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										
B	rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID	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									
	CABLE ONE, INC.										
				02333020182 023330 2018/2							
	210 E. EARLL DRIVE PHOENIX, AZ 85012-2626										
С	INSTRUCTIONS: In line 1, give any business or trade names used to it names already appear in space B. In line 2, give the mailing address of										
System	1 IDENTIFICATION OF CABLE SYSTEM:										
	MAILING ADDRESS OF CABLE SYSTEM: 3201 TOWER DRIVE (Number, street, rural route, apartment, or suite number) PRESCOTT, AZ 86306 (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	PRESCOTT	AZ									
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.								
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#							
Sample	Alda	MD	Α	1							
	Alliance	MD	В	2							
	Gering	MD	В	3							

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

FORM SAJE. PAGE 10.			OVOTEN ID#								
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#								
CABLE ONE, INC.			023330								
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#	_							
PRESCOTT	AZ			First							
CHINO VALLEY	AZ			Community							
DEWEY	AZ										
HUMBOLDT	AZ										
MAYER	AZ										
PAULDEN	AZ			See instructions for							
PRESCOTT VALLEY	AZ			additional information on alphabetization.							
YAVAPAL DEGOCT INDIAN TRIPE	AZ			on alphabetization.							
YAVAPAI PRESCOTT INDIAN TRIBE	AZ										
				Add rows as necessary.							

Name CABLE ONE, INC.

SYSTEM ID#

023330

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.

BL	OCK 1		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE
Residential: • Service to first set	10,769	\$	40.00	BULK RES.	4,492	\$	12.00
Service to additional set(s)FM radio (if separate rate)							
Motel, hotel	21	\$	9.00				
Commercial	343	\$	40.00				
Converter							
Residential						[<u>.</u>	
Non-residential							

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

		BLOCK 2							
CATEGORY OF SERVICE	R	ATE	CATEGORY OF SERVICE		CATEGORY OF SERVICE	R	ATE		
Continuing Services:			Installation: Non-residential						
• Pay cable	\$	17.00	Motel, hotel	\$	90.00		EXPANDED BASIC	\$	40.00
 Pay cable—add'l channel 			Commercial	[
Fire protection			• Pay cable			ĺ			
Burglar protection			Pay cable-add'l channel			ĺ			
Installation: Residential			Fire protection						
First set	\$	90.00	Burglar protection			ĺ			
 Additional set(s) 	\$	18.00	Other services:			ĺ			
 FM radio (if separate rate) 			Reconnect	\$	30.00	ĺ			
Converter			Disconnect			ĺ			
			Outlet relocation	\$	30.00	ĺ			
			 Move to new address 	\$	90.00	ı			
						ı			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 023330 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) **KAET** 8 Ε Yes TEMPE, AZ **KASW** 49 ı No PHOENIX, AZ See instructions for additional information **KAZT** 7 ı No PHOENIX, AZ on alphabetization. **KNXV** Ν No 15 PHOENIX, AZ **KPAZ** 20 ı No PHOENIX, AZ KPHO-DT1 17 Ν No PHOENIX, AZ **KPHO-DT2** N-M 17 No PHOENIX, AZ **KPNX** Ν 12 No MESA, AZ **KPPX** 51 ı No PHOENIX, AZ **KTAZ** 39 ı No PHOENIX, AZ KTVK 24 ı No PHOENIX, AZ **KTVW** 33 No PHOENIX, AZ ı **KUTP** 26 ı No PHOENIX, AZ KAZT-2 7 I-M No PHOENIX, AZ **KSAZ** 10 Τ No PHOENIX. AZ I-M KTVK-2 24 No PHOENIX, AZ KTVK-3 24 I-M No PHOENIX, AZ KPNX-3 12 N-M No MESA, AZ

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				023330	
PRIMARY TRANSMITTE	RS: TELEVISION	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream	system during toons in effect on the constant of the constant	ne accounting In June 24, 198 4), or 76.63 (r d in the next r respect to any ations, or auth G—but do list itiute basis. In the sta erning substit sign. Do not r in a station acc	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the ation was carried ute basis station eport origination cording to its ov	(1) stations carried carriage of cert 1(e)(2) and (4))]; as carried by your case Special Statement both on a substitute, see page (v) on program service er-the-air designal	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multi-	G Primary Transmitters: Television
WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servic Column 5: If you had cable system carried the carried the distant static For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the	e channel number. For example extern carried the in each case we entering the least), "E" (for noise terms, see ation is outside ce area, see praye entered "Yne distant staticion on a part-tii ion of a distant entered into on a primary transsimulcasts, alsuree categories e location of ea	per the FCC he, WRC is Chane station. Whether the station whether the station of the commercial page (v) of the discount of the local service on during the same basis because multicast streen or before Jumitter or an aspect of the commercial of t	as assigned to annel 4 in Wash ation is a network), "N-M" (I educational), control of the general instructive area, (i.e. "or general instruct 4, you must contaccounting period ause of lack of a sam that is not some 30, 2009, be association repreyou carried the of the general in U.S. stations,	the television statington, D.C. This ork station, an indefor network multion "E-M" (for noncotions located in the distant"), enter "Ye ions located in the mplete column 5, and. Indicate by enactivated channel is ubject to a royalty etween a cable system in the prima channel on any of instructions located list the community.	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
Note: If you are utilizing		nnel line-ups,	use a separate	•	channel line-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
KPNX-4	12	N-M	No		MESA, AZ	
KAZT-4	7	I-M	No		PHOENIX, AZ	
KPNX-2	12	N-M	No		MESA, AZ	

LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#				
CABLE ONE, II					023330	Name			
PRIMARY TRANSMITT	ERS: TELEVISIO	ON							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program									
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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	(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.						T				
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name				
CABLE ONE, IN	NC.				023330	Hamo				
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-levision in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 Lefter "N" (for network), "N-M" (for network multicast), "" (for independent), "-M" (for independent multicast), "E" (for noncom										
Note: If you are utilizing	ig multiple char	nnei iine-ups,	use a separate	space G for each	channel line-up.					
		CHANN	EL LINE-UP	AC						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					
						1				
	+	 		· 	···	1				

