··············	
0.00 Total DSEs	0.00
	0.00

	063109				ment		ER OF CABL	Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	NTY-SIXTH	ii i		SUBSCRIBER GRO	TY-FIFTH	
Comput	0			COMMUNITY/ AREA	0		••••••	COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat								
and							<mark></mark>	
Syndica Exclusi							<mark></mark>	
Surcha								
for				•				
Partia								
Dista								
Statio	<u></u>						<u></u>	
								
		-					<u></u>	•••••
							<mark></mark>	
	0.00			Total DSEs	0.00	_		otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	roup	sase Rate Fee First G
	JP	SUBSCRIBER GROU	Y-EIGHTH	TWEN	UP	SUBSCRIBER GRO	SEVENTH	TWENTY-
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							<u> </u>	
			······································	1			<mark></mark>	
					-			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	n Group	Total DSEs Gross Receipts Fourt	0.00	\$	Group	otal DSEs

Larayette City Parish Cor	BLE SYSTEM: Isolidated Gover	nment			S	YSTEM ID# 063109	Name
			TE FEES FOR EAC				
	SUBSCRIBER GRO				SUBSCRIBER GROU		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
······			·				Exclusi Surcha
		···		····			for
							Partia
							Dista
				·····			Statio
		···	·	·····			
		···		••••			
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
					L	•	
		NIID.	III TUE	TV OF OONE	OLIDOODIDED ODOL	10	
	SUBSCRIBER GRO		İ		SUBSCRIBER GRO		
	SUBSCRIBER GRO	0 0	THIR COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0	
OMMUNITY/ AREA	CALL SIGN		İ		SUBSCRIBER GROU		
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE CALL SIGN DSE		DSE	COMMUNITY/ ARE	DSE		DSE	
COMMUNITY/ AREA	CALL SIGN	0.00	COMMUNITY/ ARE CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	

LEGAL NAME OF OWN Lafayette City Pa			nment			S	YSTEM ID# 063109	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	TY-THIRD	SUBSCRIBER GRO		t e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122 07077	202	07.22 0.0.1	202	07.22 0.011	332	0/122 01011	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
					<u></u>			Surcharge
	····				·····			for Partially
			···		·····			Distant
	···		•••••••••••••••••••••••••••••••••••••••		••••	<u> </u>		Stations
						<u> </u>		
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIF	RTY-FIFTH	SUBSCRIBER GRO	UP	TH	HIRTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
	···		····		·····	-		
	···					<u> </u>		
		-				<u> </u>		
			<u></u>			<u> </u>		
			<u></u>					
								
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	<u></u>				·····			
••••••					·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			ment			S	O63109	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O'TEE O'O'T	DOL	OALL GIGIT	DOL	OTTEL OTOTA	BOL	O/ALL OIGH	DOL	Base Rate Fee
								and
								Syndicated
		-						Exclusivity
								Surcharge
		-			···		<u></u>	for Partially
								Distant
••••••								Stations
		-						
								
							····	
T	<u> </u>		0.00	T		Ц	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	Y-NINTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
••••••					···		<u> </u>	
••••••		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			ment			Sì	O63109	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU		Ti .	/-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA	•••••		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0.122.0101		0.122						Base Rate Fee
								and
•••••		-						Syndicated
		-						Exclusivity
								Surcharge for
••••••		-			·		<u> </u>	Partially
								Distant
		-				_		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	Y-THIRD	SUBSCRIBER GROU		11	Y-FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					-		<u> </u>	
••••••		-			·		<u> </u>	
		-						
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					<u> </u>	H	<u> </u>	
		-			·		<u></u>	
					<u>.</u>			
								
Total DSEs	<u> </u>		0.00	Total DSEs	-		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

rish Consolidated Government	O63109	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP		
RTY-FIFTH SUBSCRIBER GROUP FORTY-SIXTH SUBSCRIBER GROU		9
0 COMMUNITY/ AREA	0	Comput
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE	of
		Base Rat
<u> </u>		and
······································	<u> </u>	Syndica Exclusi
		Surcha
		for
		Partial
		Distar
······································		Statio
	<u></u>	
	0.00	
Group \$ 0.00 Gross Receipts Second Group \$	0.00	
Group \$ 0.00 Base Rate Fee Second Group \$	0.00	
-SEVENTH SUBSCRIBER GROUP FORTY-EIGHTH SUBSCRIBER GROU	Р	
O COMMUNITY/ AREA	0	
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE	
<u> </u>		
		
