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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
02/28/2019	\$ 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	2018/2								
Bowner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 1023026 CABLE ONE, INC.								
				02302620182					
				023026 2018/2					
	210 E. EARLL DRIVE PHOENIX, AZ 85012-2626								
С	INSTRUCTIONS: In line 1, give any business or trade names u names already appear in space B. In line 2, give the mailing ad								
System	1 IDENTIFICATION OF CABLE SYSTEM:		<u> </u>	<u> </u>					
	MAILING ADDRESS OF CABLE SYSTEM: 4701 52ND STREET 2 (Number, street, rural route, apartment, or suite number) ODESSA, TX 79762 (City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b.	Identify only the frst comm	nunity served below and rel	ist on page 1b					
Area Served	with all communities. CITY OR TOWN	STATE							
First	ODESSA	TX							
Community	Below is a sample for reporting communities if you report mul	tiple channel line-ups in S	pace G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda	MD	Α	1					
•	Alliance	MD	В	2					
	Gering	MD	В	3					

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office 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 Office'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.

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#								
CABLE ONE, INC.			023026								
OADLE ONL, INC.			023020								
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 fillings.											
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-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.											
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#								
ODESSA	TX			First							
ECTOR	TX			Community							
MIDLAND	TX										
	· · · · · · · · · · · · · · · · · · ·			See instructions for							
				additional information							
				on alphabetization.							
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				Add rows as necessary.							
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Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

023026

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.

RATE

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 1							BLOCK 2		
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE		CATEGORY OF SERVICE	R	ATE		
Continuing Services:			Installation: Non-residential						
Pay cable	\$	15.00	Motel, hotel	\$	200.00		TIER STANDARD	\$	40.00
 Pay cable—add'l channel 	\$	11.00	Commercial	\$	200.00				
Fire protection			Pay cable						
Burglar protection			Pay cable-add'l channel						
Installation: Residential			Fire protection						
First set	\$	90.00	Burglar protection						
 Additional set(s) 	\$	60.00	Other services:						
FM radio (if separate rate)			Reconnect	\$	60.00				
Converter			Disconnect						
			Outlet relocation	\$	60.00				
			Move to new address	\$	30.00			••••••	
								••••••	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 023026 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CARRIAGE SIGN (Yes or No) NUMBER STATION (If Distant) **KMDF-LF** 22 No MIDLAND, TX ı **KMID** 26 Ν No MIDLAND, TX See instructions for additional information **KMLM** 15 ı No ODESSA, TX on alphabetization. KOSA-1 7 No Ν ODESSA, TX KOSA-2 7 I-M No ODESSA, TX KPEJ-2 23 ı No ODESSA, TX **KPBT** 38 Ε No ODESSA, TX KPEJ-1 23 ı No ODESSA, TX **KUPB** 18 No MIDLAND, TX ı KWES-1 9 Ν No ODESSA, TX ODESSA, TX KTLE-1 20 I-M No KTLE-2 20 I-M No ODESSA, TX KWWT-1 30 I-M No ODESSA, TX KWWT-2 30 I-M No ODESSA, TX

FORM SA3E. PAGE 3.						1		
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Namo		
CABLE ONE, IN	IC.				023026			
PRIMARY TRANSMITTE	RS: TELEVISIO	ON						
Remark Transmitters: Television In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
Note: If you are utilizing	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	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		STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	NC.				023026	- Tumo		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
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		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		STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	IC.				023026			
PRIMARY TRANSMITTERS: TELEVISION								
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		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		STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	NC.				023026			
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

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LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	NC.				023026			
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
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-		CHANN	EL LINE-UP	AF				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name		
CABLE ONE, II	NC.				023026			
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON						
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast)								
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the			
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.			
		CHANN	EL LINE-UP	AG				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		'STEM:			SYSTEM ID#	Name	
CABLE ONE, II	NC.				023026		
PRIMARY TRANSMITT	ERS: TELEVISIO	N					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens	system during the tions in effect or 6.61(e)(2) and (sis, as explaine Stations: With Incomment of the tions o	he accounting In June 24, 1984 4), or 76.63 (red in the next prespect to any attons, or auth G—but do list titute basis. In the state of the state o	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the tition was carried ute basis station eport origination coording to its ov- be reported in our	(1) stations carried the carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services the calculumn 1 (list each the television statistical extension of the carried to the television statistical extension of the carried extension of	and low power television stations) Id only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television	
on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identifed.							
		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		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Namo	
CABLE ONE, II	NC.				023026		
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), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicas							
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	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		STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				023026		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consine effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in spation concorm. The station's call associated with c-2". Simulcast see channel number 6.61(e) and so in spation concorm.	ne accounting In June 24, 198 4), or 76.63 (r d in the next pespect to any titions, or auth G—but do list titute basis. ce I, if the sta erning substit sign. Do not r in a station acc streams must ber the FCC h	period, except 81, permitting the eferring to 76.6 paragraph. distant stations orizations: it in space I (the tition was carried ute basis station eport origination coording to its own be reported in of as assigned to the	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the Special Statement of both on a substitution, see page (v) on program service er-the-air designation of the television statistical statement of the second program service the television statistical statement of the second program service the television statistical statement of the second program service the television statistical statement of the second program service the second program service that the second	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the tute 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 son for broadcasting over-the-air in	Primary Transmitters: Television	
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, gi							
		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		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023026	
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 Basis Substitute Pasis Pasis Substitute Pasis Pasi	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 into ch station's call associated with a-2". Simulcast e channel numb ise. For example system carried the in each case we rentering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y in edistant static ision of a distant the entered into o a primary trans simulcasts, also inree categories	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: 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 content of the special Statement of both on a substitution, see page (v) on a program service the television statistically of the televisi	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system expacity. 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.	G Primary Transmitters: Television
				•	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	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	
	1					
						
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023026	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable: FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba Substitute Pasis: 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 licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the stylenation of local serve Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For	G, identify even system during the tions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a subsand also in spanformation conditions. The station's call associated with A-2". Simulcast e channel number of the eineach case of the ein	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 a station account in a station. In the station account in a station account in a station account in a station account in a station. In the local service in column account in a station in column account in a station account	period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination cording to its own be reported in the tition is a network), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, incompared to a same that is not some 30, 2009, be a sociation repreyou carried the	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the special Statement of t	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your dering "LAC" if your cable system	G Primary Transmitters: Television
Column 6: Give th	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the which the station is identified.	
Note: If you are utilizing		. ,		•		
		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.					Accookii	NG 1 ENIOD. 2010/2		
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#			
CABLE ONE, IN	IC.				023026	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute 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 LGC. "Gro network," "N-M" (for								
				•	which the station is identifed.			
Note: If you are utilizin	g multiple char			'	channel line-up.			
	Т	CHANNI	EL LINE-UP	AM				
1. CALL	2. B'CAST	-	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)				
	NOMBLIX	STATION		(II Distant)				
	• • • • • • • • • • • • • • • • • • • •							