FORM SA3E. PAGE 3.						1				
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Namo				
CABLE ONE, II	NC.				023330	Nume				
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 pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "l" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational instructions located in the paper SA3 form. Colum										
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.					
		CHANN	EL LINE-UP	AD						
1. CALL 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.				023330	
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 eac each multicast stream cast stream as "WETA WETA-simulcast).	system during to ions in effect or 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and also in space only on a subsum and also in space only on a subsum attack of the station's call associated with -2". Simulcast	ne accounting n June 24, 198 4), or 76.63 (r d in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the sta erning substit sign. Do not r n a station acc streams must	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried ute basis station report origination coording to its own be reported in o	(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 er-the-air designation of the column 1 (list each	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in	G 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 servi 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	existem carried the in each case we entering the lecast), "E" (for noise terms, see lation is outside ce area, see parave entered "You have entered "You have in a distant station of a distant entered into on a part-tilicion of a distant entered into on a primary transismulcasts, also ince categories de location of ea Canadian statio	ne station. whether the stater "N" (for no commercial page (v) of the the local servage (v) of the es" in column on during the same basis becamulticast streen or before Jumitter or an act of enter "E". If the see page (v) ch station. For no, if any, given	ation is a netwo etwork), "N-M" ('I educational), o e general instructive area, (i.e. "o general instructive, you must corrusce of lack of a sam that is not some 30, 2009, be association repreyou carried the of the general in U.S. stations, e the name of the	ork station, an inder for network multicor "E-M" (for noncoctions located in the distant"), enter "Ye ions located in the mplete column 5, so do. Indicate by entictivated channel coublect to a royalty stween a cable system in the primary channel on any of instructions locate list the community with	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper because it is the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter which the station is identifed.	
-		CHANN	EL LINE-UP	AE		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						1		
LEGAL NAME OF OWNE		'STEM:			SYSTEM ID#	Namo		
CABLE ONE, IN	C.				023330			
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 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), "E" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E								
Note: If you are utilizing	g multiple char	inel line-ups,	use a separate	space G for each	channel line-up.	-		
		CHANN	EL LINE-UP	AF				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						1		
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Namo		
CABLE ONE, IN	IC.				023330	Hamo		
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 associated with a station according to its over-the-air designation. For example, erport 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 i								
Note: If you are utilizin	g multiple char	nnel line-ups,	use a separate	space G for each	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			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWI	NER OF CABLE SY	YSTEM:			SYSTEM ID#	Name
CABLE ONE, I	NC.				023330	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
PRIMARY TRANSMITT In General: In space carried by your cable: FCC rules and regular 76.59(d)(2) and (4), 7 substitute program ba Substitute Program ba Substitute Basis: basis under specifc • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the si planation of local serv Column 5: If you h cable system carried the carried the distant sta For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these ti Column 6: Give th	ERS: TELEVISIO G, identify even system during ti tions in effect or 6.61(e)(2) and (sis, as explaine Stations: With In CC rules, regular only on a subs and also in span formation concorn. In station's call It associated with A-2". Simulcast It is in each case to y entering the le cast), "E" (for ne ese terms, see tation is outside ice area, see pa lave entered "Yi the distant static tion on a part- tion on a part- tion on a primary trans simulcasts, also hree categories e location of ea Canadian static	y television st he accounting in June 24, 194, or 76.63 (i 4), or 76.63 (i 4), or 76.63 (i respect to any ations, or auth G—but do lis- titute basis. ace I, if the sta- terning substiff sign. Do not r h a station acc streams must beer the FCC h e, WRC is Cha- ne station. whether the state or whether the state "N" (for no oncommercial page (v) of the tes" in column on during the case in multicast stream on the case of the c	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the station was carried to the station was carried to the period of the station was assigned to the station is a network of the station was assigned to the stational, the stational, the stational was assigned in the stational was accounting period the station was assigned to the station of the station repression was assigned to the stational was assigned to the sta	(1) stations carried carriage of cert 1(e)(2) and (4))]; is carried by your of the Special Statement of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statington, D.C. This park station, an indefor network multion "E-M" (for noncetions located in the distant"), enter "You in the column 5, and Indicate by enactivated channel subject to a royalty extended to a royalty extended to a royalty extended to any of instructions located in the community with the carried t	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel ependent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing try transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is identifed.	G Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	EL LINE-UP 4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023330	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Passis Subasis under specifc FC • Do not list the station was carried • List the station here, basis. For further in the paper SA3 fc Column 1: List each multicast stream cast stream as "WETA weTA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi. For the meaning of the Column 4: If the st planation of local serv. Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	ers: TELEVISIO G, identify even system during the ions in effect or 6.61(e)(2) and (sist, as explaine stations: With a here in space only on a substand also in spations and also in spations and also in spations are channel numbers. Simulcast: e channel numbers e channel numbers e channel numbers e channel numbers es terms, see pation is outside ce area, see pation is outside ce area, see pation of a distant station on a partition on a partition of a distant at entered into on a primary trans simulcasts, also aree categories e location of ea	y television standard accounting in June 24, 194, or 76.63 (in do 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 serve and in column in the local serve age (v) of the local serve in column in the local serve in column in during the account in the local serve in column in during the account in the local serve in column in the local serve in column in during the account in the local serve in column in the local serve in th	period, except period, except period, except period, except all, permitting the eferring to 76.6 paragraph. I distant stations orizations: I it in space I (the tition was carried ute basis station eport origination cording to its own be reported in the effect of an angle I was assigned to annel 4 in Wash ation is a network), "N-M" (leducational), continued a general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, or lack of a sam that is not some 30, 2009, be association repression of the general in the of the general instructive area of the general instructive area.	(1) stations carried carriage of cert 1(e)(2) and (4))]; is carried by your of the Special Statement of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statington, D.C. This park station, an indefor network multion "E-M" (for noncetions located in the distant"), enter "You in located in the plete column 5, and Indicate by enactivated channel subject to a royalty extended to any of instructions located in the community of the primal channel on any of instructions located list the community is the community of the primal channel on any of instructions located list the community is the service of the community of the primal channel on any of instructions located list the community is serviced to the community of the primal channel on any of instructions located list the community is serviced by the carried the community of the primal channel on any of instructions located list the community is the carried the carr	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program tent and Program Log)—if the situte basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel espendent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnei iine-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	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				023330	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast)							
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	ı	CHANN	EL LINE-UP	AJ			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				023330	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here, space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for indep						
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-		CHANN	EL LINE-UP	ΔK	·	
	o DIOAOT	1	1		a LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
01014	NUMBER	STATION	,	(If Distant)		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OW	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, I	NC.				023330	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis: basis under specific Found Is the station was carried List the station was carried List the station here, basis. For further in in the paper SA3 fc Column 1: List eareach multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the siplanation of local serve Column 5: If you he cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these tecolumn 6: Give the	G, identify even system during the tions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(y television standard page (v) of the local serving page (v) of th	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the stion was carried the period of the stion was carried to the stion was carried to the period of the stion was station to the period of the stion was assigned to the stion is a network of the stion was assigned to the stion of the stions, in the stion of the stion of the stions, as the stion of the stion of the stion of the stions, as the stion of the stion of the stions, as the stion of the stion of the stion of the stion of the stions, as the stion of the	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on program services the television statification, D.C. This work station, an indefor network multicute of "E-M" (for noncontrolled in the special state of the service of the state of the st	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
		CHANN	EL LINE-UP	ΔI		
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.				023330	
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: 1 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 1 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as 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						
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		CHANN	EL LINE-UP	AM		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Namo
CABLE ONE, IN	NC.				023330	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 as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately, for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network). "N-M" (for network multicast), "F" (for independent), "I-M" (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational mult						
Note: If you are utilizing	ng multiple char	nnei iine-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AN		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Namo
CABLE ONE, II	NC.				023330	Nume
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Passis Subasis under specifc FC • Do not list the station was carried • List the station here, basis. For further in the paper SA3 fc Column 1: List each multicast stream cast stream as "WETA weTA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi. For the meaning of the Column 4: If the st planation of local serv. Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	ers: TELEVISIO G, identify even system during the ions in effect or 6.61(e)(2) and (sist, as explaine stations: With a here in space only on a substand also in spations and also in spations and also in spations are channel numbers. Simulcast: e channel numbers e channel numbers e channel numbers e channel numbers es terms, see pation is outside ce area, see pation is outside ce area, see pation of a distant station on a partition on a partition of a distant at entered into on a primary trans simulcasts, also aree categories e location of ea	y television standard accounting in June 24, 1984), or 76.63 (rd d in the next prespect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the local serve and the local serve age (v) of the service in column and uning the service in or before Junitter or an assis became the station. In the station in during the service in or before Junitter or an assis became the station. In the service in or before Junitter or an assis became the service in or before Junitter or an assis became the service in or before Junitter or an assis became the service in or before Junitter or an assis became the service in the service in or before Junitter or an assis became the service in the serv	period, except period, except period, except period, except all, permitting the eferring to 76.6 paragraph. I distant stations orizations: I it in space I (the tition was carried ute basis station eport origination cording to its own be reported in the effect of an angle I was assigned to annel 4 in Wash ation is a network), "N-M" (leducational), continued a general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, or lack of a sam that is not some 30, 2009, be association repression of the general in the of the general instructive area of the general instructive area.	(1) stations carried carriage of cert 1(e)(2) and (4))]; is carried by your of the Special Statement of both on a substitute, see page (v) of the seed of the seed of the television statistington, D.C. This work station, an indefer network multion "E-M" (for noncottons located in the seed of the television statistical of the seed	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). he paper SA3 form. es". If not, enter "No". For an ex- expaper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnei iine-ups,	use a separate	space G for each	cnannei line-up.	
		CHANN	EL LINE-UP	AO		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name					
CABLE ONE, INC. 023330						
PRIMARY TRANSMITTERS: TELEVISION						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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 the paper in the pa	G 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 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 cha						
CHANNEL LINE-UP AP						
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF (Yes or No) CARRIAGE (If Distant) 6. LOCATION OF STATION						

FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023330	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Passis Subasis under specifc FC • Do not list the station was carried • List the station here, basis. For further in the paper SA3 fc Column 1: List each multicast stream cast stream as "WETA weTA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi. For the meaning of the Column 4: If the st planation of local serv. Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	ers: TELEVISIO G, identify even system during the ions in effect or 6.61(e)(2) and (sist, as explaine stations: With a here in space only on a substand also in spations and also in spations and also in spations are channel numbers. Simulcast: e channel numbers e channel numbers e channel numbers e channel numbers es terms, see pation is outside ce area, see pation is outside ce area, see pation of a distant station on a partition on a partition of a distant at entered into on a primary trans simulcasts, also aree categories e location of ea	y television standard accounting in June 24, 1984), or 76.63 (rd d in the next prespect to any ations, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the local serve and the local serve age (v) of the service in column and uning the service in or before Junitter or an assis became the station. In the station in during the service in or before Junitter or an assis became the station. In the service in or before Junitter or an assis became the service in or before Junitter or an assis became the service in or before Junitter or an assis became the service in or before Junitter or an assis became the service in the service in or before Junitter or an assis became the service in the serv	period, except period, except period, except period, except all, permitting the eferring to 76.6 paragraph. I distant stations orizations: I it in space I (the tition was carried ute basis station eport origination cording to its own be reported in the effect of an angle I was assigned to annel 4 in Wash ation is a network), "N-M" (leducational), continued a general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, or lack of a sam that is not some 30, 2009, be association repression of the general in the of the general instructive area of the general instructive area.	(1) stations carried carriage of cert 1(e)(2) and (4))]; is carried by your of the Special Statement of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statington, D.C. This park station, an indefor network multion "E-M" (for noncetions located in the distant"), enter "You in located in the plete column 5, and Indicate by enactivated channel subject to a royalty extended to any of instructions located in the community of the primal channel on any of instructions located list the community is the community of the primal channel on any of instructions located list the community is the service of the community of the primal channel on any of instructions located list the community is serviced to the community of the primal channel on any of instructions located list the community is serviced by the carried the community of the primal channel on any of instructions located list the community is the carried the carr	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel espendent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). the paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ttering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnei iine-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AQ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OW	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, I	NC.				023330	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute Basis basis under specifc F• Do not list the station station was carried • List the station here, basis. For further in the paper SA3 fc Column 1: List eaeach multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cable scolumn 3: Indicate educational station, by (for independent mult For the meaning of th Column 4: If the splanation of local serv Column 5: If you the cable system carried the distant state For the retransmis of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the carried the system and tion "E" (exempt). For explanation of these the Column 6: Give the cable signeration of these the Column 6: Give the carried the given the cable system and tion "E" (exempt). For explanation of these the carried the Given the cable system and tion "E" (exempt). For explanation of these the carried the Given the cable system and tion "E" (exempt). For explanation of these the carried the Given the cable system and tion "E" (exempt). For explanation of these the carried the Given the carried the	G, identify even system during the tions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(y television standard y television standard y television standard y television standard y televisions, or auth G—but do list titute basis. In the standard y television y tele	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in comparation in a sassigned to the station is a network ation is a network of the stational, on the stational of the stational of the stational of the stational of the special in the stations, the stations, the stations, the stations, the stations, the stations, the stations is a station of the special in the stations, the stations, the stations, the stations is a station of the stations, the stations is a station of the stations of the stations in the stational statio	(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 program services the television statistication, D.C. This work station, an indefor network multice or "E-M" (for noncontrolled in the state of the television statistication of the state of the television statistication, p.C. This work station, an indefor network multice or "E-M" (for noncontrolled in the state of the state o	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AD	·	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023330	
PRIMARY TRANSMITTI	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 for Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consistence of	ne accounting a June 24, 1944), or 76.63 (r d in the next prespect to any litions, or auth G—but do list litute basis. Ince I, if the staterning substite sign. Do not reast a station accepted to the state of the s	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 ow- be reported in of as assigned to	(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 cute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- on stream separately; for example	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 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 cha						
		CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	 				 	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				023330		
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 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 are 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 with which the station is licensed by the FCC. For Mexican or Ca							
		CHANN	EL LINE-UP	AT			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWNE		STEM:			SYSTEM ID#	Name
CABLE ONE, IN	С.				023330	
PRIMARY TRANSMITTER	RS: 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-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.						
Note: If you are utilizing	multiple chan	• •		<u> </u>	channel line-up.	
		CHANN	EL LINE-UP	AU		
1. CALL 2	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				023330	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
PRIMARY TRANSMITTERS: TELEVISION						
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	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	

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 023330 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 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC.				023330		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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.							
		CHANN	EL LINE-UP	AW			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
	•						
	•						

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2018/2		
LEGAL NAME OF OWNER OF CABLE ONE, INC.	CABLE SYST	ſEM:					SYSTEM ID# 023330	Name		
SUBSTITUTE CARRIAGI						and a sur		ı		
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.										
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?										
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.										
2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.										
5	SUBSTITUT	TE PROGRAM	1	1 1	EN SUBST		7. REASON FOR	ı		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. FROM	TIMES —	DELETION TO	ı		
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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#

023330

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
- 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."

CALL SIGN	WHEN	CARRIAGE O				CALL SIGN	WHEN	CARRIAGE C		
	DATE	FROM	OUR	S TO			DATE	FROM	IOUR	tS TO
			_						_	
					-					
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LEGA	SAJE. PAGE 7. LINAME OF OWNER OF CABLE SYSTEM: BLE ONE INC.		SYSTEM ID# 023330	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts)								
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: • Complete block 1, showing your minimum fee. • Complete block 2, showing whether your system carried any distant television stations. • If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. • If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
 If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below. If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below. If part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line 								
Block 2	Block DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in							
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	\$	10,312.55					
	schedule. If none, enter zero Line 3. Add lines 1 and 2 and enter here	\$	10,312.55					
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	\$	0.00 0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE. \$ 725.00 TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.							
	Add Lines 1, 2 and 3 of block 4 and enter total here	\$ (See page (i) of t	41,975.18 he	submitting the additional fees.				

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:	SYSTEM ID#							
Name	CABLE ONE, INC.		023330							
	CHANNELS									
M	Instructions: You must give	ve (1) the number of channels on which the cable system carried television broadcast	stations							
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
Channels	Enter the total number of channels on which the cable									
		broadcast stations	21							
		_								
	2. Enter the total number of	F								
	•	m carried television broadcast stations	294							
	4.14.110.110.104.404.404.404.110.110.110									
N	INDIVIDUAL TO BE CON	TACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual								
	we can contact about this									
Individual to										
Be Contacted for Further	Name Emerson Ye	earwood Telephone	602-364-6195							
Information	Name Emolocii I	releptione (JOZ 004 0100							
	Address 210 E. EARI	LL DRIVE								
		al route, apartment, or suite number)								
		AZ 85012-2626								
	(City, town, state, zi	p)								
	Email eme	erson.yearwood@cableone.biz Fax (optional) 602-364-6	3013							
	CERTIFICATION (This state	ement of account must be certifed and signed in accordance with Copyright Office reg	ulations.							
0										
Certifcation	ullet I, the undersigned, hereby	certify that (Check one, but only one, of the boxes.)								
			. D							
	(Owner other than corp	oration or partnership) I am the owner of the cable system as identifed in line 1 of space	B; Of							
	(Agent of owner other t	han corporation or partnership) I am the duly authorized agent of the owner of the cable	e system as identified							
		nd that the owner is not a corporation or partnership; or	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	(Officer or partner) I an	n an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as ov	wner of the cable system							
	in line 1 of space B.									
	I have examined the staten	nent of account and hereby declare under penalty of law that all statements of fact contain	ed herein							
	are true, complete, and corrected [18 U.S.C., Section 1001(19	ect to the best of my knowledge, information, and belief, and are made in good faith.								
	[10 0.0.0., 00000111001(10	55/1								
	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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus								
			companinty settings.							
	Туре	d or printed name: RAYMOND STORCK								
	Title:									
		(Title of official position held in corporation or partnership)								
	Date	: August 28, 2019								
	Date	. 10guot 20, 2010								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CABLE ONE, INC.	023330	- Tunio
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 secribers 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 on the secondary made by satellite carriers to satellite dish owners? X NO	or the basic not include sub- section 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or 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 as: 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 giver 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	

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 DSFs	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	DSE SCHEDULE. PAGE 11. (CONTINUED)										
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
I	CABLE ONE, INC. 023330										
	SUM OF DSEs OF CATEGORY "O" STATIONS:										
	Add the DSEs of each station										
	Enter the sum here and in line		0.25								
	I										
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5										
_	of space G (page 3).										
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-										
of DSEs for	mercial educational station, give the DSE as ".25."										
Category "O"			CATEGORY "O" STATION		_						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	KAET	0.250									

Add rows as											
necessary.											
Remember to copy											
all formula into new											
rows.											