0.00 Total DSEs	0.00	
	0.00	
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Nam	063109						ish Cons	
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	FIFTIETH			SUBSCRIBER GROU	TY-NINTH	
Comput				COMMUNITY/ AREA	0		•••••	COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Ra								
and						-		
Syndic Exclus	<u></u>					-		
Surcha								
for								
Partia Dista				•				
Statio	<u></u>						-	
						-		
						-	<u>-</u>	
-	<u></u>						-	
1	<u></u>			•			<u>-</u>	
	0.00		•	Total DSEs	0.00	-		otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	iroup	Gross Receipts First G
		· *				· *		
	1							
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
=	JP '	\$ SUBSCRIBER GROU		FIFT	JP	\$ SUBSCRIBER GROU		FIF
								FIF
	JP '			FIFT	JP			FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIF
	JP 0	SUBSCRIBER GROU	Y-SECOND	FIFT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FIE COMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROU	/-SECOND	CALL SIGN	JP 0	SUBSCRIBER GROU	TY-FIRST DSE	CALL SIGN CALL SIGN Fotal DSEs
	DSE O.00	SUBSCRIBER GROU	/-SECOND	CALL SIGN CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	SUBSCRIBER GROU	TY-FIRST DSE	COMMUNITY/ AREA

LEGAL NAME OF OW Lafayette City Pa			nment			S	YSTEM ID# 063109	Name
				TE FEES FOR EA				
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	:A		0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
			<mark>.</mark>					and
	·····		<mark>.</mark>					Syndicat Exclusiv
				1				Surchar
								for
								Partiall
		-						Distan
	····							Station
	·····		····	·	·····			
	•••••							
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
F	IFTY-FIFTH	SUBSCRIBER GRO	OUP		FIFTY-SIXTH	H SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark>.</mark>							
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add	the base ra	te fees for each sub	scriber group	as shown in the boxe	es above.			

LEGAL NAME OF OWNER Lafayette City Pari			ment			S	O63109	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU		11	TY-EIGHTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-					<u></u>	Syndicated
								Exclusivity Surcharge
		-			<u> </u>			for
		-						Partially
					<u></u>			Distant
					<u> </u>			Stations
••••••		-			<u>-</u>			
••••••								
T + 1 DOF			0.00	T / 1 DOE		Ц	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	Y-NINTH	SUBSCRIBER GROU			SIXTIETH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
					<u>-</u>			
		-			<u></u>			
					<u>-</u>	H	<u></u>	
		-						
								
					<u>-</u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			ment			Sì	O63109	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU		11	Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u>.</u>			Syndicated
							<u></u>	Exclusivity Surcharge
					<u> </u>			for
								Partially
		-						Distant
		-						Stations
					·			
					<u>.</u>			
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	Y-THIRD	SUBSCRIBER GROU		Ti .	Y-FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u>.</u>		<u></u>	
		-			<u>.</u>		<u> </u>	
								
		-						
					<u>.</u>		<u> </u>	
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

Lafayette City Parish Con	BLE SYSTEM: solidated Goveri	nment			S	YSTEM ID# 063109
			TE FEES FOR EAC			
	I SUBSCRIBER GRO		ii e		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				<u></u>		
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		<u></u>		<u></u>		
	<u> </u>					
Total DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
Base Rate Fee First Group	e	0.00				
Sase Nate i ee i list Gloup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SIXTY-SEVENTH	I SUBSCRIBER GRO	DUP			SUBSCRIBER GROU	
SIXTY-SEVENTH	<u> </u>			XTY-EIGHTH		
SIXTY-SEVENTH	<u> </u>	DUP	SI	XTY-EIGHTH		UP
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE	I SUBSCRIBER GRO	OUP 0	SI.	XTY-EIGHTH A	I SUBSCRIBER GROI	UP 0
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE	I SUBSCRIBER GRO	DUP DSE DSE 0.00	COMMUNITY/ ARE.	XTY-EIGHTH A DSE	I SUBSCRIBER GROI	DSE O.000
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE	CALL SIGN	DUP	CALL SIGN	XTY-EIGHTH A DSE	CALL SIGN	DSE
SIXTY-SEVENTH	CALL SIGN	DUP DSE DSE 0.00	COMMUNITY/ ARE.	TTY-EIGHTHA DSE	CALL SIGN	DSE O.000

