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					
02/25/2019	\$ 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	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period		2018/2								
B	rate	Give the full legal name of the owner of the cable system. If the owner is a 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 ngle statement of account and royalty fee payment covering the entire account covering the in this is the system's first filing. If not, enter the system's ID	ss of the cable system or on the last day of the counting perion	em the accounting period should s		29323				
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	BLUE RIDGE CABLE TECHNOLOGIES INC									
		Blue Ridge Communications								
					2932	320182				
					29323	2018/2				
		PO Box 215								
		Palmerton, Pa 10871								
С		TRUCTIONS: In line 1, give any business or trade names used to ic nes already appear in space B. In line 2, give the mailing address of								
System	IIai	IDENTIFICATION OF CABLE SYSTEM:	the system, it dill	erent nom the address give	II III Space	ъ.				
System	1	IDENTIFICATION OF CABLE STSTEM.								
		MAILING ADDRESS OF CABLE SYSTEM:								
	2	(Number, street, rural route, apartment, or suite number)								
		(City, town, state, zip code)								
D	Ine	tructions: For complete space D instructions, see page 1b. Identify	only the fret comp	nunity served below and rel	iet on nage	a 1h				
Area		n all communities.	orny the list com	numity served below and ren	ist on page	5 10				
Served	VVILI	CITY OR TOWN	STATE							
First		MANSFIELD	PA							
Community	В	elow is a sample for reporting communities if you report multiple cha	Innel line-ups in S	pace G.						
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	3 GRP#				
Sample	Ald	a	MD	Α		1				
	Alli	ance	MD	В		2				
	Ger	ing	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 sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 29323 **BLUE RIDGE CABLE TECHNOLOGIES INC** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D 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 Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served 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# **MANSFIELD** PA AA **First ARNOT** PA AA 1 Community **BLOSS TOWNSHIP** PA AA 1 **BLOSSBURG** PA AA **CHARLESTON TOWNSHIP** PA AA 3 **COVINGTON TOWNSHIP** PA AA 3 See instructions for **DELMAR TOWNSHIP** 3 PA AA additional information on alphabetization. **DUNCAN TOWNSHIP** PA AA **FARMINGTON TOWNSHIP** PA 3 AA **GAINES TOWNSHIP** 3 PA AA 2 **GALETON** PA AB Add rows as necessary. **HAMILTON TOWNSHIP** PA AA LIBERTY PA AA LIBERTY TOWNSHIP PA AA MIDDLEBURY TOWNSHIP PA AA 2 **PIKE TOWNSHIP** PA AB **PUTNAM TOWNSHIP** PA AA RICHMOND TOWNSHIP 3 PA AA SHIPPEN TOWNSHIP 3 PA AA **SULLIVAN TOWNSHIP** PA AA **WELLSBORO** PA AA 3 **WEST BRANCH TOWNSHIP** PA AΒ

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

BLUE RIDGE CABLE TECHNOLOGIES INC

29323

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1			BLOC	K 2	
	NO. OF				NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:						
 Service to first set 	4,496	\$31.04/Mth] [
 Service to additional set(s) 	6,245	.50/Mth				
 FM radio (if separate rate) 						
Motel, hotel						
Commercial	197	\$31.04/Mth				
Converter						
Residential						
Non-residential						
		l	7 (***		1	T

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 1							
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGO	RY OF SERVICE	RATE		
Continuing Services:		Installation: Non-residential						
Pay cable	\$16.95/Mth	Motel, hotel						
 Pay cable—add'l channel 	\$13.00/Mth	Commercial						
Fire protection		Pay cable						
•Burglar protection		Pay cable-add'l channel						
Installation: Residential		Fire protection						
First set	\$ 49.95	Burglar protection						
 Additional set(s) 		Other services:						
• FM radio (if separate rate)		Reconnect	\$ 49.95					
Converter		Disconnect						
		Outlet relocation						
		 Move to new address 						

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BLUE RIDGE CABLE TECHNOLOGIES INC** 29323 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 CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **WENY** 36 Ν NO **ELMIRA, NY** WENY-2 36.2 Ν NO **ELMIRA, NY** See instructions for additional information WENY-3 36.3 Ν NO **ELMIRA, NY** on alphabetization. WETM 18 Ν NO **ELMIRA, NY** 18.2 ı WETM-2 NO **ELMIRA, NY WJKP** 51 ı NO Corning, NY **WSKG** 46 Ε YES 0 BINGHAMTON, NY **WVIA** 44 Ε YES 0 WILKES-BARRE, PA **WYDC** 48 NO CORNING, NY ı