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				023026		
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 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 —Dut do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. *List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast							
Note: If you are utilizing	ig multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AN			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
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	<u> </u>				ļ		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023026	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute program base 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 multicate for the meaning of the Column 4: If the st planation of local serving Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For	G, identify even dispersions in effect of 6.61(e)(2) and (6.51(e)(2) and (6.51	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 a station account in a station. In the local service in a station account in a station account in a station account in a station. In the local service in a station account in a stat	period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the tition was carried ute basis station eport origination cording to its own be reported in the tition is a network), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, incompared to a same that is not some 30, 2009, be a sociation repreyou carried the	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the which the station is identified.	
Note: If you are utilizing		. ,		•		
		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	
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	1C.				023026			
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried only our cable system during the accounting period, except (1) stations carried only on a part-line basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), or 76.61(e)(2) and (4), or 76.61(e)(2) and (4), or 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—If the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast 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 ilicense. 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 independ								
		. ,		•				
		CHANNI	EL LINE-UP	AP				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Namo	
CABLE ONE, IN	NC.				023026	Nume	
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 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 asociated with a station according to its over-the-air designation. For example, report multicast stream as well-as a 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), "If (for independent), "I-M" (for independen							
Note. II you are utilizii	ig multiple chai		·	•	спаппелине-ир.		
		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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	†	 		· 	···	·1	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				023026	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consine and consine as explaine stations: With recording the consideration of the consideration	ne accounting In June 24, 198 4), or 76.63 (r d in the next prespect to any titions, or auth G—but do list titute basis. Ince I, if the sta erning substit sign. Do not r in a station acc streams must over the FCC h	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the tition was carried ute basis station eport origination coording to its ov- be reported in our	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program service er-the-air designal column 1 (list each the television statistics).	and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the sute 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 ion for broadcasting over-the-air in may be different from the channel	Primary Transmitters: Television
on which your cable sy Column 3: Indicate educational station, by (for independent multion For the meaning of the Column 4: If the st planation of local servic Column 5: If you had be system carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	e in each case varied the in each case varieting the le cast), "E" (for no ese terms, see partie in each case ave entered "Ye ave entered "Ye in on a part-tirion of a distant the entered into on a primary transisimulcasts, also aree categories, e location of ea Canadian statio	ne station. whether the st tter "N" (for ne concommercial coage (v) of the the local serv age (v) of the commercial coage (v) of the coage (v) coa	ation is a netwo etwork), "N-M" (I educational), o e general instruc- vice area, (i.e. "c general instruct- 4, you must cot ause of lack of a earn that is not s are 30, 2009, be association repre you carried the of the general in r U.S. stations, e the name of the	ork station, an indefor network multicor "E-M" (for noncotions located in the distant"), enter "Ye ions located in the mplete column 5, and. Indicate by enterivated channel of subject to a royalty stween a cable systement on any of instructions located list the community with th	ependent station, or a noncommercial ast), "I" (for independent), "I-M" ommercial educational multicast). The paper SA3 form. It not, enter "No". For an experiment of the basis on which your stating the basis on which your capacity. It payment because it is the subject of the stating as association representing the payment because it is the subject of the stating as association representing the payment basis, enter "O." For a further did in the paper SA3 form. It to which the station is licensed by the payment is dentified.	
		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.						1	
LEGAL NAME OF OWN		'STEM:			SYSTEM ID#	Namo	
CABLE ONE, IN	IC.				023026		
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. *List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for							
Note: If you are utilizin	g multiple char	nel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AS			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CABLE ONE, II	NC.				023026		
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 sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for in							
		. ,		•			
Note. II you are utilizii	ig multiple chai		•		спаппет ппе-ир.		
	1	CHANN	EL LINE-UP	AT			
1. CALL	2. B'CAST		4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
	•						
							
					<u> </u>		
	• • • • • • • • • • • • • • • • • • • •						

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				023026		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions 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 "							
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	AU			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
							
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	+				<u> </u>		
							
		 					

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID# 023026	Name	
CABLE ONE, IN)NI			023020		
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for indep							
,		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		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
CABLE ONE, II	NC.				023026		
PRIMARY TRANSMITT	ERS: TELEVISIO	N					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-lime basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast). ""(for independent) "II-IAM" (for network), "N-M" (for network multic							
					d in the paper SA3 form. to which the station is licensed by the		
				•	which the station is identified.		
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AW			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
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ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 023026 CABLE ONE. INC. 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	6 PERIOD: 2018/2		
LEGAL NAME OF OWNER OF	CABLE SYS	ΓΕ <mark>Μ</mark> :				SYSTEM ID#	Namo		
CABLE ONE, INC.						023026	1401116		
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	T AND PROGRAM LOG						
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or authorizations	. For a further	Substitute Carriage:		
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is "	Yes," you mu	ist complete the progra	ım	Program Log		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gives Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please and of every no distant state gulations, oution. Do not a ucy" or "NE may be adeast stationation and day we "5/7." The example: a state of the stat	am on a separa attach additional attach additional attach additional annetwork televition and that your authorizations to use general of BA Basketball: deast live, enterstation broadca on's location (thous, if any, the owneyour system of the state of the program carried listed program ons in effect du	al pages. ision program (substitute program cable system substitute program (substitute program categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute program are community to which the community with which the stem carried the substitute program was carried by your ced by a system from 6:01:1 was substituted for program the accounting period;	rogram) that, at for the program instruction "basketball". o." m. station is licent station is ident program. Use table system. 5 p.m. to 6:20 mming that you enter the letter.	during the accounting ramming of another stans located in the paper List specific program need by the FCC or, in tified). numerals, with the mount of the times accurate 8:30 p.m. should be our system was require ter "P" if the listed pro	ation - nth ely			
					N SUBSTITUTE	7. REASON			
	SUBSTITUT 2. LIVE?	TE PROGRAM 3. STATION'S		5. MONTH	AGE OCCURRED 6. TIMES	FOR DELETION			
TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	5222			
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ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

023026

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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

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

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

- Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10"
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.–12:00 p.m."

DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

LEG	L NAME OF OWNER OF CABLE SYSTEM:	,	SYSTEM ID# 023026	Name			
CA	BLE ONE, INC.		023026				
all a (as pag	Poss Receipts ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission sompute this amount,	ervice see 72,261.00	K Gross Receipts			
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.							
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ${\sf k}$ 3 below.	e entered on line 1 of					
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2 in blo	ock				
	rt 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 more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	e is 1.064 percent of the					
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	φ 1,0	72,201.00				
	This is your minimum fee.	\$	17,792.86				
Block 2	· · · · · · · · · · · · · · · ·						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$					
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00				
	Line 3. Add lines 1 and 2 and enter here	\$	-				
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$	17,792.86	Cable systems			
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.	r	0.00	submitting additional deposits under			
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing			
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	18,517.86	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		additional 1663.			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023026									
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 EMERSON YEARWOOD Telephone 602-364-6195									
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)									
	PHOENIX, AZ 85012-2626 (City, town, state, zip)									
	Email emerson.yearwood@cableone.biz Fax (optional) 602-364-6013									
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 identified 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									
	(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.									
	 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/ Raymond Storck									
	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 the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.									
	Typed or printed name: RAYMOND STORCK									
	Title: VICE PRESIDENT (Title of official position held in corporation or partnership)									
	Date: February 28, 2019									

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

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CABLE ONE, INC.	023026	
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 a lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall rescribers and amounts collected from subscribers receiving secondary transmissions pursuant to secondary transmission on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners? X NO	or the basic not include sub- ection 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	- x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	erest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further ass contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyrigh please list below the owner, address, first community served, accounting period, and ID number as given filing.		
Owner Address		
First community served Accounting period ID number		

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

ACCOUNTING PERIOD: 2018/2

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that be all the control of the control of the control of the BOT.	

Note that local stations are not counted at all in computing DSEs.