LEGAL NAME OF OWNER Lafayette City Pari			ment			Sì	O63109	Name
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GROU		11	VENTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.22 0.0.1	302	07.122 01011		Grill Grott	202	07.22 0.0.1	302	Base Rate Fee
								and
		-						Syndicated
								Exclusivity
		-			<u> </u>			Surcharge for
		-			<u>.</u>			Partially
								Distant
								Stations
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					<u>.</u>		<u> </u>	
		-			<u>.</u>		<u></u>	
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Total DSEs	-		0.00	Total DSEs	-		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SEVENT	TY-FIRST	SUBSCRIBER GROU	JP	SEVENT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA	••••••		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-			<u>-</u>		<u></u>	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN			ment			S	YSTEM ID# 063109	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	TY-THIRD	SUBSCRIBER GROU		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA	•		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.010.1	202	0,122 0.011	202	07.22 0.011	202	07.22 0.0.1	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
	···				····			Surcharge for
••••••	···				····			Partially
								Distant
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Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
								l
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	1
	NIY-FIFIH	SUBSCRIBER GROU		ii e		I SUBSCRIBER GROU		l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
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Total DSEs			0.00	Total DSEs		П	0.00	1
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
- See Heropto Hillar	P				~ p	·		1
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	1
Base Rate Fee: Add to			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	EVENTH	SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA	••••••		0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
			<u> </u>		·····			for Partially
					·····			Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVENT	Y-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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 G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			ment			Sì	O63109	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU		11	Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
							. 	Exclusivity
								Surcharge for
							<u></u>	Partially
								Distant
		-				_		Stations
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		-			<u>-</u>			
					<u>-</u>			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GROU	JP	EIGHT	Y-FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-			<u>.</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	ΓY-FIFTH	SUBSCRIBER GRO		H		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
Of IEE OF OTT	DOL	CALL GIGIT	BOL	O/ IEE O'O'I	502	OF ILLE STORY	562	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
		-						Partially
		-						Distant
								Stations
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Total DSEs	ļ <u> </u>		0.00	Total DSEs		!!	0.00	
							-	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
EIGHTY-S	EVENTH	SUBSCRIBER GRO	UP	EIGH	HTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-				-	<u></u>	
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							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN Lafayette City Pa			ment			S	YSTEM ID# 063109	Name
				ATE FEES FOR EAC				
	HTY-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA	•		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
				.				Syndicated Exclusivity
				-		+		Surcharge
								for
								Partially
					<u></u>			Distant Stations
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	ı
						·		ı
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	1
	ETY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU		ı
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	ı
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
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				-				1
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Total DSEs		_	0.00	Total DSEs			0.00	ı
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	1
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	ı
Base Rate Fee: Add the Enter here and in blood			criber group	as shown in the boxes	above.	\$		l

City Parish Consolidated Government	SYSTEM ID# 063109 Na
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROU	
NINETY-THIRD SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBE	
7/ AREAO COMMUNITY/ AREA	O Compt
DSE CALL SIGN DSE CALL SIGN DSE CALL SIG	
	Base R
	ar
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	0.00
ts First Group \$ 0.00 Gross Receipts Second Group \$	0.00
se First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
NINETY-FIFTH SUBSCRIBER GROUP NINETY-SIXTH SUBSCRIBE	R GROUP
7/ AREAO COMMUNITY/ AREA	0
DSE CALL SIGN DSE CALL SIGN DSE CALL SIG	N DSE
0.00 Total DSEs	0.00
	0.00