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BLUE RIDGE CABLE TECHNOLOGIES INC** 29323 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **WETM** 18 Ν YES 0 **ELMIRA, NY** WETM-2 18.2 YES 0 **ELMIRA, NY WNLO** 23 ı NO **BUFFALO, NY WPSU** 3 NO Ε UNIVERSITY PARK, PA NO **WIVB** 4 Ν **BUFFALO, NY** Ν **WENY** 36 NO **ELMIRA, NY WUTV** 29 **BUFFALO, NY** NO ı **WVIA WILKES-BARRE, PA** 44 Ε YES 0

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYS	TEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	SINC			29323	Nume
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space of carried by your cable is FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Pas	G, identify even the system during the ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(y television standard page (v) of the local servage (v) of the local se	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 carriage of cert 1(e)(2) and (4))]; as 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 lark station, an indefor network multiple of "E-M" (for noncottons located in the insplete column 5, and Indicate by enactivated channel of subject to a royalty extended to a royalty extended on any of instructions located in the insplete column 5, and Indicate by enactivated channel or any of instructions located in the insplete column 5, and Indicate by enactivated channel or any of instructions located in the insplete column 5, and Indicate by enactivated channel or any of instructions located list the community 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	a am fy cial	G Primary Transmitters: Television
Note: If you are utilizing	.9		·		onamic 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		
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	ER OF CABLE SY	'STEM:			SYSTEM ID#	Name	
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC		29323	Nume	
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, 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), "L-M" (for ind							
the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the	a primary trans simulcasts, also ree categories e location of ea	mitter or an as o enter "E". If , see page (v) ch station. Fo	ssociation repre you carried the of the general in ur U.S. stations,	senting the primar channel on any ot instructions locate list the community	y transmitter, enter the designa- her basis, enter "O." For a further		
Note: If you are utilizing	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	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					SYSTEM ID#	Name	
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC		29323		
PRIMARY TRANSMITTE	ERS: TELEVISIO	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 eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy	system during to the consistence of the consistence	he accounting In June 24, 19, or 76.63 (in the next prespect to any attons, or auth G—but do listitute basis. ace I, if the stateming substitute sign. Do not in a station accept reams must be the FCC heep, WRC is Chance station.	g period, except 81, permitting the referring to 76.6 paragraph. or distant stations orizations: t it in space I (the ation was carried cute basis station report origination coording to its ow- be reported in or ass assigned to pannel 4 in Wash	(1) stations carried e carriage of certa 1(e)(2) and (4))]; as carried by your one Special Statement of both on a substitutions, see page (v) on program service er-the-air designation of the television statington, D.C. This	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the tute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television	
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Note: If you are utilization	Ig manipic chai		EL LINE-UP	<u>'</u>	chariner inte-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		
		l					
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FORM SA3E. PAGE 3.						T-	
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Namo	
BLUE RIDGE C	ABLE TECH	INOLOGIE	SINC		29323	Nume	
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), 07.661(e)(2) and (4), 07.76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network nutlicast), "E" (for noncommercial educational n							
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the		
Note: If you are utilizing		. ,		•			
		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		
	†					1	