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number or hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



	Distant Stations Carried		Identification	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
;	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 DSEs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

linimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	00.004.00

		40,0000			
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: 2018/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)								
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#			
1	CABLE ONE, INC.					023026			
	SUM OF DSEs OF CATEGOR	RY "O" STATIO	NS.						
	Add the DSEs of each station								
	Enter the sum here and in line		s schedule.		0.00				
2	Instructions: In the column headed "Call S	Sian": list the ca	Il ciane of all dictant ctations	identified by t	the letter "Ω" in column 5				
_	of space G (page 3).	olgii . list tile ca	iii sigris or air distarit stations	s identified by t	the letter O in column 5				
Computation	In the column headed "DSE"	: for each indep	endent station, give the DSI	as "1.0"; for	each network or noncom-				
of DSEs for	of DSEs for mercial educational station, give the DSE as ".25."								
Category "O"			CATEGORY "O" STATION	IS: DSEs					
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Add rows as									
necessary.									
Remember to copy									
all formula into new									
rows.									
TOWS.									
						••••••			
Ī		1		I		1			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.							023026
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	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 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.							
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs							
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAG VALUE	F 5. TYPE		SE
			÷		=	<u>x</u>	=	
			÷			x x	<u> </u>	
			÷		=	x	=	
							<u>=</u>	
			÷		= =	x		
	SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule,							
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).							
	SUBSTITUTE-BASIS STAT							
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	rs	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		= 			÷ 	=
				=			÷	=
		÷		=			÷	=
		÷		=			÷ -	=
	SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule,							
5 Total Number of DSEs	TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the tota number of DSEs applicable to your system. 1. Number of DSEs from part 2 ●							
	I O I AL HOWIDE						· <u>L</u>	0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/2

CABLE ONE, I		SYSTEM:					S	YSTEM ID# 023026	Name	
Instructions: Blod In block A: • If your answer if schedule. • If your answer if	"Yes," leave the re	emainder of p	·	7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	the	6	
i your answer ii	No, complete bit			ELEVISION M.	ARKETS				Computation of	
	1981?	outside of all	major and sma		efined under s			gulations in	3.75 Fee	
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs				
Column 1: CALL SIGN	under FCC rules	and regulation ne DSE Sche	ons prior to Jui dule. (Note: Tl	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see the	he		
Column 2: BASIS OF PERMITTED CARRIAGE	BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to									
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE		
		1						0.00		
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE					
Line 1: Enter the	total number of							-		
Line 2: Enter the	sum of permitte	ed DSEs from	m block B ab	ove						
Line 3: Subtract (If zero, I				r of DSEs subjec 7 of this schedu		rate.		0.00		
Line 4: Enter gro	ess receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially	
Line 5: Multiply li	ine 4 by 0.0375	and enter su	ım here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DS	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.	
Line 7: Multiply li	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00		

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

	E ONE, I	WNER OF CABLE	OTOTEW.					5 `	YSTEM ID# 023026	Mama
			BLOCK	A: TELEVIS	ION MARKETS	S (CONTIN	UED)	T	I	_
	CALL IGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
										Computation of 3.75 Fee
····										
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Name	CABLE ONE, IN		SYSTEM:						S	923026			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage. Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the basis of carriage on which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED												
		PERMITTE	ED DSE FOR STA	TIONS CARRI	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS					
	1. CALL SIGN	2. PRIC		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE			
7 Computation of the		"Yes," comple	ete blocks B and C ocks B and C blan	k and complete		rt 8 of the DSE schedu							
Syndicated			BLOC	K A: MAJOR	ΙĿ	ELEVISION MARK	<u>EI</u>						
Exclusivity Surcharge	Is any portion of the or	cable system w	rithin a top 100 maj	or television mar	rket	as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?			
	Yes—Complete	blocks B and	C .			No—Proceed to	part 8						
	BLOCK B: C	arriage of VHF	Grade B Contour	Stations		BLOCK	(C: Compu	itation of Exem	pt DSE	3			
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places	, ,			Was any station listed nity served by the cab to former FCC rule 76	le system p						
	Yes—List each s X No—Enter zero a		h its appropriate per part 8.	mitted DSE		Yes—List each st			ate permi	tted DSE			
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE			
						•		-					
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00			

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 023026	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,672,261.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the Dis 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge.		
	Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ _\$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the Dis 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name			023026
	'	CABLE ONE, INC.	023020
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ _\$	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in	_
		section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	
		ctions:	
8		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.	t
		ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	-	ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
or Base Rate Fee	• If you blank	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belov .	N
		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	Service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
	Castian	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	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶	
	Section		=
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank.	
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		C. Subtract 4 000 from total DSFs	
		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)	0.00
		Base Rate Fee	<u></u> '.

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DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2018/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 023026 Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
A. Enter 0.01064 of gross receipts (the amount in section 1) **State	8
B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computati of Base Rate
C. Multiply line B by 3.000 and enter here	
D. Enter 0.00330 of gross receipts (the amount in section 1) \$ \$	
E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here▶	
F. Multiply line D by line E and enter here > \$	
G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of tele	vision broadcast signals shall
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported n Space G.	nultiple channel line-ups in
In General: If any of the stations you carried were partially distant, the statute allows you, in computing you receipts from subscribers located within the station's local service area, from your system's total gross rece	
exclusion, you must:	Base Rate
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers the station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate beginning that the property for each subscriber group. That total is the base rate for force of the property of the property for force of the property for force of the property	that are distant to the same m. Determine the number of se rate fee for each group. Surchard
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for yo NOTE: If any portion of your cable system is located within the top 100 television market and the station is r	TOT
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both bloif your cable system is wholly located outside all major television markets, complete block A only.	
How to Identify a Subscriber Group for Partially Distant Stations	for Partial Permitte
Step 1: For each community served, determine the local service area of each wholly distant and each partial carried to that community.	ally distant station you Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your substoutside the station's local service area. A subscriber located outside the local service area of a station is distant to the subscriber.)	
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which the subscriber group must consist entirely of subscribers who are distant to exactly the same complement of states system will have only one subscriber group when the distant stations it carried have local service areas that	itions. Note that a cable
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for ea groups. In each section:	ch of your system's subscriber
Identify the communities/areas represented by each subscriber group.	
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that subscribers in the group.	s distant to all of the
If:1) your system is located wholly outside all major and smaller television markets, give each station's DSE a	s 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 y part 6 of this schedule.	ou gave it in block B,
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) or in the paper SA3 form.	f the general instructions
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this sci page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscribes for that group's complement of stations and total gross receipts from the subscribers in that group).	iber group (that is, the total

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actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 023026 CABLE ONE, INC. 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.

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LEGAL NAME OF OW CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 023026	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	JP		JP	0		
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee
			<mark></mark>				<u></u>	and Syndicated
			····					Exclusivity
			···	-		 		Surcharge
								for
								Partially
								Distant
							<u></u>	Stations
	·····		<u>-</u>				····	
			<u> </u>			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$ 1,672	2,261.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	JP		FOURTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>				<u>.</u>	
				-		H		
			<u></u>			 		
						-		
	·····		<u> </u>					
						-		
			1					
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
		te fees for each subso	criber group	as shown in the boxe	s above.		255	
Enter here and in blo	ock 3, line 1,	space L (page 7)				\$	0.00	

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 023026	Name
		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	JP	
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
								Surcharge for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP 0	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA				
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 Thir	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
E				TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	_			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122.01011	202	07.22 0.0.1	302	07.22 0.0.1	302	07.122.01.01.1	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
			<u></u>			-		Surcharge
			<u></u>			-		for Partially
	···	H	 					Distant
								Stations
	<u></u>							
			<u></u>					
Total DSEs		Ц	0.00	Total DSEs		11	0.00	
	_						-	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
E	ELEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
								
			<u></u>			-		
			···			-		
					•	-	••••	
						-		
						-		
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			scriber group	as shown in the boxe	es above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023026									
				ATE FEES FOR EAC						
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		9		
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA	0	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
			<u>.</u>					and		
	·····		<mark>-</mark>		····			Syndicated Exclusivity		
					••••			Surcharge		
								for		
								Partially		
			<u>.</u>					Distant Stations		
						•		Stations		
			<mark>.</mark>		<mark></mark>					
			<u>-</u>		····					
Total DSEs		Į.	0.00	Total DSEs	<u> </u>	- ! !	0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00			
Gross recorpts i not	Стоир		0.00	Cross rescipts seed	ond Group		0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
		SUBSCRIBER GRO		iii —		SUBSCRIBER GRO	UP			
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	·····		<u>.</u>		····					
			·		····	-				
			<u></u>		<u></u>					
			·		····	•				
			<u>-</u>		····					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$				