LEGAL NAME OF OWN Lafayette City Pa			nment			S	YSTEM ID# 063109	Name
[BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		 		SUBSCRIBER GRO		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
	<u></u>							and
		_						Syndicated
				-				Exclusivity Surcharge
	····	-	···				····	for
		_						Partially
								Distant
	<u></u>	_	<u></u>					Stations
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	•••••	=	···					
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINI	ETY-NINTH	SUBSCRIBER GRO	UP	ONE I	HUNDREDTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	<u></u>							
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
C. 000 Receipts Tillu	Jioup		0.00	Total Receipts 1'00	Group	*	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE Lafayette City Par			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EACH				
	ED FIRST	SUBSCRIBER GROU		ii .		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	····				<u></u>			Syndicated Exclusivity
	•							Surcharge
								for
						<u> </u>		Partially
								Distant Stations
								Stations
					<u>.</u>			
	<u> </u>							
Total DSEs		!	0.00	Total DSEs		<u>!!</u>	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Gross Receipts First G	Toup	4	0.00	Gloss Receipts Secon	na Group	<u>\$</u>	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRE	ED THIRD	SUBSCRIBER GROU	IP	ONE HUNDRE	D FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Paris			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EAC				
	D FIFTH	SUBSCRIBER GRO		t i		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fee
					<u></u>			and
					<mark>.</mark>			Syndicated Exclusivity
								Surcharge
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								Partially
					<u>.</u>			Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	EVENTH	SUBSCRIBER GRO	JP	ONE HUNDR	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							 	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

Name	YSTEM ID# 063109	S			ment			LEGAL NAME OF OWNE Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ED TENTH			SUBSCRIBER GRO	ED NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F					<u> </u>			
and Syndicated		_			<u> </u>			
Exclusivity	<u></u>				<u>-</u>		····	
Surcharge					-		·	
for								
Partially				•••••				
Distant		_			<u>.</u>			
Stations					<u>-</u>			
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Bross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gi
	JP	SUBSCRIBER GROU	TWELVTH		JP	SUBSCRIBER GRO	LEVENTH	ONE HUNDRED EL
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs Gross Receipts Third G

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government O63109								Name
Bl	_OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED THIS	RTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED FO	URTEENTH	I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA	•••••		0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSL	CALL SIGN	DSL	CALL SIGN	DSL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
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	······							Partially Distant
	·							Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FII	FTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED S	SIXTEENTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	. <mark>.</mark>			-				
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

Legal Name OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government O63109								
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		_			<u></u>			and
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	ı
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	1
ONE HUNDRED NI	NTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GRO	UP	ı
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
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Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	ı
	r				· r			ı
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	l
Base Rate Fee: Add to Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		l

LEGAL NAME OF OWNE Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EACH	H SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROU		Ħ		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			 		<u></u>			Syndicated
							<u></u>	Exclusivity Surcharge
								for
								Partially
		-						Distant
		-						Stations
								
		-						
			 		<u></u>			
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		
COMMUNITY/ AREA			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 G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government O63109								Name
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED TW	ENTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TW	ENTY-SIXTH	SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA	٠		0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
					···			Partially Distant
					···			Stations
			ļ		<u></u>			
							0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
NE HUNDRED TWENT	ΓY-SEVENTH	SUBSCRIBER GROUP	1	ONE HUNDRED TWE	NTY-EIGHTH	SUBSCRIBER GROUP)	
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	d Group	\$	0.00	Gross Receipts Four	th 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 OWNER Lafayette City Pari			ment			SY	O63109	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-NINTH	SUBSCRIBER GROUP		11	THIRTIETH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity
								Surcharge for
		-			·			Partially
								Distant
		-				_		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Secon	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	TY-FIRST	SUBSCRIBER GROUP		ii	TY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	1		0.00	
		•			0			
Gross Receipts Third G	ιουρ	<u>\$</u>	0.00	Gross Receipts Fourth	і Стоир	>	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government O63109								
				TE FEES FOR EACH				
	TY-THIRD	SUBSCRIBER GROUP		11	TY-FOURTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
••••••		-						Syndicated
					<u></u>			Exclusivity
					······································			Surcharge for
••••••		-			<u></u>		<u></u>	Partially
								Distant
		-						Stations
					<u></u>			
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					<u></u>			
					-			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	RTY-FIFTH	SUBSCRIBER GROUP		11	HIRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			
								
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					<u></u>			
					<u> </u>		<u></u>	
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government O63109								Name
[BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED THIRT		SUBSCRIBER GROU		H		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
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	••••		···					Distant
								Stations
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			0.00				0.00	
Total DSEs		-	0.00	Total DSEs		-	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRE	D FORTIETH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u></u>					
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
		_						
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