FORM SA3E. PAGE 3.						•	
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYS	TEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	SINC			29323	Nume
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Substitute Pasis Subsis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-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 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	G, identify even the system during the ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(y television standard page (v) of the local servage (v) of the local se	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in common as assigned to annel 4 in Wash ation is a network), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "constant of lack of a stam that is not some 30, 2009, be association repression of the general in tructive area of the general in the control of the general in the contr	(1) stations carried the carriage of certain (e) (2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on program service the er-the-air designation of the television statistical program of the television of the t	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	a am fy	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AG			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC		29323	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consine of the consine of the consine of the consistency of the consist	ne accounting a June 24, 1984), or 76.63 (r d in the next prespect to any authors, or auth G—but do list titute basis. In the state of	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 both on a substitution, see page (v) on program service er-the-air designal column 1 (list each the television statistics.	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel	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 h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these th Column 6: Give the	estem carried the in each case we entering the lecast), "E" (for no ese terms, see pation is outside ce area, see pation entered "Ye in entered "Ye in on a part-tirion of a distant station is entered into on a primary transisimulcasts, also aree categories, e location of ea Canadian statio	ne station. whether the st tter "N" (for ne concommercial coage (v) of the the local serv age (v) of the commercial coage (v) of the coage (v) coage	ation is a netwo etwork), "N-M" (I educational), o e general instruc- rice area, (i.e. "c general instruct- 4, you must cor- accounting perio accounting perio	ork station, an indefor network multicor "E-M" (for noncoctions located in the distant"), enter "Ye ions located in the mplete column 5, so de Indicate by enterivated channel of subject to a royalty stween a cable systematic than and channel on any of instructions located list the community with	ependent station, or a noncommercial ast), "I" (for independent), "I-M" ommercial educational multicast). The paper SA3 form. It not, enter "No". For an exercipaper SA3 form. Stating the basis on which your stating the basis on which your capacity. It payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the subject stem or an association representing the payment because it is the payment because it is the payment because it is the payment bec	
		CHANN	EL LINE-UP	AH		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYS	TEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC			29323	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space of carried by your cable is FCC rules and regulate 76.59(d)(2) and (4), 76 substitute program base Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Pas	G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television standard page (v) of the local servage (v) of the local se	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: tit in space I (the attion was carried ute basis station eport origination coording to its own be reported in comparation in a network), "N-M" (I educational), on a general instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, (i.e. "cogeneral instructive area, or lack of a sam that is not some 30, 2009, be a sociation repression of the general in the of the general in the control of the general of the control of the general of	(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 noncontext of the service of the station of the st	s". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system	a nm y	G Primary Transmitters: Television
FCC. For Mexican or 0	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.		
Note: If you are utilizing	ig multiple char		•		channel line-up.		
	1		EL LINE-UP		<u> </u>		
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:			SYS	TEM ID#	Name	
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC			29323		
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), 07.66.16(e)(2) and (4), 07.66.16(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. **Golumn 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 by or "E") (for								
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
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	+ ······							
								
								

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWNER OF CA				SYS	TEM ID#	Name
BLUE RIDGE CABLE	rechnologie	ES INC			29323	
PRIMARY TRANSMITTERS: TELL In General: In space G, identify carried by your cable system du FCC rules and regulations in ef 76.59(d)(2) and (4), 76.61(e)(2) substitute program basis, as ex Substitute Basis Stations: basis under specifc FCC rules, • Do not list the station here in s station was carried only on a • List the station here, and also basis. For further information in the paper SA3 form. Column 1: List each station each multicast stream associate cast stream as "WETA-2". Simu WETA-simulcast). Column 2: Give the channel its community of license. For ex on which your cable system car Column 3: Indicate in each educational station, by entering	every television suring the accounting fect on June 24, 19 and (4), or 76.63 (plained in the next With respect to an regulations, or authorace G—but do list substitute basis. In space I, if the standard concerning substitute in substitute in concerning substitute in concerning substitute in sub	tation (including g period, except 981, permitting the referring to 76.6 paragraph. The stations are reported in the report origination as assigned to the reported in the return of the reported in the repor	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your content of the Special Statement of the	and low power television stations d only on a part-time basis under ain network programs [sections and (2) certain stations carried on able system on a substitute programt and Program Log)—if the ute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identification. For example, report multiple is stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommer ast), "I" (for independent), "I-M" immercial educational multicast).	29323 a am	G Primary Transmitters: Television
planation of local service area, Column 5: If you have enter cable system carried the distant carried the distant station on a profession of a confidence of a written agreement entered the cable system and a primary tion "E" (exempt). For simulcast explanation of these three cates	see page (v) of the ed "Yes" in column a station during the part-time basis beclistant multicast strinto on or before Jutransmitter or an as, also enter "E". If gories, see page (v of each station. Fo stations, if any, given	general instruct 4, you must con accounting period ause of lack of a eam that is not sune 30, 2009, be association repre- you carried the you carried the or U.S. stations, we the name of the	ions located in the mplete column 5, sod. Indicate by entactivated channel of subject to a royalty etween a cable systement on any otinstructions locate list the community with the com	stating the basis on which your cering "LAC" if your cable system capacity. payment because it is the subjectem or an association representing transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by which the station is identifed.	ng	
, , ,	CHANN	IEL LINE-UP	ΔK	·		
1. CALL 2. B'CAS SIGN CHAN NUME	ST 3. TYPE INEL OF	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	
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC		29323	Nume	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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)							
the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	a primary trans simulcasts, also tree categories e location of ea	mitter or an a o enter "E". If , see page (v) ch station. Fo	ssociation repre you carried the of the general in ur U.S. stations,	senting the primar channel on any ot instructions locate list the community	·		
Note: If you are utilizing		. ,		•			
		CHANN	EL LINE-UP	AL			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
				I			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYST	TEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	SINC			29323	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2) and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for ind							
Trotor in you are dained	ig manapio onai	•	•		опанногино ар.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name			
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC		29323	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for independent multicast), "E' (for noncommercial educational) or "E-M" (for noncommercial educational) or "E-M"									
Note: If you are utilizin	g muitiple char	• •	EL LINE-UP		cnannei iine-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				