						······					
Ī				1		1					

Name	CABLE ONE	OWNER OF CABLE SYSTEM:					S	023330				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.											
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSFs						
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAC VALUE	F 5. TYPE		SE				
			÷		=	x	=					
			······································		=	x x						
						x						
			÷	:	=	x	=					
			÷ ÷		=	x x	=					
	Add the DSEs	s OF CATEGORY LAC S of each station. Im here and in line 2 of pa		nedule,	▶	0.00	<u>)</u>					
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferond to space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each start of the call sign of each start on October 19, 1976 (one or more live, nonnetwork). This figure should correst carter the number of days Divide the figure in column this is the station's DSE	itution for a pro as shown by the ork programs do number of live spond with the is in the calenda in 2 by the figu (For more infor	ogram that your system le letter "P" in column uring that optional carres, nonnetwork program information in space I ar year: 365, except in re in column 3, and girmation on rounding, s	was permitted 7 of space I); an lage (as shown by s carried in substance a leap year. We the result in cee page (viii) of	to delete under FCC rule d y the word "Yes" in column stitution for programs tha column 4. Round to no let the general instructions in	2 of t were deleted	rm).				
				BASIS STATION								
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	'S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE				
		÷		=			÷ -	=				
		:		=			÷	=				
		÷		=			÷	=				
		÷		=			-	=				
	Add the DSEs	of SUBSTITUTE-BASI of each station. Im here and in line 3 of page				0.00]					
5 Total Number of DSEs	number of DSE: 1. Number o 2. Number o	ER OF DSEs: Give the am s applicable to your system f DSEs from part 2 • f DSEs from part 3 • f DSEs from part 4 •		boxes in parts 2, 3, and	4 of this schedu	le and add them to provide	0.25 0.00 0.00	0.25				
							ļ.					

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

CABLE ONE, I		SYSTEM:					S	YSTEM ID# 023330	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 ar	nd complete pa	art 8, (page 16) of	the	6
			BLOCK A: T	ELEVISION M.	ARKETS				Computation of 3.75 Fee
_	1981?	eschedule—E C below.	OO NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7		gulations in	3.75 Fee
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SES .			
Column 1: CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Jui dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fune letter M below r Act of 2010.)	urther explana	tion of permitt	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station pre	ules and regued pursuant to as defined all educations of station (76.0 or DSE sched ant to individuationally carries (JHF station w	lations cited be to the FCC mand in 76.5(kk) (7 all station [76.565) (see paragule). Lall waiver of Fed on a part-ting grade-B of the footbase of the first state of	ne or substitute ba contour, [76.59(d)(ose in effect of 76.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 198), 76.61(b)(c),)) referring to 7 g to 76.61(d) randfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on 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	
KAET	С	0.25							
							<u> </u>		
							<u> </u>		
			1	l		1		0.25	
		В	I OCK C: CO	MPUTATION OF	F 3 75 FFF				
Line 1: Enter the	total number of						,	0.25	
Line 2: Enter the	sum of permitte	ed DSEs from	m block B abo	ove				0.25	
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.		0.00	
Line 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ne 4 by 0.0375	and enter su	ım here				X	-	partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DSI	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 023330 **BLOCK A: TELEVISION MARKETS (CONTINUED)** 6 3. DSE 1. CALL 2. PERMITTED 3. DSE 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 3. DSE SIGN BASIS SIGN BASIS SIGN BASIS Computation of 3.75 Fee

Name	CABLE ONE, IN		E SYSTEM:						S	923330 023330			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters												
	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 SIGN DSE PERIOD CARRIAGE DSE DSE												
7 Computation of the	1	"Yes," comple	ete blocks B and C	*	· pa	art 8 of the DSE sched	ule.						
Syndicated			BLOC	K A: MAJOR	TI	ELEVISION MARK	ET						
Exclusivity									0.4	10010			
Surcharge	l <u>—</u> * · ·	•		or television mai	ке	et as defned by section 7		rules in effect J	une 24,	1981?			
	Yes—Complete	blocks B and	IC.		_	No—Proceed to	part 8						
		·	F/Grade B Contou		_	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	ole system p						
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	rmitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE			
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE			
			-							-			
				-			 						
			-										
				<u>-</u>			ļ						
			TOTAL DSEs	0.00				TOTAL DS	SEs	0.00			

LEGAL NA		TEM ID# 023330	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	,897.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Exclusivity Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? \(\text{Y} \) 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 DSE		
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule.		
4a	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 DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	(CABLE ONE, INC.	023330
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.	
		Syndicated Exclusivity Surcharge.	
8 Computation of Base Rate Fee	6 was 6 In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of pachecked "Yes," use the total number of DSEs from part 5. lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. lar answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. lar answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bel	ow
		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?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	00_
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).	.25
	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). \$\frac{10,312.}{27,177.05}\$ C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. \$\frac{-}{-}\$	<u>55</u>
		D. Multiply line B by line C and enter here	
1		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
1		Base Rate Fee	10,312.55

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

	ONE, INC.	SYSTEM ID# 023330	Name
l l	ne figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4 A.	. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$		8
В	Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$		Computation of Base Rate Fee
C	. Multiply line B by 3.000 and enter here >		base Rate Fee
D	. Enter 0.00330 of gross receipts (the amount in section 1)		
E.	Subtract 4.000 from total DSEs (the figure in section 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	
	NT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadd reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chann		_
Space G.		·	9
receipts fro	I: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate feom subscribers located within the station's local service area, from your system's total gross receipts. To take a your must:		Computation of
exclusion,	you must: de all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant	to the same	Base Rate Fee and
station or t DSEs and	he same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for	e the number of	Syndicated Exclusivity Surcharge
-	dd up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. In portion of your cable system is located within the top 100 television market and the station is not exempt in	part 7 you must	for Partially
also compi	ute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B b le system is wholly located outside all major television markets, complete block A only.	, ,	Distant Stations, and
	entify a Subscriber Group for Partially Distant Stations		for Partially Permitted
	or each community served, determine the local service area of each wholly distant and each partially distant sta That community.	ation you	Stations
outside the	or each wholly distant and each partially distant station you carried, determine which of your subscribers were l e station's local service area. A subscriber located outside the local service area of a station is distant to that st oken, the station is distant to the subscriber.)		
Step 3: Div subscriber	vide your subscribers into subscriber groups according to the complement of stations to which they are distant group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note to have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Computingroups.	g the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sy	stem's subscriber	
	ne communities/areas represented by each subscriber group.		
subscriber	call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to a s in the group.	II of the	
	stem is located wholly outside all major and smaller television markets, give each station's DSE as you gave it	in parts 2, 3,	
2) any port	is schedule; or, tion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in If this schedule.	block B,	
•	OSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general per SA3 form.	instructions	
page. In m	a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the naking this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the think the group's complement of stations and total gross receipts from the subscribers in that group). You do not ne	nat is, the total	

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

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 023330 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.