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			ATE FEES FOR EAC			
ONE HUNDRED FORTY-FIRST	SUBSCRIBER GROU		 		SUBSCRIBER GROUF	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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Total DSEs		0.00	Total DSEs			0.00
Gross Receipts 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 FORTY-THIRD	SUBSCRIBER GROU	P	ONE HUNDRED FO	NDTV FOUDTI	L CLIDCODIDED ODOLIE	
	000001110011101100	·	0.12.10.13.123.13	KIT-FOURIF	1 SUBSCRIBER GROUP	
		0	COMMUNITY/ ARE		1 SUBSCRIBER GROUP	0
	CALL SIGN		ii e		CALL SIGN	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE		0	COMMUNITY/ ARE	Α		0
COMMUNITY/ AREA		DSE	CALL SIGN	DSE		DSE
CALL SIGN DSE CALL SIGN DSE Total DSEs	CALL SIGN	0.00	COMMUNITY/ ARE CALL SIGN Total DSEs	DSE	CALL SIGN	DSE

LEGAL NAME OF OWNER Lafayette City Pari			ment			SI	O63109	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
	RTY-FIFTH	SUBSCRIBER GROUP		TI .	ORTY-SIXTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-			<u></u>			and
					<u></u>			Syndicated
					<u> </u>		. 	Exclusivity Surcharge
								for
								Partially
		-						Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTH	SUBSCRIBER GROUP		
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 G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU		tt -		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٠		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL CICIT	DOL	CALL SIGH	502	O/ALL SIGIY	502	O/ LEE OF OTT	BOL	Base Rate Fee
								and
		_						Syndicated
								Exclusivity
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								for
								Partially Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco				
							1	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	IP	
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 G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
C. COC P. COCIPIO TIMO G	. Jup		<u> </u>	S. Coo i (Coolpto i Oui	C.Oup	*	<u> </u>	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government O63109								Name
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	-I SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		İ		SUBSCRIBER GRO		9
COMMUNITY/ AREA	······		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u></u>			Syndicated
								Exclusivity Surcharge
					<u></u>			for
								Partially
					<u></u>			Distant
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Total DSEs		_	0.00	Total DSEs			0.00	İ
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	1
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED F	IFTY-SIXTH	SUBSCRIBER GRO	UP	İ
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
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Total DSEs		_	0.00	Total DSEs			0.00	1
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	İ
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	1
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			ment			Sì	O63109	Name
				TE FEES FOR EACH	I SUBSCR	IBER GROUP		
ONE HUNDRED FIFTY-	SEVENTH	SUBSCRIBER GROUP		TI .	FTY-EIGHTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA	••••••		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
					<u></u>		. 	Exclusivity
								Surcharge for
		-			<u></u>			Partially
								Distant
		-						Stations
					<u></u>			
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					<u></u>			
					-			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROUP		Ħ	ED SIXTIETH	SUBSCRIBER GROUP	_	
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	
	roup	¢	0.00		h Group	¢	0.00	
Gross Receipts Third G	ιουμ	4	0.00	Gross Receipts Fourth	i Group	<u>Ψ</u>	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government SYSTEM ID# 063109								
В				TE FEES FOR EAC				
		SUBSCRIBER GRO	DUP			SUBSCRIBER GRO		9
COMMUNITY/ AREA				COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
	<mark></mark>	-	<u></u>					Surcharge
	-					+		for Partially
					·····	<u> </u>		Distant
	<u>-</u>		<u></u>			<u> </u>	<u> </u>	Stations
	<mark></mark>							
	<mark></mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 1,833	3,235.36	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO)UP		FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DOFa			0.00	Total DCC-			0.00	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Raca Rata Eng. Add #	ne haee ret	a foos for each subs	ecriber group	as shown in the heye	as ahove			
Base Rate Fee: Add th Enter here and in block			ocinei group	as shown in the boxe	anuve.	\$	0.00	