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	923026	Name
				TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	NTEENTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		-						and
			<u></u>					Syndicated
								Exclusivity
	····							Surcharge for
	····		···					Partially
								Distant
								Stations
					·····			
	···	• • • • • • • • • • • • • • • • • • • •	···				····	
Total DSEs	-	<u>, </u>	0.00	Total DSEs	<u> </u>		0.00	
	roup.	•			and Craun	•	0.00	
Gross Receipts First (∍roup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
N	INTEENTH	SUBSCRIBER GRO	UP		TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
	····							
	···		···					
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	-				-			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
ss Receipts Third se Rate Fee Third se Rate Fee: Add to	Group	\$	0.00	Gross Receipts Fou	rth Group		0.00	

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EACH				
TWE		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	JP 0	9		
		T				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		1	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
	•							
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		III		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	••••				•••		••••	
	····							
	••••							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
	Group	•	0.00		h Group	•	0.00	
Gross Receipts Third	σισαμ	<u>\$</u>	0.00	Gross Receipts Fourti	п Эгоир	\$	<u> </u>	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	o as shown in the boxes	above.	\$		

and Syndicated Exclusivity Surcharge For Partially Distant Stations Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gr	CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
COMMUNITY/ AREA					11				
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DSE DSE CALL SIGN DSE DSE DSE RESERVATE DE DSE DSE DSE DSE DSE DSE DSE DSE DSE			SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations St	COMMUNITY/ AREA			U	COMMUNITY/ AREA			U	
and Syndicated Exclusivity Surcharge Exclusivity Surcharge Fare for Partially Distant Stations Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O.00 CALL SIGN DSE CALL SIGN DS	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	_
Syndicated Exclusivity Surcharge for Partially Distant Stations Sta									Base Rate Fee
Exclusivity Surcharge for Partially Distant Stations Total DSEs Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE COMMUNITY/ AREA DO.00 DSE CALL SIGN DSE CA		<u></u>							
Surcharge for Partially Distant Stations Total DSEs Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA COMUNITY/ AREA COMMUNITY/ AREA COMMUNITY/ AREA COMMUNITY/ AREA C									-
Total DSEs Gross Receipts First Group CALL SIGN DSE CALL SIGN D						····	-		
Distant Stations Total DSEs Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL			-						for
Stations Total DSEs Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									-
Total DSES Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL S		<u></u>							
Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA		····					•		Stations
Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA									
Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA		<u></u>							
Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL									
Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL									
Gross Receipts First Group Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA	Total DSEs			0.00	Total DSEs		!!	0.00	
Base Rate Fee First Group TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE		Group	\$			and Group	\$		
TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN		·							
COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DS	Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Third Group S 0.00 Gross Receipts Third Group Gross Receipts Fourth Group Gross Receipts Fourth Group S 0.00 Gross Receipts Fourth Group S 0.00			SUBSCRIBER GROU		11		SUBSCRIBER GROU		
Total DSEs	COMMUNITY/ AREA			0	COMMUNITY/ AREA	١			
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00		<u></u>							
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00						••••			
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00		<u></u>							
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 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 Fourth Group \$ 0.00									
The state of the s	Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
"					Ш				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$\$				criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC				
	TY-NINTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0,122 0.0.1	302	07.122.010.1	332	07.122.01011	202	07.22 0.0.1	302	Base Rate Fee
								and
								Syndicated
				-				Exclusivity
	···		<u>-</u>					Surcharge for
		-	·					Partially
								Distant
								Stations
			<mark>.</mark>					l
			<u>.</u>					l
			.			•		l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	l
Gross Receipts First C	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIF	RTY-FIRST	SUBSCRIBER GRO	UP	THIRT	Y-SECONE	SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
			<u> </u>					l
			 		····			l
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	···							l
		-						l
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								l
			<u>.</u>					l
								l
Total DSEs			0.00	Total DSEs	1		0.00	1
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	l
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EAC				
	Y-THIRD	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		-						Syndicated
				·				Exclusivity Surcharge
		-						for
								Partially
								Distant
								Stations
				·				
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
THIR	ΓY-FIFTH	SUBSCRIBER GRO	JP	TH	IRTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				·				
		-						
		-			••••		····	
Total DSEs			0.00	Total DSFs			0.00	
	roup	¢			th Croup	e e	-	
Gross Receipts Third G	ισυρ	Ψ	0.00	Joss Receipts Foul	ші Сіоир	•	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
eceipts Third G	roup e base rat			Total DSEs Gross Receipts Four Base Rate Fee Four	th Group	\$	0.00	

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GRO		Ħ		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALLE GIGIT	502	Or ILL GIGIT	502	O/ IEE O/O/I	502	O/ILL SIGIY	562	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
			<u> </u>					for Partially
			·			 		Distant
			•		•••••			Stations
	····							
	····		<u> </u>				····	
Total DSEs			0.00	Total DSEs	<u> </u>	ļļ.	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•	·				·			
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•		• • • • • • • • • • • • • • • • • • • •			
		_						
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
I	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		H .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated Exclusivity
	·····						····	Surcharge
								for
								Partially
								Distant
								Stations
			···				·····	
	<u>.</u>							
			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	
FOI	RTY-THIRD	SUBSCRIBER GRO	UP	FOR	TY-FOURTH	I 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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		-	···		••••	-		
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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 blo			scriber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	RTY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122.01011	202	07.22 0.0.1	302	07.22 0.0.1	332	07.122.01.01.1	302	Base Rate Fee
								and
	<mark></mark>		<u></u>					Syndicated
								Exclusivity
			<u></u>					Surcharge for
					·····	-		Partially
								Distant
								Stations
	<mark>.</mark>		<u></u>			-		
	···					-		
								
	···		<u></u>			•		
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First G	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	
FORTY-	SEVENTH	SUBSCRIBER GRO	DUP	FO	RTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u></u>	
			<u></u>			-		
	···	H	 		•••••	-		
	<u>.</u>							
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			scriber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EACH				
FOR COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA				COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>							and Syndicated
								Exclusivity
								Surcharge
								for
	····				 			Partially Distant
								Stations
	····				···			
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	•	\$	0.00	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GROU	<u>лР</u>	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
COMMONT TO AREA				COMMUNITY AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>				<u></u>			
	<u></u>			-				
		-						
	<u>.</u>				<u></u>			
	····				···			
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Page Pate For Third	Crour		0.00	Page Pate Fee Fee	h Croves		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	п Стоир	\$	0.00	
Dana Bata E A	tha k	a face for each 1	mile =	an about to the	ah a: :-			
Enter here and in bloo			inei group	as shown in the boxes	ಡು∪೪೮.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
В	SLOCK 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	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
	<u></u>				····	-		Exclusivity
					·····	-	····	Surcharge for
	···				•••••	-		Partially
						-		Distant
								Stations
						-		
	···				••••			
	••••••••••••							
Total DSEs	•	-	0.00	Total DSEs	•		0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FII	FTY-FIFTH	SUBSCRIBER GRO)UP		FIFTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						 		
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			<u></u>		·····	-		
	···				·····			
	···		<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			scriber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EAG	CH SUBSCE	RIBER GROUP		
		SUBSCRIBER GRO		II .		SUBSCRIBER GROU	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					·····			Base Rate Fe
		-						and Syndicated
		H						Exclusivity
								Surcharge
								for
	<u></u>		<u></u>					Partially
			<u></u>					Distant Stations
	·····				······			Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FI	IFTY-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	SUBSCRIBER GROU	UP	
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>		•••••			
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			<u></u>					
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		_						
					<u></u>			
			<u></u>				<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
2.300 R000ipto 11iii0	. 0.0up	.*			O. Oup	<u>*</u>	3.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EAC				
SIX COMMUNITY/ AREA	I Y-FIRST	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	9
	T 505	T 0411 0101	T 505			II	505	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
	<u></u>				•••••	-		Stations
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GRO		ii .		SUBSCRIBER GRO	JP	
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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	<mark></mark>		·		<u></u>		<u></u>	
	<u>-</u>		·		····	-		
	<u>-</u>	-			••••	-		
							<u></u>	
Total DSEs		I	0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
,	•				r			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				•				
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 023026	Name
BL	OCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	Y-FIFTH	SUBSCRIBER GRO		TT .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>				<u></u>	Base Rate F
								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 Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-S	EVENTH	SUBSCRIBER GRO	UP	SI	XTY-EIGHTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
			···					
		-	•••••••••••••••••••••••••••••••••••••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Gross Receipts Third G Base Rate Fee Third G Base Rate Fee: Add the Enter here and in block	roup	\$ e fees for each subs	0.00	Gross Receipts Fou	rth Group		0.00	

COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SUBSCRIBER GROUP O COMMUNITY/ AREA O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMMUNITY/ AREA O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMMUNITY/ AREA O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMMUNITY/ AREA O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O CALL SIGN OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O CALL SIGN OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O CALL SIGN OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O CALL SIGN OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP O CALL SIGN OF B
O COMMUNITY/ AREA O Computation CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Formula and Syndicated Exclusivity Surcharge for Partially Distant
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Formand Syndicated Exclusivity Surcharge for Partially Distant
and Syndicated Exclusivity Surcharge for Partially Distant
Syndicated Exclusivity Surcharge for Partially Distant
Exclusivity Surcharge for Partially Distant
Surcharge for Partially Distant
for Partially Distant
Distant
Stations
\$ 0.00 Gross Receipts Second Group \$ 0.00
\$ 0.00 Base Rate Fee Second Group \$ 0.00
SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP
0 COMMUNITY/ AREA 0
CALL SIGN DSE CALL SIGN DSE
0.00 Total DSEs 0.00
\$ 0.00 Gross Receipts Fourth Group \$ 0.00
- Close (Coccipie) College Coccipies (Coccipies Coccipies
\$ 0.00 Base Rate Fee Fourth Group \$ 0.00

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		11		I SUBSCRIBER GROU		9
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
					···			Syndicated Exclusivity
								Surcharge
								for
	·····							Partially Distant
		-						Stations
					<u></u>			
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
SEVE	NTY-FIFTH	SUBSCRIBER GROU	JP	SEVE	NTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			 			
					<u></u>			
								
					<u></u>			
					···			
				-	<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
	d Group	•	0.00		h Group	•	0.00	
Gross Receipts Third	, стоир	\$	3.00	Gross Receipts Fourt	ιι Θιυυρ	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EACH				
	-SEVENTH	SUBSCRIBER GROU		ii e	TY-EIGHTH	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<mark></mark>			and
					<u> </u>			Syndicated Exclusivity
	···			-	<u>-</u>			Surcharge
		-						for
					<u></u>			Partially
	<u></u>				<mark></mark>			Distant Stations
	<u></u>				. 			Stations
		-						
					<mark></mark>			
					<u> </u>			I
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First (Froun	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Groot recorpts river	эгоар			Cross rescapes escal	ій Огойр			
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	ITY-NINTH	SUBSCRIBER GROU		ii .	EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			
								
								I
					<mark></mark>			I
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	<u></u>				<mark></mark>			
					. 		<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EACH				
	HTY-FIRST	SUBSCRIBER GROU		ii —	Y-SECONE	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>				<u></u>			and
								Syndicated Exclusivity
				-	-	- 		Surcharge
		-						for
								Partially
					<u></u>			Distant Stations
	<u></u>				-			Otations
					<u> </u>			
	<u></u>							
	<u></u>				<u></u>	<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 (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	ITY-THIRD	SUBSCRIBER GROU		ii .	Y-FOURTH	I 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>			
	<u></u>	-			<u> </u>			
	<u></u>				<u></u>			
	<u></u>				<u> </u>			
	<u></u>				-	 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
				••				
Base Rate Fee: Add t Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and Syndicated
					•••••			Exclusivity
								Surcharge
								for
	····				·····	-		Partially Distant
								Stations
						-		
			<u></u>		<u></u>		<u></u>	
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	
		SUBSCRIBER GRO		Ti .		SUBSCRIBER GRO	UP -	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
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	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 Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO			NINTIETH 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 Fe
								and
								Syndicated
								Exclusivity Surcharge
		-	····			•		for
								Partially
		-						Distant
	<u></u>							Stations
	·····		····					
	·····			·				
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NIN	IETY-FIRST	SUBSCRIBER GRO	OUP	NINE	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				·		-		
••••••	····		····					
		-						
		-	•••••••••••••••••••••••••••••••••••••••			•		
	·····				·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	·				-			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC.		E SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EACH				
	TY-THIRD	SUBSCRIBER GROU		III	Y-FOURTH	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>							and
								Syndicated Exclusivity
	<u></u>							Surcharge
		-						for
								Partially
	<mark></mark>							Distant Stations
	<u> </u>							Stations
	<u></u>		ļ					
	<u>-</u>							
Total DSEs		!	0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Gross Receipts First G	лоир	4	0.00	Gloss Neceipts Secoi	id Group	*	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-FIFTH	SUBSCRIBER GROU		ii -	ETY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>	-						
					. 			
	<u></u>							
	<u></u>							
		-						
	<mark></mark>							
	<u></u>							
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n 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 OWNE CABLE ONE, INC.	SAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. SYSTEM ID# 023026								
				TE FEES FOR EAC					
	SEVENTH	SUBSCRIBER GRO		li		SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		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	
						-		Distant	
								Stations	
	<u> </u>		<u>.</u>						
	······································		<u>.</u>						
									
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
NINE	TY-NINTH	SUBSCRIBER GRO	UP	ONE H	IUNDREDTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u>.</u>			-			
						-			
			······································						
			ļ						
	<u></u>		<u>.</u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00			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.	\$			

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDR	ED FIRST	SUBSCRIBER GRO	UP	ONE HUNDR	ED SECOND	SUBSCRIBER GRO	JP	۵
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u>-</u>					Base Rate Fee
	···		<u></u>		·····			Syndicated
		-	<u>-</u>		••••			Exclusivity
								Surcharge
			<u> </u>					for
		-	<u> </u>					Partially
			<u></u>		·····			Distant Stations
		H	<u></u>	·				Stations
			<u></u>		•••••			
			<u></u>		<u>.</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDR	ED THIRD	SUBSCRIBER GRO	UP	ii e		I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	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>					
		-			••••			
		_						
			<u></u>		·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
1 111 1000 111110	- ·	·			очр	<u></u>		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNI		LE SYSTEM:				S	YSTEM ID# 023026	Name	
		COMPUTATION OI SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
	···		<u> </u>		·····			and Syndicated	
		 	•	·	•••••	-		Exclusivity	
								Surcharge	
						 		for	
				·		-		Partially Distant	
								Stations	
					····				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	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		
	SEVENTH	SUBSCRIBER GRO		ii .		SUBSCRIBER GRO			
COMMUNITY/ AREA			0	COMMUNITY/ ARE					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u> </u>		<u></u>				
		-							
			<u> </u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023026								
				ATE FEES FOR EACH					
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9	
COMMUNITY/ AREA	٩		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 Seco	nd Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00		
ONE HUNDRED	ELEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	I SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	Α		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	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$			