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYS	TEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC			29323	- Tumo
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), 76.61(e)(2) and (4), 76.63(e)(2) and (4), 76.61(e)(2) and (4), 76.63(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the pager 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 yield for independent, "I-M" (for independent multicast), "E" (for noncommercial educational bation, by entering the lett							G Primary Transmitters: Television
FCC. For Mexican or (Note: If you are utilizing		. ,		•			
Note: If you are utilizing		• •	EL LINE-UP		channer inte-up.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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	 				<u> </u>		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWNE					SYSTEM ID#	Name
BLUE RIDGE CA	ABLE TECH	INOLOGIE	S INC		29323	
PRIMARY TRANSMITTER	RS: TELEVISIO	ON				
carried by your cable sy FCC rules and regulatio 76.59(d)(2) and (4), 76.6 substitute program basis Substitute Basis St basis under specifc FCC • Do not list the station has station was carried o • List the station here, a basis. For further info in the paper SA3 forr Column 1: List each each multicast stream a cast stream as "WETA-2 WETA-simulcast). Column 2: Give the its community of license on which your cable sys Column 3: Indicate i	stem during the constant of th	he accounting a June 24, 1944), or 76.63 (r d in the next prespect to any attions, or auth G—but do list titute basis. In the statement of the	g period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: t it in space I (the attion was carried tute basis station report origination coording to its own be reported in of the paragraph of the assession of the period of the annel 4 in Wash attion is a netwo	(1) stations carried carriage of certained carriage of certained (2) and (4))]; as carried by your case Special Statement of both on a substitution, see page (v) on program service er-the-air designation occlumn 1 (list each the television statington, D.C. This ork station, an indexisted the carried of the station, an indexisted of the station, an indexisted of the carried of the station, an indexisted of the station, an indexisted of the carried of the station, an indexisted of the station, an indexisted of the carried of the station, an indexisted of the station of th	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a stable system on a substitute program ent and Program Log)—if the tute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example ion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
(for independent multica For the meaning of thes Column 4: If the stat planation of local service Column 5: If you have cable system carried the carried the distant station For the retransmission of a written agreement of the cable system and a tion "E" (exempt). For si explanation of these thre Column 6: Give the	ast), "E" (for no se terms, see pation is outside e area, see pave entered "Ye e distant station on a part-timent on of a distant entered into or primary transmirulcasts, also ee categories, location of eacanadian statio	oncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis becamulticast stren or before Jumitter or an action enter "E". If a see page (v) ch station. Fons, if any, given	I educational), of a general instruct vice area, (i.e. "congeneral instruct 4, you must correct accounting period accounting period accounting period accounting period accounting period by a congeneral in the second accounting period accounting period accounting period accounting to the second accounting th	or "E-M" (for nonco ctions located in the distant"), enter "Yelions located in the mplete column 5, and. Indicate by en- lictivated channel of subject to a royalty etween a cable sys- senting the prima channel on any of instructions located list the community	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your tering "LAC" if your cable system capacity. If payment because it is the subject estem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further end in the paper SA3 form. If the town of the station is licensed by the match which the station is identified.	
Note: If you are utilizing	Thurtiple chai		EL LINE-UP	<u> </u>	channel inte-up.	
1. CALL 2 SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
T	1					