Name	YSTEM ID# 063109	S			ment			LEGAL NAME OF OWNE Lafayette City Par
				TE FEES FOR EACH				В
9		SUBSCRIBER GROU	SIXTH	00144		SUBSCRIBER GROU	FIFTH	001111111111111111111111111111111111111
Computation	0			COMMUNITY/ AREA	0		•••••	COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated Exclusivity							<u></u>	
Surcharge		-						
for						_		
Partially								
Distant								
Stations								
		-					<u></u>	
		-			<u>-</u>		<u></u>	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	iroun	Base Rate Fee First G
	0.00	LY.	и Огоир			·	Тоир	
	.	SUBSCRIBER GROU				SUBSCRIBER GROU		
	.			COMMUNITY/ AREA				
	JP				JP			
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	CALL SIGN
	JP 0 DSE	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNE Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
BL				TE FEES FOR EACH				
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u> </u>			<u> </u>		Base Rate Fee
		-	<u> </u>					and
		-	<u>.</u>		<u></u>			Syndicated Exclusivity
								Surcharge
••••••		-		•				for
								Partially
								Distant
		-	<mark>.</mark>		<mark></mark>			Stations
			<u>-</u>			+		
						+		
	h		<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
EL	EVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	••••••		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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T-+-1 DOE-			0.00	T-4-1 DOE			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government 063109								
				TE FEES FOR EACH				
	TEENTH	SUBSCRIBER GROU			IRTEENTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL OION	DOL	CALL GIGIN	DOL	OALE GIGIT	DOL	OALL SIGIV	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
		-					<u></u>	Distant Stations
							<u></u>	Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FIF	TEENTH	SUBSCRIBER GROU	JP	S	IXTEENTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Tatal DOF-			0.00	Tatal DOS-			0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
					_			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

LEGAL NAME OF OWNER Lafayette City Pari			ıment			S	YSTEM ID# 063109	Name
				TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
SEVEN	TEENTH	SUBSCRIBER GRO	UP	EIC	GHTEENTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA		•••••	0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
							and	
		-						Syndicated
						+		Exclusivity
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		-	······································			<u> </u>		Partially
			······································	•				Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NIN	TEENTH	SUBSCRIBER GRO	UP	T	WENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-			<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
Cross Necelpis IIIII G	ισαρ		3.00	Oross Necelbis Fourti	ii Gioup	Ψ	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

Name	Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government 063109								
				TE FEES FOR EACH					
9	JP	SUBSCRIBER GROU	-SECOND	TWENT		SUBSCRIBER GROU	ITY-FIRST	TWEN	
Computatio	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and				••••••					
Syndicated									
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Distant			1						
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1	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Total DSEs Gross Receipts Secon	0.00	\$	Froun	Total DSEs Gross Receipts First G	
		Ψ		Oross receipts occor	0.00	<u>Ψ</u>	Jioup	Oloss Receipts Filst O	
	0.00				1				
	0.00	\$		Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G	
	0.00	\$ SUBSCRIBER GROU	d Group			\$ SUBSCRIBER GROU			
	0.00		d Group					TWEN	
	0.00		d Group	TWENT	JP			TWEN	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	0.00 JP 0	SUBSCRIBER GROU	d Group ⁄-FOURTH	TWENT	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN'	
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	0.00 JP O DSE	SUBSCRIBER GROU	d Group	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	SUBSCRIBER GROU	DSE DSE	TWEN' COMMUNITY/ AREA CALL SIGN Total DSEs	
	0.00 JP	SUBSCRIBER GROU	d Group	TWENT COMMUNITY/ AREA CALL SIGN	JP 0	CALL SIGN	DSE DSE	TWEN' COMMUNITY/ AREA CALL SIGN	

Name	Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government 063109								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GROU	NTY-FIFTH		
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F						-			
and						-			
Syndicated						-			
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for	••••	H							
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	0.00		<u> </u>	Total DSEs	0.00			Γotal DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G	
	*	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU			
	*							TWENTY-	
	JP			TWEN	JP			TWENTY-	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA	
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY- COMMUNITY/ AREA CALL SIGN	
	DSE O.00	SUBSCRIBER GROU	Y-EIGHTH DSE	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	SUBSCRIBER GROU	DSE	TWENTY- COMMUNITY/ AREA CALL SIGN Total DSEs	
	JP 0 DSE	SUBSCRIBER GROU	Y-EIGHTH DSE	TWENT COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	TWENTY- COMMUNITY/ AREA	