LEGAL NAME OF OW CABLE ONE, IN		LL 3131EIVI.					023330	Name
				TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO		
000000000000000000000000000000000000000		SUBSCRIBER GRO			9			
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	0	Computatio		
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	
	t Croup	•	0.00		and Croup	•	0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	cona Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE				
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 Fou	ırth Group	\$	0.00	
						_		
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
				11				
3ase Rate Fee: Add	d the base ra	te fees for each subs	scriber aroun	as shown in the boxe	s above.			
Enter here and in blo	ock 3, line 1,	space L (page 7)	. 3	, 2 3/10	· ·	\$	0.00	

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 023330	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	Α		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
					····			
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	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					····			
					····			
					····			
					····			
					····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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	o as shown in the boxes	s above.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 023330	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							<u></u>	Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs	1.0		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	UP 0	
COMMONT IT AREA				COMMONT IT AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs Cross Pacaints Third	d Group	<u> </u>	0.00	Total DSEs	th Group	e	0.00	
Gross Receipts Third	а споир	\$	0.00	Gross Receipts Four	ui Gioup	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	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 OWNE CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023330	Name
				TE FEES FOR EAC				
THIE COMMUNITY/ AREA	K TEENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	9
	T = = = =		T			II		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
						-		and
			······································	•	••••	-		Syndicated
								Exclusivity
		_						Surcharge
						-		for
								Partially
	·		<u>.</u>		·····	-		Distant Stations
	·		<u>.</u>		·····		<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 Sec	ond Group	\$	0.00	
FII	FTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	·		<u>.</u>			-		
		-	<u>.</u>			-		
		-				-		
			<u> </u>					
	·							
			 					
					••••	-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023330	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
SEVE	NTEENTH	SUBSCRIBER GRO		E	IGHTEENTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	_		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
						-		Surcharge
						-		for
						-		Partially Distant
	<u></u>					-		Stations
	···	H				-		Gtations
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	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	
NI	NTEENTH	SUBSCRIBER GRO)UP		TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>		<u></u>			-		
	<u></u>		<u></u>			-		
	···		···					
	<u>. </u>		<u></u>			-		
	<mark></mark>							
	<mark></mark>		<u></u>			-		
	<u></u>		<u></u>			-		
							····	
						1		
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 023330	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		II		SUBSCRIBER GRO	UP 0	9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	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
					<mark></mark>			
					····			
Total DSEs	<u> </u>		0.00	Total DSEs	<u> </u>	!!	0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
						<u>*</u>		
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
		SUBSCRIBER GRO		ii —		SUBSCRIBER GRO	UP 0	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-	-				
			·		····			
			·		····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Page Pate For This	d Crows	•	0.00	Page Pate Fee Fee	th Crous	•	0.00	
Base Rate Fee Third	и Отоир	\$	0.00	Base Rate Fee Four	ui Gioup	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	¢		
Linei neie and in Di	JON J, IIIIE I, S	space L (page 1,				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								Name
				TE FEES FOR EACH				
TWENT	ry-FIFTH	SUBSCRIBER GROU	JP 0	TWEN	ITY-SIXTH	SUBSCRIBER GROU	P 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
							<u> </u>	Syndicated Exclusivity
		-						Surcharge
								for
								Partially Distant
		-					<u> </u>	Stations
		-						
		<u> </u>						
							<u> </u>	
							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	EVENTH	SUBSCRIBER GROU		İ	Y-EIGHTH	SUBSCRIBER GROU	P 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u> </u>	
							<u></u>	
		-						
							<u> </u>	
							<u></u>	
		-						
	 							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC					
	TY-NINTH	SUBSCRIBER GRO		11		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	
	···		<mark>-</mark>		····			for	
		-						Partially	
								Distant	
								Stations	
			<u>.</u>				<u></u>	l	
			<u>-</u>				····	l	
	······································		<u> </u>		····			l	
								l	
								l	
Total DSEs			0.00	Total DSEs			0.00	1	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	İ	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
TUID	TV EIDST	SUBSCRIBER GRO	ID	TUIDI	TV SECONIC	SUBSCRIBER GROU	ID	l	
COMMUNITY/ AREA	11-11101	SOBSCINDEN GIVE	0	COMMUNITY/ AREA		O SOBSCINELIN GIVOR	0	1	
								l	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	l	
			<mark>.</mark>					l	
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			<u>.</u>					l	
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			<u>.</u>					l	
			<u>.</u>					l	
Total DSEs			0.00	Total DSEs			0.00	İ	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ	
								1	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	İ	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		l	

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023330	Name
В	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
THIR	TY-THIRD	SUBSCRIBER GRO		THIR	RTY-FOURTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
ONLE GIGIT	DOL	OALL GIGIT	DOL	OF ILLE GIGIT	BOL	ONEE GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
			<u></u>			-		for
	······································							Partially Distant
	···					-		Stations
	···		<u></u>					
						ļ		
Total DSEs			0.00	Total DSEs			0.00	
ross Receipts First 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	
THIR	TY-FIFTH	SUBSCRIBER GRO	UP	TI	HIRTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···							
	<mark></mark>		···					
	···		<u></u>					
	<mark></mark>							
	<mark></mark>		<mark></mark>				<u> </u>	
			<u></u>				<u></u>	
	···						····	
						 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	es above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023330	Name
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		ii 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 Exclusivity
			-	1		-		Surcharge
								for
								Partially
						-		Distant
	···	-		·	·····	-		Stations
						-		
Total DSEs			0.00	Total DSFa		11	0.00	
	`roun	•	0.00	Total DSEs	and Craun	•	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIR	TY-NINTH	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			-	1				
						-		
	···		·			-		
						-		
						-		
	···					-		
						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee 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 OWNE CABLE ONE, INC.	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
		COMPUTATION OF 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	
			<u>.</u>		<u>.</u>			Surcharge for	
								Partially	
								Distant	
								Stations	
					····	<u> </u>			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	TY-THIRD	SUBSCRIBER GRO		ii .		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>				
					····	-			
									
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$			

and and Syndicated Exclusivity Surcharge (and and and and and and and and and and		EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
COMMUNITY/ AREA										
CALL SIGN DES CALL SIGN DES CALL SIGN DES CALL SIGN DES Base Rate Fea First Group S 0.00 Gross Receipts First Group S 0.00 COMMUNITY/ AREA 0 COMMUNITY/ AREA			SUBSCRIBER GROU		11		1 SUBSCRIBER GROU		9	
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 CALL	COMMUNITY/ AREA			U	COMMUNITY/ AREA			U		
and and Syndicated Exclusivity Surcharge (a continue) and another stations and another stations are also as a continue of the stations and another stations are also as a continue of the stations and another stations are also as a continue of the stations and another stations are also as a continue of the stations and another stations are also as a continue of the stations and another stations are also as a continue of the stations and another stations are also as a continue of the stations and another stationary such as a continue of the stations and another stationary such as a continue of the stations and another stationary such as a continue of the stations and another stationary such as a continue of the stations and another stationary stations are also as a continue of the stations and another stationary stations are also as a continue of the stationary stations are also as a continue of the stationary stationary stationary stationary stations are also as a continue of the stationary stationary stations are also as a continue of the stationary st	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Syndicated Exclusivity Surcharge Stations Stati									Base Rate Fee	
Exclusivity In the part of th		<u></u>								
Surcharge for Partially Distant Stations Total DSEs Gross Receipts First Group Base Rate Fee First Group FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMU						<u></u>			-	
for Partially Distant Stations Total DSEs						···				
Distant Stations Total DSEs Gross Receipts First Group Base Rate Fee First Group FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL										
Stations Statio									_	
Total DSES			-							
Gross Receipts First Group Base Rate Fee First Group FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL							•		Stations	
Gross Receipts First Group Base Rate Fee First Group FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL										
Gross Receipts First Group Base Rate Fee First Group FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL			-							
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00										
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00										
Gross Receipts First Group Base Rate Fee First Group FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL	Total DSEs			0.00	Total DSFs		11	0.00		
Base Rate Fee First Group FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE						nd Group	\$			
FORTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN D		·								
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Gross Receipts Third Group \$ 0.00	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 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN			SUBSCRIBER GROU		iii —		1 SUBSCRIBER GROU			
Total DSEs	COMMUNITY/ AREA			0	COMMUNITY/ AREA					
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00			-							
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00					-		-			
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00										
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00										
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00										
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00						<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										
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						<u></u>				
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										
	Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	h Group	\$	0.00		
					П					
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); \$				riber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023330	Name
				ATE FEES FOR EAC			IID	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIT	DOL	OALL GIGIT	DOL	CALL GIGIT	DOL	OALL SIGIN	DOL	Base Rate Fee
								and
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						H		Exclusivity
	····		. 		·····	-	<u> </u>	Surcharge for
	···		<u>-</u>		•••••	<u> </u>		Partially
								Distant
		-	<u> </u>					Stations
			<u></u>		<u>.</u>	-		
	····		<u> </u>			-		
						H		
			<u></u>		•••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FII	FTY-FIRST	SUBSCRIBER GRO	UP	FIF	TY-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····	-	<u></u>		·····	-		
			-			-		
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	<u></u>		<u>- </u>		<u></u>		<u></u>	
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	<u></u>		<u>- </u>		<u></u>		<u></u>	
	····		<u>-</u>	·		 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxe	s above.	\$		