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
E	BLOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TH		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0.122 0.011	202	07.22 0.011	202	07.122.01011	202	07.122.01.01.1	302	Base Rate Fee
								and
		<u> </u>						Syndicated
								Exclusivity
			<u>.</u>				<u> </u>	Surcharge for
	···	-	······································			-		Partially
								Distant
								Stations
		-						
	····							
						-		
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 (\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GRO		li		SUBSCRIBER GROU	UP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
	···	-	······································					
		<u> </u>						
								
			<u>.</u>				<u> </u>	
	···						····	
								
	····		<u>.</u>				····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts 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 Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		ii —		SUBSCRIBER GROU		9
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 0.011	302	07.122 01011	202	0.120.01	202	07.22 0.0.1	302	Base Rate Fee
								and
								Syndicated
					<u></u>			Exclusivity
					<u>-</u>			Surcharge for
		-			<u>-</u>			Partially
								Distant
		-						Stations
								1
					<u></u>			1
								1
								I
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED N	VINTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED T	WENTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····							1
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								I
					<u></u>			1
					<u></u>			I
					<u></u>			1
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED TWEN	TY-SECONE	SUBSCRIBER GROUP	1	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 G	Group	\$	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 TWEE	NTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	ITY-FOURTH	SUBSCRIBER GROUP)	
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	Group	\$	0.00	Gross Receipts Four	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	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.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name	
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP			
		SUBSCRIBER GROU				I SUBSCRIBER GROUP		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fe	
				·				Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant Stations	
								Otations	
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		
NE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TWI	ENTY-EIGHTH	SUBSCRIBER GROUP	1		
COMMUNITY/ AREA	E HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA		0	COMMUNITY/ ARE.	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
									
	····								
		-							
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	•••••	-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
C.000 Receipts Hillu	Oroup	*	0.00	- Cross Receipts Fou	.a. 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	s above.	\$			

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROUP		TI .		H 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>				<u></u>			Syndicated
								Exclusivity Surcharge
					···			for
								Partially
								Distant
			 					Stations
					<u></u>			
	····				···			
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED TH	HIRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-SECONI	O SUBSCRIBER GROUF)	
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	I Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 023026	Name
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-				.		and
								Syndicated Exclusivity
								Surcharge
			 					for
	·····				···			Partially Distant
		-						Stations
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	HIRTY-SIXTH	SUBSCRIBER GROUP	,	
COMMUNITY/ AREA	A		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 Fourth	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourtl	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROU				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
	···	-		1				Partially
								Distant
								Stations
	···							
T-4-1 DOC-		Ц	0.00	T-4-LDOF-			0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	RTY-NINTH	SUBSCRIBER GROU	IP	Ħ		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA	ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA		0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	···	-		1				
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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	
_ 300 .tato i 66 i iiilu	-10up	Ψ	0.00	2000 1000 1 66 1 00	Стоир	*	0.00	
Base Rate Fee: Add to Enter here and in blood			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROUP		H	TY-SECONE	SUBSCRIBER GROUP		9
COMMUNITY/ AREA	٠		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			 					and
					<u></u>			Syndicated Exclusivity
	·····				-	+	••••	Surcharge
								for
								Partially
		-			<u></u>			Distant Stations
					<u></u>			Stations
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					<u> </u>	<u> </u>		
Total DSEs	<u> </u>		0.00	Total DSEs		Į.I.	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
	·				·			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROUP		ii .	TY-FOURTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
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		-	 		<u></u>			
					<u> </u>			
					<u> </u>			
					<mark></mark>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EACH				
	RTY-FIFTH	SUBSCRIBER GROUP				H 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
	<u>"</u>	-			····			for
								Partially
								Distant
	<u></u>				<u></u>			Stations
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			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTI	H 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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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 023026	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA	4		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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Total DSEs			0.00	Total DSEs	ļ	11	0.00	
	Croup	•	0.00		nd Croup	•	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-SECONE	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	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023026	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GRO		i i		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>		<u></u>					Base Rate Fee
	<mark></mark>		<u></u>					and Syndicated
	···		-					Exclusivity
			-					Surcharge
								for
			<u> </u>					Partially
			<u> </u>					Distant
	<u> </u>			-			·····	Stations
	···	-					····	
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
S. 500 P. Cocipio Trilla	0 up				Отоир	<u>*</u>	3.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023026	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED F	IFTY-EIGHTH	SUBSCRIBER GROUP)	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe and
	···	-	···		•••••			Syndicated
								Exclusivity
								Surcharge
		-						for
	<u></u>		<mark></mark>					Partially Distant
		-					····	Stations
	···		<u> </u>		••••			
Total DCFs			0.00	Total DCFs		Ц	0.00	
Total DSEs			0.00	Total DSEs			3	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDE	RED SIXTIETH	SUBSCRIBER GROUF		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth 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 boxe	s above.	\$		

	C.						023026	Name
				TE FEES FOR EAG		RIBER GROUP SUBSCRIBER GRO	LID.	
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE	9			
SOMMONT IT AIRE				COMMONT IT ARE			0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
							<u></u>	Syndicate
	<u> </u>		<u></u>					Exclusivit Surcharg
		H	····				····	for
		-	<u></u>		•••••			Partially
								Distant
								Stations
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otal DSEs		!!	0.00	Total DSEs		**	0.00	
	_					-	•	
ross Receipts First	Group	\$ 1,672	2,261.00	Gross Receipts Sec	cond Group	\$	0.00	
ase Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				I SUBSCRIBER GRO	UP	
OMMUNITY/ AREA	٠		0	COMMUNITY/ ARE	:A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	<u></u>						<u></u>	
		 						
	_		0.00	Total DSEs			0.00	
otal DSEs		¢	0.00	Gross Pagaints Fou	urth Group	¢	0.00	
	Group	\$	0.00	Gross Receipts Fou	aaa Oroup	\$	0.00	
	d Group							
Fotal DSEs Gross Receipts Third	d Group							
		\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
ross Receipts Third		\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
ross Receipts Thire	d Group			Base Rate Fee Fou		\$	0.00	

LEGAL NAME OF OWNE		LE SYSTEM:				S	023026	Name
В				TE FEES FOR EAC				
LCOMMUNITY/ADEA	FIFTH	SUBSCRIBER GRO		COMMUNITY		I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	OUP BER GROUP O Comp Sign DSE Base F a Synd Exclu Surc f Par Dis Star 0.00 0.00	of
	<u></u>						O Computati Of Base Rate and Syndicate Exclusivii Surcharg for Partially Distant Stations O.00 O.00 O.00	Base Rate Fe
			<u></u>				Syndicated Exclusivity Surcharge for Partially Distant Stations	
	<u></u>							
								Surcharge
								for
			<u></u>					-
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Total DSEs			0.00	Total DSEs		1	0.00	
						-		
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO)UP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u></u>			<u> </u>	<u> </u>	
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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Door Date For This !	Orou-		0.00	Book Bets Free F	eth Crave		0.00	
Base Rate Fee Third (Joup	\$	0.00	Base Rate Fee Four	пи Стоир	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

Name	YSTEM ID# 023026	S			•	LE SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				Bl
9		SUBSCRIBER GROU	TENTH			SUBSCRIBER GRO	NINTH	
Computation of Base Rate Frand Syndicated Exclusivity Surcharge for Partially Distant Stations	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	UP ER GROUP O Compute GN DSE Base R ar Syndi Exclu Surci fc Part Dist Stati	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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Partially								
Distant								
Stations								
		-						
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•	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 Secor	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	TWELVTH		UP	SUBSCRIBER GRO	LEVENTH	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			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C