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWNER OF CA				SYS	TEM ID#	Name
BLUE RIDGE CABLE	TECHNOLOGIE	ES INC			29323	
PRIMARY TRANSMITTERS: TEL In General: In space G, identify carried by your cable system dt FCC rules and regulations in ef 76.59(d)(2) and (4), 76.61(e)(2) substitute program basis, as ex Substitute Basis Stations: basis under specifc FCC rules, • Do not list the station here in s station was carried only on a • List the station here, and also basis. For further information in the paper SA3 form. Column 1: List each station each multicast stream associate cast stream as "WETA-2". Simu WETA-simulcast). Column 2: Give the channe its community of license. For ex on which your cable system car Column 3: Indicate in each educational station, by entering	rechnologies evision y every television suring the accounting fect on June 24, 19 and (4), or 76.63 (plained in the next With respect to an regulations, or autispace G—but do list substitute basis. in space I, if the st in concerning substitute so call sign. Do not ed with a station acceled with a station acceled at the station. I number the FCC tried the station. I case whether the st the letter "N" (for r (for noncommercial	tation (including g period, except 981, permitting the permitting the period, except 981, permitting the period of	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your content of both on a substitution, see page (v) on program services er-the-air designation of the television station of the television station, D.C. This work station, an indefor network multicute "E-M" (for noncontent of the television of television of the television of the television of the television of television of the television of television of the television of televis	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 programent and Program Log)—if the ute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identification. For example, report multinaterial stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncomment of the pendent station, or a noncomment of the channel expendent station, or a noncomment of the channel of t	29323) a am	G Primary Transmitters: Television
Column 4: If the station is o planation of local service area, Column 5: If you have enter cable system carried the distant carried the distant station on a For the retransmission of a of a written agreement entered the cable system and a primary tion "E" (exempt). For simulcast explanation of these three cates	utside the local sersee page (v) of the ed "Yes" in column t station during the part-time basis beclistant multicast strinto on or before Jutransmitter or an as, also enter "E". If gories, see page (v of each stations, if any, gives see page, gives and services and services are least to the stations of the stations of the second services are page.	vice area, (i.e. "or general instruct a 4, you must con accounting period ause of lack of a eam that is not sune 30, 2009, be association representation of the general for U.S. stations, we the name of the	distant"), enter "Yeions located in the mplete column 5, sod. Indicate by entectivated channel of subject to a royalty etween a cable systement a cable system of any of the primary channel on any of the community with the	s.". If not, enter "No". For an expaper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. It payment because it is the subject stem or an association representing transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by which the station is identifed.	g	
	•	IEL LINE-UP	•			
1. CALL 2. B'CA: SIGN CHAN NUMI	ST 3. TYPE INEL OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYS	STEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	SINC			29323	Nume
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space (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), "If for independent),							
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	AR			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FURIN SAJE. PAGE 3.					OVOTEM ID#	
BLUE RIDGE C			S INC		SYSTEM ID# 29323	Name
PRIMARY TRANSMITTI	RS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the constant of	he accounting n June 24, 199 4), or 76.63 (red in the next p	period, except 81, permitting the eferring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
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Note: If you are utilizing	ng multiple char		use a separate EL LINE-UP		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	