Name	YSTEM ID# 023330	S				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GRO	FIFT' COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	TY-THIRD	FIFT COMMUNITY/ AREA	
Computatio								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
Syndicated								
Exclusivity								
Surcharge								
for Partially								
Distant								
Stations								
						<u> </u>		
	0.00		<u> </u>	T / I DOE	0.00			T 4 1 DOF
	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 G
		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	····							
						-		
						ļ		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

CABLE ONE, INC.	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
				TE FEES FOR EAC					
FIFTY- COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	UP 0	9	
								Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee	
			-			-		and	
	···				•••••	-		Syndicated	
								Exclusivity	
								Surcharge	
	<mark></mark>				<u>.</u>	-		for	
	···					-		Partially Distant	
	···	-		·		-		Stations	
		=				-			
	<mark> </mark>								
	<mark></mark>			-	·····	<u> </u>			
Total DSEs			0.00	Total DSEs		Ш	0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
	•				•				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
FIF	TY-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						<u> </u>			
						 			
	···		•		•••••	-			
	<mark></mark>			-	·····	-			
		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 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# 023330								
				ATE FEES FOR EACH					
S COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	SIXT		SUBSCRIBER GROU	UP 0	9	
COMMUNITY AREA	·············		U	COMMUNITY/ AREA				Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
					<u></u>			and Syndicated	
								Exclusivity	
								Surcharge	
					<u></u>			for	
								Partially Distant	
								Stations	
		-							
									
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
S	IXTY-THIRD	SUBSCRIBER GROU	JP	SIXT	Y-FOURTH	SUBSCRIBER GROU	UP		
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
									
									
					<u></u>				
Total DSEs			0.00	Total DSEs		II	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		
Dana Bata E . A	4h a J	- for for and		an above in the	aha::-				
Enter here and in blo			mber group	as shown in the boxes	above.	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
				ATE FEES FOR EACH					
COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	JP 0	9	
COMMUNITY AREA			U	COMMUNITY AREA				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 Seco	nd Group	\$	0.00		
SIXTY	-SEVENTH	SUBSCRIBER GRO	UP	SIX	TY-EIGHTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	<u></u>	-	<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		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
	•	1				i.			
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# 023330	Name
В	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	TY-NINTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALLE GIGIT	502	OF ILL STORY	502	OF ILL OTOTY	502	ON ILL STOTA	502	Base Rate Fee
								and
								Syndicated
								Exclusivity
			<u></u>					Surcharge
			<mark></mark>				·····	for
			<u></u>		·····	-		Partially Distant
	····				·····	-		Stations
	•••••••••••••••••••••••••••••••••••••••		···		•••••	+		Otations
Total DSEs			0.00	Total DSEs			0.00	
			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	ITY-FIRST	SUBSCRIBER GRO)UP	SEVEN	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
	···					 		
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			<mark></mark>					
			<u></u>			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWI CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 023330	Name
	BLOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		1		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
	·····	-	····				····	Syndicated
								Exclusivity
								Surcharge
		_						for Partially
	·····			·				Distant
								Stations
	·····							
	·····		····				····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	NTY-FIFTH	SUBSCRIBER GRO	DUP	SEV	'ENTY-SIXTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····			·				
		_						
	·····		····	·	·····			
	·····				·····			
				1				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Doop Boto For The	Crown		0.00	Been Bets Fee F	rth Crown		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rın Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330							
				TE FEES FOR EAC				
SEVENTY-S COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GRO	UP 0	SEVER		SUBSCRIBER GROU	UP 0	9
	T 50=	T 0444 0404	T 505		1 505	II oar oor	505	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 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	
SEVEN'	TY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-		·····		<u> </u>	
							·····	
			•			-	····	
							·····	
			•				····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Four	rth Group	\$	0.00		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC.	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330							Name
				ATE FEES FOR EACH				
	ITY-FIRST	SUBSCRIBER GROU		III	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>							and
								Syndicated Exclusivity
	<u></u>					- 		Surcharge
		-						for
								Partially
	<mark></mark>							Distant Stations
	<u> </u>						<u></u>	Stations
								ı
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	<u></u>		ļ					ı
	<u> </u>						<u></u>	ı
Total DSEs		!	0.00	Total DSEs		-!-!	0.00	ı
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	ı
Gross Receipts First G	лоир	4	0.00	Gloss Neceipis Gecol	id Group	Ψ	0.00	ı
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	1
	TY-THIRD	SUBSCRIBER GROU		ii –	Y-FOURTH	SUBSCRIBER GROU	JP	ı
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
	<u> </u>							ı
								ı
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	<u></u>							ı
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	<u></u>							ı
	<u></u>							1
	<u>-</u>						<u> </u>	ı
								ı
Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	1
								ı
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	1
				ш				1
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		ı

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID# 023330	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	HTY-FIFTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		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
				· · · · · · · · · · · · · · · · · · ·				Exclusivity
								Surcharge
								for
								Partially
	···		<u></u>	·				Distant Stations
		-		·	·····			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	
EIGHTY-	SEVENTH	SUBSCRIBER GRO)UP	ii —		SUBSCRIBER GROU	UP	
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	
	Group	\$			irth Group	\$	_	
C. COO PROOFING THIRD	C.04P	<u>-</u>		l coo recorpto i ou	O. Jup	<u>*</u>	3.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
se Rate Fee Third (Group	ļ.		Total DSEs Gross Receipts Fou Base Rate Fee Fou	rth Group	\$ \$	0.00	

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023330	Name
				TE FEES FOR EAC				
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Of ILL OF OTT	502	O'ALL STOTA	502	OF ILL STOTE	502	OF ILLE STORY	502	Base Rate Fee
								and
								Syndicated
								Exclusivity
			<u></u>		·····	-		Surcharge for
	··				·····	-		Partially
						-		Distant
								Stations
			<u></u>			 		
	···				••••			
Total DSEs			0.00	Total DSEs	·		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GRO	DUP	NINE	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
	<u></u>				····			
			<u></u>			-		
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	<mark> </mark>							
	<mark></mark>				·····	-		
		H				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330							Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU		III		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
	<mark></mark>	-						Partially
	····				···			Distant Stations
								Stations
	<u></u>		ļ					
	····				····			
Total DSEs			0.00	Total DSEs		**	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
					г			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		ii -		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	····							
	<u></u>							
	····	-			···			
	<u></u>							
				-	····			
	····				····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
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	as shown in the boxes	above.	\$		

CABLE ONE, INC	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330							
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		ii .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<u></u>							Syndicated
			<u>.</u>	-			<u> </u>	Exclusivity Surcharge
				·		-		for
								Partially
								Distant
								Stations
								
	···	-	·		·····	-		
Total DSEs		_	0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GRO	UP	ONE H	IUNDREDTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u>.</u>			
	···						·····	
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		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 bloc			criber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.		E SYSTEM:				S	YSTEM ID# 023330	Name
				ATE FEES FOR EACH				
	ED FIRST	SUBSCRIBER GROU		II		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
					···			Surcharge
								for
								Partially
								Distant Stations
								Stations
								I
					 			
Total DSEs	-	!	0.00	Total DSEs		-	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	ED THIRD	SUBSCRIBER GROU		II		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	. 				 			
					 			