								CABLE ONE, INC
	ID			TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROUND		
9		SUBSCRIBER GROU	KIEENIN	COMMUNITY/ AREA	0	SUBSCRIBER GRO	KIEENIN	COMMUNITY/ AREA
G Name 9 Computati of Base Rate and Syndicate Exclusivi Surcharg for Partially Distant Stations								
of	0 DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
		-					<mark></mark>	
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		-						
						-		
Partially								
Distant						-	<u>.</u>	
Stations		-					<mark></mark>	
							<mark></mark>	
			<u> </u>					
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	iroup	Fross Receipts First G
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	ase Rate Fee First G
	JP	SUBSCRIBER GROU	XTEENTH	SI	JP	SUBSCRIBER GRO	FTEENTH	FI
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SICN		L				2411 21211
	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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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	E SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GRO		TWENT	Y-SECOND	SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								Base Rate Fee
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Total DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWENT	Y-THIRD	SUBSCRIBER GRO	UP	TWENT	Y-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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LEGAL NAME OF OWNE CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023026	Name
				TE FEES FOR EACH				
	TY-FIFTH	SUBSCRIBER GRO			NTY-SIXTH	SUBSCRIBER GRO		۵
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWENTY-9	SEVENTH	SUBSCRIBER GRO	IIP	TWENT	Y-FIGHTH	SUBSCRIBER GROU	LIP	
COMMUNITY/ AREA	TWENTY-SEVENTH SUBSCRIBER GR		0	COMMUNITY/ AREA	LIOITIT		0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 023026	Name
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	ΓΥ-NINTH	SUBSCRIBER GRO			HIRTIETH	SUBSCRIBER GROU		۵
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation of Base Rate Feand Syndicated Exclusivity Surcharge for Partially Distant Stations
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIR	TY-FIRST	SUBSCRIBER GRO	UP	i i	-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs	1		0.00	Total DSEs	1		0.00	
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Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	\$ e fees for each subsc		0.00	Gross Receipts Fourth Base Rate Fee Fourth	Group	\$ \$	0.00	

Name	YSTEM ID# 023026	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
۵	JP	SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GRO	TY-THIRD	
Computation of Base Rate Feand Syndicated Exclusivity Surcharge for Partially Distant Stations	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	JP	SUBSCRIBER GROU	RTY-SIXTH	THIF	JP	SUBSCRIBER GRO	TY-FIFTH	THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	023026						R OF CABL	CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
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	JP	SUBSCRIBER GROU	-FOURTH	FORTY	JP	SUBSCRIBER GROU	TY-THIRD	FOR
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Name								CABLE ONE, INC.
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Name	YSTEM ID# 023026					LE SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				
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Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROI	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROI	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROI	TY-FIFTH	COMMUNITY/ AREA
	JP 0		TY-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROI	TY-FIFTH	CALL SIGN
	DSE		DSE	CALL SIGN	DSE	SUBSCRIBER GROI	DSE DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
FIFTY-	SEVENTH	SUBSCRIBER GRO		FII	FTY-EIGHTH	SUBSCRIBER GRO	UP	۵
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
		-					<u></u>	Surcharge
			<u></u>					for
			<u></u>				<u></u>	Partially
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	<u> </u>		<u></u>					Stations
			<u></u>				<u></u>	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	TY-NINTH	SUBSCRIBER GRO			SIXTIETH	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 DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	•	<u>j : </u>			- 1	Ŀ		
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

Name	YSTEM ID# 023026	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	'-SECOND			SUBSCRIBER GRO	TY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and						-		
Syndicated				•••••				
Exclusivity Surcharge								
for		-						
Partially		-				-		
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	0.00		<u> </u>	Total DSEs	0.00		1	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$		Base Rate Fee Second	0.00	\$		Base Rate Fee First Gr
		SUBSCRIBER GROU	7-FOURTH			SUBSCRIBER GRO	IY-IHIRD	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	YSTEM ID# 023026	S'				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	CTY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	Y-EIGHTH		UP	SUBSCRIBER GRO	SEVENTH	SIXTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	YSTEM ID# 023026	Sì				.E SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GRO	ΓΥ-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	IP	SUBSCRIBER GROU	-SECOND	SEVENT	JP	SUBSCRIBER GRO	TY-FIRST	SEVEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		\$	Group	Total DSEs Gross Receipts Fourth		\$	Group	Total DSEs Gross Receipts Third G

	023026	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
	UP	SUBSCRIBER GROU	/-FOURTH	SEVENT	JP	SUBSCRIBER GRO	TY-THIRD	SEVENT
0 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	UP	SUBSCRIBER GROU	ITY-SIXTH	SEVEN	JP	SUBSCRIBER GRO	TY-FIFTH	SEVEN
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\Box	0.00		<u>l</u>	Total DSEs	0.00			Total DSEs
<u>) </u>		-						
_	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Broup	Gross Receipts Third G

ME OF OWNER OF CABLE SYSTEM: ONE, INC.	SYSTEM ID# 023026	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SU		
SEVENTY-SEVENTH SUBSCRIBER GROUP SEVENTY-E TY/ AREA 0 COMMUNITY/ AREA	EIGHTH SUBSCRIBER GROUP 0	9
		Computation
GN DSE CALL SIGN DSE CALL SIGN D	OSE CALL SIGN DSE	of
		Base Rate F and
		Syndicate
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eipts First Group \$ 0.00 Gross Receipts Second G	roup \$ 0.00	
Fee First Group \$ 0.00 Base Rate Fee Second G	roup \$ 0.00	
SEVENTY-NINTH SUBSCRIBER GROUP EIGH	HTIETH SUBSCRIBER GROUP	
TY/ AREA 0 COMMUNITY/ AREA	Λ.	
OOWNOWN TARKEA	0	
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				TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	'-SECOND	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	EIGH COMMUNITY/ AREA
Computati				COMMONT IT AREA				COMMONT IT AILEA
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-	•							EIGH ⁻
	JP	SUBSCRIBER GROU		EIGHT	JP			EIGH ⁻
	JP 0		/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
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	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	/-FOURTH	EIGHT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	EIGH' COMMUNITY/ AREA
	DSE	SUBSCRIBER GROU	DSE	EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE DSE	EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs
	DSE O.00	SUBSCRIBER GROU	DSE	EIGHT COMMUNITY/ AREA CALL SIGN	DSE O.00	CALL SIGN	DSE DSE	EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs
	DSE O.00	SUBSCRIBER GROU	DSE Group	EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE DSE	EIGHT COMMUNITY/ AREA CALL SIGN

Name	YSTEM ID# 023026	S'			.	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	Y-EIGHTH	EIGHT	JP	SUBSCRIBER GRO	SEVENTH	EIGHTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

0 9 Computation		IBER GROUP	SLIBSCB					
<u></u>	LID			TE FEES FOR EACH		COMPUTATION OF		
<u></u>		SUBSCRIBER GROU	NINTIETH			SUBSCRIBER GRO	ΓΥ-NINTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	UP	SUBSCRIBER GROU	'-SECOND	NINET	JP	SUBSCRIBER GRO	TY-FIRST	NINE
0	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 023026	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	'-FOURTH			SUBSCRIBER GRO	ry-third	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	TY-SIXTH	NINE	JP	SUBSCRIBER GRO	TY-FIFTH	NINE
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