LEGAL NAME OF OWN Lafayette City Pa			nment			S	YSTEM ID# 063109	Name
				TE FEES FOR EAC				
TWEN COMMUNITY/ AREA	ITY-NINTH	SUBSCRIBER GRO)UP 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA		••••••		COMMUNITY AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	····				····		<u> </u>	and Syndicated
	···		···		····	<u> </u>	<u> </u>	Exclusivity
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		-						for
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Seco		\$	0.00	
THIF COMMUNITY/ AREA	RTY-FIRST	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxes	s above.	\$		

Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government SYSTEM ID# 063109								
				TE FEES FOR EACH				
	ry-third	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
THIR	TY-FIFTH	SUBSCRIBER GRO	UP	THII	RTY-SIXTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
ase Rate Fee: Add thater here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNEI Lafayette City Pari			•			S	YSTEM ID# 063109	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU			Y-EIGHTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA	•••••		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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								and
								Syndicated
								Exclusivity
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		-						Distant
						H		Stations
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Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIRT	Y-NINTH	SUBSCRIBER GROU	JP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subsc						

	Legal Name of Owner of Cable System: Lafayette City Parish Consolidated Government O63109								
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GROU	TY-FIRST		
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			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	0.00								
		SUBSCRIBER GROU		FORT	UP	SUBSCRIBER GROU		FOR	
		SUBSCRIBER GROU		FORT COMMUNITY/ AREA	UP 0				
	UP	SUBSCRIBER GROU							
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	UP 0		′-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA	
	DSE		′-FOURTH	COMMUNITY/ AREA	DSE	SUBSCRIBER GROU	TY-THIRD	CALL SIGN	
	UP 0		DSE	CALL SIGN	0	SUBSCRIBER GROU	TY-THIRD DSE	COMMUNITY/ AREA	

LEGAL NAME OF OWNER Lafayette City Paris			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EACH				
	Y-FIFTH	SUBSCRIBER GROU			RTY-SIXT	I SUBSCRIBER GROU		9
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GROU	JP	FORT	Y-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
d the	base rat			Base Rate Fee Fourth		\$	0.00	

Name	YSTEM ID# 063109	S			ment	LE SYSTEM: solidated Govern		Lafayette City Par
				TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	FIFTIETH	COMMUNITY/ AREA	UP 0	SUBSCRIBER GRO	TY-NINTH	FOR COMMUNITY/ AREA
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	'-SECOND		UP	SUBSCRIBER GRO	TY-FIRST	FIF
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				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	TY-THIRD	
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	YSTEM ID# 063109	S			ment		R OF CABL	Lafayette City Par
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9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 063109				ment	olidated Governi		LEGAL NAME OF OWNE Lafayette City Par
				TE FEES FOR EACH				
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Name	YSTEM ID# 063109				ment	olidated Governi		LEGAL NAME OF OWNE Lafayette City Par
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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	
SEVENTY-FIRS	ST SUBSCRIBER GR	OUP	SEVEN	TY-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
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Total DSEs		0.00	Total DSEs			0.00	
				th Group		-	
Total DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	

	063109	S			ment			LEGAL NAME OF OWNE Lafayette City Par
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9	UP	SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	UP 0		ITY-SIXTH	SEVEI COMMUNITY/ AREA	0	SUBSCRIBER GROU	ITY-FIFTH	COMMUNITY/ AREA
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	UP 0		ITY-SIXTH	SEVEI COMMUNITY/ AREA	0	SUBSCRIBER GROU	ITY-FIFTH	COMMUNITY/ AREA
	UP 0		ITY-SIXTH	SEVEI COMMUNITY/ AREA	0	SUBSCRIBER GROU	ITY-FIFTH	COMMUNITY/ AREA
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	YSTEM ID# 063109				ment			LEGAL NAME OF OWNE Lafayette City Par
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9	JP	SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
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LEGAL NAME OF OWN Lafayette City Pa			nment			S	063109	Name
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9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD	
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LEGAL NAME OF OWNER Lafayette City Pari			nent			S	YSTEM ID# 063109	Name
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	YSTEM ID# 063109				ment			Legal NAME OF OWNE Lafayette City Par
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LEGAL NAME OF OWNE Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
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	JP 0	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROL	TY-NINTH	ONE HUNDRED THIR'
	DSE	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROL	TY-NINTH	CALL SIGN
	DSE DSE O.00	SUBSCRIBER GROU	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	SUBSCRIBER GROL	DSE	CALL SIGN CALL SIGN Total DSEs
	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROL	DSE	ONE HUNDRED THIR'