	·				 			
								I
	·-				···			I
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
	r	<u> </u> *	3.00			<u>L</u> *	3.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330							
		COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
	····		<u> </u>		····	-		Syndicated Exclusivity
	····		<u> </u>			-		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	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	ONE HUNDE	RED EIGHTH	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>			
			<mark></mark>					
						 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330							
				TE FEES FOR EAC				
ONE HUNDR COMMUNITY/ AREA	ED NINTH	SUBSCRIBER GRO		ii .		SUBSCRIBER GRO		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
			<u>.</u>		<u></u>		<u></u>	and Syndicated
		-		·		-		Exclusivity
								Surcharge
								for
								Partially 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		\$	0.00	Base Rate Fee Sec		\$	0.00	
	LEVENTH	SUBSCRIBER GRO		ii .		SUBSCRIBER GRO	UP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		<u>.</u>		·····	-		
			<u>-</u>			 		
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	···		<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 to	he base ra t	te fees for each subs	criber groun	as shown in the boxe	s above.			
Enter here and in bloc			0 1			\$		

CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 023330	Name	
				TE FEES FOR EACH					
ONE HUNDRED THIR COMMUNITY/ AREA	TEENTH	SUBSCRIBER GROU	IP 0	ONE HUNDRED FOL	JRTEENTH	SUBSCRIBER GROU	JP 0	9	
COMMONT TO AREA				COMMONT 17 AREA				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		Ц	0.00		
Gross Receipts First Gr	OUD	e	0.00	Gross Receipts Secon	nd Group	¢	0.00		
Gloss Receipts First Gr	oup	\$	0.00	Gloss Receipts Secon	iu Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00		
	TEENTH	SUBSCRIBER GROU		††	IXTEENTH	SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					<u> </u>		<u> </u>		
					·				
Total DSEs	<u>. </u>		0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00		
30	1-	·			- v =: r'				
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth	ı Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330									
				ATE FEES FOR EACH					
		SUBSCRIBER GROU		ii –		SUBSCRIBER GROU		9	
COMMUNITY/ ARE	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	
					···		<u></u>	Stations	
								I	
					<u></u>				
				-					
Total DSEs			0.00	Total DSEs		Ш	0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
	·				·				
Base Rate Fee First		\$	0.00	Base Rate Fee Secon		\$	0.00		
		SUBSCRIBER GROU		ii .		I SUBSCRIBER GROU			
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					 				
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$			

CABLE ONE, INC.		LE SYSTEM:				S	023330	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED TWE	NTY-SECOND	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	<mark></mark>		ļ					
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	<mark></mark>							
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 G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-			-	·····	
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	<u> </u>		······					
	<mark></mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee 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 OWNE		LE SYSTEM:				S	YSTEM ID# 023330	Name
				TE FEES FOR EAC	CH SUBSCE	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROU		††		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
	<u> </u>							and
	<mark></mark>		<u></u>					Syndicated
	<mark></mark>		<u></u>		<u></u>		<u> </u>	Exclusivity Surcharge
	<mark></mark>	-			······		<u></u>	for
		-						Partially
								Distant
	<mark></mark>							Stations
	<mark></mark>		<u></u>					
					······			
					•••••		•••••	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
orosa recorpta i nat e	поир	*	0.00	Oloss Receipts occ	ona Group	<u>*</u>	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NE HUNDRED TWENTY	-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
	<mark></mark>		<u></u>					
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	<mark></mark>							
Total DSEs			0.00	Total DSEs		-II	0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third (Base Rate Fee Third (Base Rate Fee: Add the Enter here and in block	Group ne base ra	\$ te fees for each subs	0.00	Gross Receipts Fou	rth Group		0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	NTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRE	ED THIRTIETH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
		-						Stations
						-		
						-		
					••••	•		
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 G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THII	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THI	RTY-SECOND	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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	······································			·	·····	-		
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
		<u> </u>	3.00	2007/00/00/00/	CIOUP	<u> </u>	0.00	
Base Rate Fee: Add th			riber group	as shown in the boxe	s above.			
Enter here and in block	ເ 3, iine 1, s	space L (page 7)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
BI	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED THIF	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THI	RTY-FOURTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roun	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
eroco recorpio i not e	Топр			ll cross rescripts cost	ond Group			
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Seco		\$	0.00	
ONE HUNDRED THII	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED T	HIRTY-SIXTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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							·····	
				-	·····	-		
				·		-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 023330	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED THIRTY	-SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			<u></u>		<u>-</u>			Exclusivity
			<u> </u>		·····			Surcharge for
	···	-		·				Partially
								Distant
								Stations
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T-4-1 D05-			0.00	T-4-1 DOE-		11	0.00	
Total DSEs			0.00	Total DSEs			-	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THIS	RTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRE	D FORTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	<u>. </u>				••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.		LE SYSTEM:				S	023330	Name
Bl	OCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FOR	RTY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-SECOND	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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 G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FOR	RTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-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	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	<u></u>	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Cross Receipts Time C	лоцр			Cross recorpts rou	iui Gioup		0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
				TE FEES FOR EAC				
		SUBSCRIBER GROUP		II .		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
								Syndicated Exclusivity
					••••			Surcharge
								for
								Partially
		-						Distant Stations
	····							Stations
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Gloss Receipts First Gloup				Cross resemple esse	ma Group			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROUP		ii e		H 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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			<u> </u>					I
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							····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	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# 023330	Name
BI	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU		H		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.070.1	202	57.12 5.5.T	202	07.22 0.0.1	302	07.122.01011	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
							<u></u>	Surcharge for
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								Distant
								Stations
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Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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 C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330									
				TE FEES FOR EACH				=	
ONE HUNDRED FIF	ry-third	SUBSCRIBER GROL	IP 0	ONE HUNDRED FIFT	Y-FOURTH	SUBSCRIBER GROU	JP 0	9	
COMMUNITY/ AREA				COMMUNITY/ AREA				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	
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Total DSEs			0.00	Total DSEs		-	0.00	ı	
Gross Receipts First Group \$ 0.00				Gross Receipts Secor	d Group	\$	0.00	ı	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	1	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED FI	FTY-SIXTH	I SUBSCRIBER GROU	JP	ı	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı	
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Total DSEs			0.00	Total DSEs			0.00	ı	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	1	
Peco Poto For This I C	`rour		0.00	Book Bata Fara Fara III	Organi		0.00	ı	
Base Rate Fee Third G	лоир	\$	0.00	Base Rate Fee Fourth	i Group	\$	0.00	1	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		1	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 023330								
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FI	FTY-EIGHTH	H SUBSCRIBER GROUP	1	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O'TEE OTOTA	DOL	O/ LEE OTOTA	DOL	Office Office	DOL	OTTEL OTOTA	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
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								Partially Distant
						•		Stations
		-						
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FI	FTY-NINTH	SUBSCRIBER GROUP		ONE HUNDR	ED SIXTIETH	H SUBSCRIBER GROUP	1	
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 (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
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Name	YSTEM ID# 023330	Sì			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
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9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GRO	TY-FIRST	
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Name	YSTEM ID# 023330	S'			,	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
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SUBSCRIBER GROU	/-SECOND	FIFT	UP	SUBSCRIBER GRO	TY-FIRST	FIFT
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Name	YSTEM ID# 023330	S				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	Y-EIGHTH	FIFT		SUBSCRIBER GRO	SEVENTH	FIFTY-S
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	JP	SUBSCRIBER GROU	SIXTIETH		UP	SUBSCRIBER GRO	TY-NINTH	FIFT
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LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 023330	Name
				TE FEES FOR EACH				
	TY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs		Į.	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GRO	UP	SIXT	Y-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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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			scriber group	as shown in the boxes	above.	\$		