Name	023026	S				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
٥	IP	SUBSCRIBER GROU	Y-EIGHTH	NINET		SUBSCRIBER GRO	SEVENTH	
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	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 Gr
	IP	SUBSCRIBER GROU	NDREDTH	ONE HU	UP	SUBSCRIBER GRO	TY-NINTH	NINET
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	023026	S'			· 	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
0	IP	SUBSCRIBER GROU	SECOND	ONE HUNDRED	JP	SUBSCRIBER GRO	ED FIRST	ONE HUNDRE
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	FOURTH	ONE HUNDRE	JP	SUBSCRIBER GRO	D THIRD	ONE HUNDRE
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	023026	S			•	LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
•	JP	SUBSCRIBER GROU	RED SIXTH	ONE HUNDF	JP	SUBSCRIBER GROU	ED FIFTH	ONE HUNDRE
9 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		ļ	Total DSEs	0.00		<u> </u>	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	D EIGHTH	ONE HUNDRE	JP	SUBSCRIBER GROU	SEVENTH	ONE HUNDRED S
			0		OMMUNITY/ AREA			
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1	0.00			Total DSEs	0.00			Total DSEs
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•		e	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	0.00	•	Group	Gross recorpts rounti				·

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		TE FEES FOR EACH				
1 SUBSCRIBER GROUP 0 9	ו IENTH	ONE HUNDRI COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	ED NINTH	ONE HUNDR COMMUNITY/ AREA
Computat		COMMONT IT AREA				COMMONITITY AREA
CALL SIGN DSE of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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\$ 0.00	Gross Receipts Second Group \$ 0.00		\$ 0.00		oss Receipts First Group \$	
\$ 0.00	d Group	Base Rate Fee Second	0.00	\$	Group	ase Rate Fee First G
1 SUBSCRIBER GROUP	TWELVTH	ONE HUNDRED	JP	SUBSCRIBER GRO	LEVENTH	ONE HUNDRED E
0	COMMUNITY/ AREA 0		0			OMMUNITY/ AREA
CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs

R EACH SUBSCRIBER GROUP				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
ED FOURTEENTH SUBSCRIBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL
Δ	JRTEENTH	ONE HUNDRED FOL	JP	SUBSCRIBER GROU	RTEENTH	ONE HUNDRED THIS
/ AREA 0 Computation		COMMUNITY/ AREA	0			COMMUNITY/ AREA
	1	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee						
and						
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0.00	•	Total DSEs	0.00		-	Total DSEs
ts Second Group \$ 0.00	nd Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
se Second Group \$ 0.00	nd Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
DRED SIXTEENTH SUBSCRIBER GROUP	SIXTEENTH	ONE HUNDRED S	JP	SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
/ AREA0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		Total DSEs	0.00		<u> </u>	Total DSEs
0.00						
	n Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

Name	023026								
				TE FEES FOR EACH					
9		SUBSCRIBER GROUP	GHTEENTH			SUBSCRIBER GROUP	ENTEENTH		
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			otal DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	iroup	Base Rate Fee First G	
	JP	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED T	JP	SUBSCRIBER GRO	NTEENTH	ONE HUNDRED NI	
	0	COMMUNITY/ AREA 0			H				
	0			İ	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	İ	DSE	CALL SIGN	DSE	CALL SIGN	
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	DSE			COMMUNITY/ AREA	DSE		DSE	CALL SIGN	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 023026	Name
BL	OCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	ITY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP)	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			scriber group	as shown in the boxe	es above.	\$		

Computation			BASE RA		00144	
OMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE Of Computation of	NTY-SIXTH			COMI OTATION OF	. <u>OCK</u> A: (BL
CALL SIGN DSE CALL SIGN DSE of		ONE HUNDRED TWE	1	SUBSCRIBER GROUP	ITY-FIFTH	ONE HUNDRED TWEN
CALL SIGN DSE CALL SIGN DSE of		COMMUNITY/ AREA	0			COMMUNITY/ AREA
Base Rate Fee	1	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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tal DSEs 0.00		Total DSEs	0.00			Total DSEs
oss Receipts Second Group \$ 0.00	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
se Rate Fee Second Group \$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
NE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN		SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
OMMUNITY/ AREA		COMMUNITY/ AREA	0			COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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tal DSEs 0.00		Total DSEs	0.00			Total DSEs
	Craun			•		
oss Receipts Fourth Group \$ 0.00	i Group	Gross Receipts Fourtr	0.00	\$	roup	Gross Receipts Third G
	Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S'	YSTEM ID# 023026	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED TWEN	TY-NINTH	SUBSCRIBER GROUP)	ONE HUNDRED	THIRTIETH	I SUBSCRIBER GROUP		^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	and Syndicated Exclusivity
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								Base Rate Fee
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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	
3ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED THIR	TY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED THIRT	Y-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	<u> </u>		0.00	Total DSEs	1		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 base rat	e fees for each subsc		as shown in the boxes a		\$		

Name	7STEM ID# 023026	SY				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9	_	SUBSCRIBER GROUP	Y-FOURTH			SUBSCRIBER GROUP	RTY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	RTY-SIXTH	ONE HUNDRED THIS	JP	SUBSCRIBER GRO	TY-FIFTH	ONE HUNDRED THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	-	Group		0.00	\$	Group	
		\$	Group	Total DSEs Gross Receipts Fourth		\$	Group	Total DSEs Gross Receipts Third G

Name	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP										
9		SUBSCRIBER GROUP	TY-EIGHTH			SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED THIRTY			
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA			
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
Base Rate F											
and		-					<u></u>				
Syndicate Exclusivit	<u></u>	-					<u></u>				
Surcharge		-					<u></u>				
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Distant							<u> </u>				
Stations		 									
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	0.00			Total DSEs	0.00			otal DSEs			
	Gross Receipts Second Group \$ 0.00		0.00	teceipts First Group \$ 0.00		Gross Receipts First G					
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	iroup	ase Rate Fee First G			
	OUP 0	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED	JP	SUBSCRIBER GRO	TY-NINTH	NE HUNDRED THIR			
		COMMUNITY/ AREA 0		0			COMMUNITY/ AREA				
	DSE										
	DOL	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
	BOL	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
	502	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
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		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
	0.00	CALL SIGN	DSE	Total DSEs	0.00	CALL SIGN	DSE				
		CALL SIGN		Total DSEs	0.00	CALL SIGN		Total DSEs			
	0.00							Total DSEs Gross Receipts Third			

1 -	YSTEM ID# 023026					_E 3131EW.	R OF CABL	CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
)	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED FOR)	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED FOR
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee								
and								
Syndicated								
Exclusivity								
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-	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 Gi
)	SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FOR)	SUBSCRIBER GROUP	TY-THIRD	ONE HUNDRED FOR
	COMMUNITY/ AREA 0		0			COMMUNITY/ AREA		
	<u> </u>			COMMUNITY/ AREA				
<u>.</u>		I CALL SIGN	DSF		DSF	CALL SIGN	DSF	CALL SIGN
-	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
	DSE	CALL SIGN		CALL SIGN		CALL SIGN		CALL SIGN CALL SIGN Total DSEs Gross Receipts Third G

Name	YSTEM ID# 023026	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION O	OCK A: (BL
		SUBSCRIBER GROUP	RTY-SIXTH	ONE HUNDRED FC		SUBSCRIBER GROUP	RTY-FIFTH	ONE HUNDRED FOR
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
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	0.00			Total DSEs	0.00		<u> </u>	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR		SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FORTY-
	COMMUNITY/ AREA 0		0			COMMUNITY/ AREA		
+	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	<u>s</u>	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023026								
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL	
	JP	SUBSCRIBER GROU	FIFTIETH	ONE HUNDRED	ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP				
Computation	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
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1									
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP				ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP				
	COMMUNITY/ AREA 0			0		COMMUNITY/ AREA			
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 	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	<u>s</u>	Group	Total DSEs Gross Receipts Third G	

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FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 023026 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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