LEGAL NAME OF OWNER Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-SECONE	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
••••••								and
								Syndicated
								Exclusivity
						+		Surcharge for
						+		Partially
								Distant
								Stations
		-						
	 							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	I SUBSCRIBER GROUF)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
		-			···			
		-				+		
		-						
Total DSEs			0.00	Total DSCs			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourtl	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			ment			S	YSTEM ID# 063109	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP)	ONE HUNDRED FO	ORTY-SIXTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
				•				Syndicated
								Exclusivity
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					<mark></mark>			
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Total DSEs Gross Receipts First Gr	oup.	•	0.00	Gross Receipts Secon	nd Group	•	0.00	
Gioss Neceipis i list Gi	oup	\$	0.00	Gross Receipts Secon	ia Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED FOR	RTY-EIGHTH	SUBSCRIBER GROUP		
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 G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
rd G	roup e base rat	\$	0.00		n Group	\$		

Name	YSTEM ID# 063109	S			ment		R OF CABL	Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	FIFTIETH		UP 0	SUBSCRIBER GROU	ΓΥ-NINTH	ONE HUNDRED FOR
Computation	COMMUNITY/ AREA 0							COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity		 						
Surcharge								
for							·	
Partially							•	
Distant Stations		+						
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	0.00		ļ	Total DSEs	0.00		 	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	'-SECOND	ONE HUNDRED FIFT	UP	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN Total DSEs
	0.00	CALL SIGN		Total DSEs	0.00			Total DSEs
		CALL SIGN				CALL SIGN		

Name	YSTEM ID# 063109				ment			LEGAL NAME OF OWNE Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH	ONE HUNDRED FIFT	UP 0	SUBSCRIBER GROU	ry-third	ONE HUNDRED FIF
Computation	COMMUNITY/ AREA 0							COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe					<u> </u>		-	
and Syndicated					<u> </u>		-	
Exclusivity					<u>-</u>		-	
Surcharge								
for								
Partially								
Distant					<u> </u>			
Stations								
					 		 	
					 		 	
				•				
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROU	TV CIVTU	ONE LUNDOED EL	UP	SUBSCRIBER GROU	TV CICTLI	ONE HUNDBED EIE
	JP	COBCONIBEN CINCO	-11-91/11	ONE HUNDRED FI		COBCONIBEN CINCO	IY-FIFIH	ONE HONDINED I II
	JP 0		-11-51/11	COMMUNITY/ AREA	0		I Y-FIF I H	
	_	CALL SIGN	DSE			CALL SIGN	DSE DSE	
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	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0			COMMUNITY/ AREA	0			CALL SIGN
	DSE		DSE	CALL SIGN	DSE		DSE	COMMUNITY/ AREA

	YSTEM ID# 063109				ment	solidated Governi		Legal NAME OF OWNE Lafayette City Par
				TE FEES FOR EACH				
9	1	SUBSCRIBER GROUP	TY-EIGHTH		1	SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FIFTY
Computation	COMMUNITY/ AREA 0							COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated						-		
Exclusivity							·	
Surcharge							·	
for						-	·	
Partially Distant							····	
Stations			.				 	
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	0.00		<u> </u>	Total DSEs	0.00		<u> </u>	Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
	_				1			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	•	\$ SUBSCRIBER GROU						Base Rate Fee First G
=	•							ONE HUNDRED FIF
-	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
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=	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
-	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
-	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	JP 0	SUBSCRIBER GROU	SIXTIETH	ONE HUNDRED	JP 0	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FIF
	DSE DSE 0.00	SUBSCRIBER GROU	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	CALL SIGN	DSE	ONE HUNDRED FIFTCOMMUNITY/ AREA CALL SIGN Total DSEs
	JP 0 DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063109 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063109 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063109 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063109 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063109 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. EIGHTEENTH SUBSCRIBER GROUP SEVENTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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Name	Lafayette City Parish Consolidated Government	STEM ID# 063109	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
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