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9		SUBSCRIBER GROU	(TY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
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	JP	SUBSCRIBER GROU	Y-EIGHTH	SIXT	JP	SUBSCRIBER GRO	SEVENTH	SIXTY-S
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CK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP WINTH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP							
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FIRST SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP	SUBSCRIBER GROU	'-SECOND	SEVENTY	JP	SUBSCRIBER GROU	ITY-FIRST	SEVEN
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			Base Rate Fee Fourth	0.00		_	ase Rate Fee Third (

Name	YSTEM ID# 023330						R OF CABL	LEGAL NAME OF OWNE CABLE ONE, INC.
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	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SEVEN COMMUNITY/ AREA CALL SIGN
	0.00 JP	\$ I SUBSCRIBER GROU	d Group	SEVE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE DSE	SEVEN COMMUNITY/ AREA CALL SIGN Fotal DSEs
	O.00 JP O DSE	SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVE COMMUNITY/ AREA CALL SIGN	JP 0	CALL SIGN	DSE DSE	SEVEN

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	JP	SUBSCRIBER GROU	IGHTIETH			SUBSCRIBER GRO	TY-NINTH	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
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Name	YSTEM ID# 023330	S)				LE SYSTEM:		CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	-SECOND			SUBSCRIBER GRO	TY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 023330	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 023330	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED THIR	TEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED FOL	RTEENTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
							<u></u>	for
								Partially
								Distant
						-		Stations
						-		
							<u></u>	
						 		
						 		
Total DSEs			0.00	Total DSEs	<u> </u>	<u> </u>	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED S	IXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
		-						
					ļ			
							<u> </u>	
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
	rour	•	_		Crawn	•	_	
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 Rate Fee: Add the			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 023330	Name
				TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GROUP)	ONE HUNDRED E	IGHTEENTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		-					<u></u>	Exclusivity
		-						Surcharge
								for
							·····	Partially
	 		 				<u></u>	Distant
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						+		
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Total DSEs	ļI		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED NIN	ITEENTH	SUBSCRIBER GRO	JP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	 						<u> </u>	
	 				<u></u>			
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	023330	Name
BL	OCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROUI)	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
			<mark></mark>					for
			<u> </u>					Partially
			<u> </u>					Distant
		-	<u> </u>					Stations
			<u></u>		·····	-	·····	
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			<u>-</u>		••••			
Γotal 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	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROU)	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	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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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 Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

	YSTEM ID# 023330					_E 5151EW.	R OF CABL	CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
	1	SUBSCRIBER GROUP	NTY-SIXTH	ONE HUNDRED TWI)	SUBSCRIBER GROUP	NTY-FIFTH	ONE HUNDRED TWEN
9 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								
Surcharge								
for								
Partially								
Distant								
Stations								
]		П						
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1			1					
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1		1						
1	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	\$	oup	Base Rate Fee First G
]	1	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN)	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0	T CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN
	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	
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	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN
	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	
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	0	CALL SIGN	DSE			CALL SIGN	DSE	
	0	CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		

	YSTEM ID# 023330					.E SYSTEM:		CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	Bl
		SUBSCRIBER GROUP	THIRTIETH	ONE HUNDRED)	SUBSCRIBER GROUF	ITY-NINTH	ONE HUNDRED TWEN
9 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								
Surcharge								
for								
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	0.00	Ш		Total DSEs	0.00			Total DSEs
_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIRT)	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIS
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
<u> </u>	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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	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	O23330	SY				LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				
9	_	SUBSCRIBER GROUP	Y-FOURTH			SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED THIR
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate	<u></u>							
Exclusivit Surcharge								
for								
Partially								
Distant		_						
Stations								
	<u></u>							
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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 Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	Р	SUBSCRIBER GROU	TY-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

0 COMMUNITY/ AREA 0 Computation DSE CALL SIGN DSE CALL SIGN DSE of		
0 COMMUNITY/ AREA 0 Computation DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fee and Syndicated Exclusivity	COMPUTATION OF BASE RA	BLOCK A: (
DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fee and Syndicated Exclusivity	SUBSCRIBER GROUP	ONE HUNDRED THIRTY-SEVENTH
DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fee and Syndicated Exclusivity		COMMUNITY/ AREA
and Syndicated Exclusivity		CALL SIGN DSE
Syndicated Exclusivity		
Exclusivity		
Surcharge		
for		
Partially		
Distant		
Stations		
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0.00 Total DSEs		Total DSEs
0.00 Gross Receipts Second Group \$ 0.00	\$ 0.00	Gross Receipts First Group
0.00 Base Rate Fee Second Group \$ 0.00	\$ 0.00	Base Rate Fee First Group
UP ONE HUNDRED FORTIETH SUBSCRIBER GROUP	SUBSCRIBER GROUP	ONE HUNDRED THIRTY-NINTH
0 COMMUNITY/ AREA 0	0	COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE	CALL SIGN DSE	CALL SIGN DSE
·		
0.00 Total DSEs 0.00	0.00	Total DSEs
0.00 Gross Receipts Fourth Group \$ 0.00	\$ 0.00	Gross Receipts Third Group
		Base Rate Fee Third Group

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	LE SYSTEM:	•			S	YSTEM ID# 023330	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED FOR	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-SECONE	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
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						+	<u></u>	
						-	<u></u>	
Total DSEs			0.00	Total DSEs	-	11	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
								
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP	1	ONE HUNDRED FOR	TY-FOURTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ee Third G	oup	\$	0.00		ı Group	\$ \$		

A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA O Computation
0 COMMUNITY/ AREA 0 Computation
Computation
: CALL SIGN DSE CALL SIGN DSE Of
Base Rate Fee
and
Syndicated
Exclusivity
Surcharge
for
Partially
Distant
Stations
0.00 Total DSEs 0.00
\$ 0.00 Gross Receipts Second Group \$ 0.00
\$ 0.00 Base Rate Fee Second Group \$ 0.00
NTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP
O COMMUNITY/ AREA O
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
O'TEE GIGHT BOE GIGHT BOE GIGHT
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<mark> </mark>
0.00 Total DSEs 0.00
\$ 0.00 Gross Receipts Fourth Group \$ 0.00

ROLIP	IBER GROUP						CABLE ONE, INC.
ROLIP		SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL
1001	SUBSCRIBER GROU	FIFTIETH	ONE HUNDRED	JP	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED FORT
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00		<u> </u>	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	\$	oup	Base Rate Fee First Gr
ROUP	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN	DSF	CALL SIGN
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0.00	II		Total DSEs	0.00			Total DSEs
0.00	•	Group			¢	roup	Gross Receipts Third G
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			Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G
00 00 00 00 00	0.C 0.C 0.C	SUBSCRIBER GROUP CALL SIGN CALL SIGN DS O.C	d Group \$ 0.0 DSE CALL SIGN DS C-SECOND SUBSCRIBER GROUP	Total DSEs Gross Receipts Second Group Base Rate Fee Second Group COMMUNITY/ AREA CALL SIGN DSE CALL SIG	0.00	0.00	0.00

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S'	O23330	Name
				TE FEES FOR EACH				
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU		ONE HUNDRED FIFTY	/-FOURTH	SUBSCRIBER GROU	IP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						-	····	Exclusivity Surcharge
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								Partially
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							2.22	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FIFT	ΓY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						 		
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Total DSEs	<u> </u>		0.00	Total DSEs	<u>I</u>		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes a	above.	\$		

ION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP OCOMMUNITY/ AREA OCOMMUNITY/ AREA OF COMMUNITY/ AREA OF
O COMMUNITY/ AREA O Computation N DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant
Computation N DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant
N DSE CALL SIGN DSE CALL SIGN DSE of Base Rate Fee and 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
Partially Distant
Distant
Stations
0.00 Total DSEs
0.00 Gross Receipts Second Group \$ 0.00
0.00 Base Rate Fee Second Group \$ 0.00
R GROUP ONE HUNDRED SIXTIETH SUBSCRIBER GROUP
O COMMUNITY/ AREA O
N DSE CALL SIGN DSE CALL SIGN DSE
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0.00 Total DSEs
0.00 Gross Receipts Fourth Group \$ 0.00
0.00 Base Rate Fee Fourth Group \$ 0.00

LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 023330 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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LEGAL NAME OF OWNER OF CARLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 023330 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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