FURINI SAJE. PAGE 3.					OVOTEM ID#	
BLUE RIDGE C			SINC		SYSTEM ID# 29323	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during to ions in effect of 5.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	p period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	CC rules, regular here in space only on a substand also in spatformation concern. The station's call associated with a channel number of the station's call associated with the ineach case of the station is outsided to the channel number of the station is outsided to the channel number of the station is outsided to the channel number of the station is outsided to the station is outsided to the station of a distant static ion on a part-tilicition of a distant and the entered into one a primary transpanding the station of a distant the entered into one a primary transpanding the station of a distant the entered into one aprimary transpanding the station of the categories are categories and canadian static canadian static on the station of the categories are categories and canadian static on the station of th	ations, or auth G—but do listitute basis. ace I, if the state that is sign. Do not read to a station ace streams must be the FCC has, WRC is Change (v) of the the local servage (v) of the the local servage (v) of the es" in column on during the me basis becar multicast stream or before Jumitter or an accenter "E". If , see page (v) ch station. Foons, if any, given it to list the local servage (v) of the es" in column on during the me basis becar multicast stream or before Jumitter or an accenter "E". If , see page (v) ch station. Foons, if any, given in the station of t	tit in space I (the ation was carried tute basis station report origination or be reported in the ation is a network ation is a network ation is a network (I educational), or general instruct 4, you must corraccounting period ause of lack of a seam that is not some 30, 2009, be ssociation repreyou carried the of the general in truct at the control of the general in the social control of the general in the control of the general of the control of the ge	d both on a substitute, see page (v) on program service er-the-air designation of the television statistington, D.C. This limit of the television statistington, D.C. This limit of the television statistington, D.C. This limit of the television, an indefer network multicute for network multicuter "E-M" (for noncontrolled in the mighete column 5, so the televisions located in the mighete column 5, so the televisions located in the subject to a royalty state of a cable system a cable system a cable system and the primary control of the televisions located list the community with	ent and Program Log)—if the ute basis and also on some other f the general instructions located is such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system the paper shade it is the subject testem or an association representing the type transmitter, enter the designa- ther basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the to which the station is identifed.	
,		•	EL 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	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	S INC		29323	
PRIMARY TRANSMITTE	RS: TELEVISIO	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 eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate	system during the consine effect or a consine effect or a consistency with a consistency	he accounting In June 24, 19, or 76.63 (in the next prespect to any ations, or auth G—but do listitute basis. ace I, if the stateming substitute sign. Do not in a station acceptation acceptation acceptation acceptation acceptation acceptation acceptation acceptation.	g period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: t it in space I (the attion was carried tute basis station report origination coording to its own be reported in of the paragraph of the assession of the period of the annel 4 in Wash attion is a netwo	(1) stations carried carriage of certained carriage of certained (2) and (4))]; as carried by your case Special Statement of both on a substitution, see page (v) on program service er-the-air designation occlumn 1 (list each the television statington, D.C. This ork station, an indexisted the carried of the station, an indexisted of the station, an indexisted of the carried of the station, an indexisted of the station, an indexisted of the carried of the station, an indexisted of the station, an indexisted of the carried of the station, an indexisted of the station of th	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the tute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example tion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M"	G Primary Transmitters: Television
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recorn you are amen			EL LINE-UP	<u>'</u>	onamier une ap.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURIN SAJE. PAGE 3.					OVOTEM ID#	
BLUE RIDGE C			S INC		SYSTEM ID# 29323	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON NC				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the constant of	he accounting n June 24, 198 (4), or 76.63 (red in the next p	period, except 81, permitting the eferring to 76.6 paragraph.	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servic 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 FCC. For Mexican or Column 6: Give the FCC.	CC rules, regular here in space only on a subs and also in spatioformation concurr. The station's call associated with a cash case where a cash case we entering the least, "E" (for nease terms, see ation is outside to earea, see parave entered "Ye he distant static ion on a part-tilicion of a distant at entered into o a primary trans simulcasts, also ree categories e location of ea Canadian station and canadian station canadian station of a canadian station of ea Canadian station of ea Canadian station of ea Canadian station of ea Canadian station of a station of ea Canadian station of a canadian station of a canadian station of ea Canadian station of a station of ea Canadian station of a canadian station of each canadian station of eac	ations, or auth G—but do list titute basis. ace I, if the state rining substit sign. Do not read that the station acceptance of the station acceptance of the station. Whether the station. Whether the station. Whether the station acceptance of the local servence of the station of the station. For the station of the station of the station of the station. For the station of the sta	orizations: It it in space I (the ation was carried tute basis station report origination or be reported in cording to its over the annel 4 in Wash reation is a network etwork), "N-M" (I educational), one general instructional educational instructional educational instructional educational ed	e Special Statemed both on a substitus, see page (v) on program services er-the-air designal column 1 (list each the television statington, D.C. This limit of t	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 identified.	Television
Note: If you are utilizing	ig multiple char	•	EL LINE-UP		cnanner 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	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name
BLUE RIDGE C	ABLE TECH	INOLOGIE	SINC		29323	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-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),0 or 76.63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "For						
Column 6: Give the FCC. For Mexican or 0	e location of ea Canadian statio	ch station. Fo	r U.S. stations, e the name of th	list the community ne community with	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char		<u>'</u>	<u>'</u>	channel line-up.	
	1	CHANN	EL LINE-UP	AW	I	
1. CALL	2. B'CAST	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	STATION	(Yes or No)	(If Distant)		
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ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 29323 **BLUE RIDGE CABLE TECHNOLOGIES INC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2018/
LEGAL NAME OF OWNER OF					S	SYSTEM ID#	Name
BLUE RIDGE CABLE	IECHNOL	OGIES INC				29323	
SUBSTITUTE CARRIAGI	E: SPECIA	L STATEMEN	IT AND PROGRAM LOG				
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pening that must	eriod, under spe st be included in	cific present and former FC this log, see page (v) of the	C rules, regula	ations, or authorizations. I	For a further	Substitute Carriage:
1. SPECIAL STATEMEN				o any nanna	twork tolovision program		Special
During the accounting per broadcast by a distant sta		ir cable system	carry, on a substitute basi	s, any nonne	, -	⊠No	Statement and Program Log
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is '	Yes," you mu	ust complete the progran	n	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a gram was substituted for pi	ace, please of every no distant state gulations, oution. Do no Lucy" or "NE m was broad sign of the sadcast stationation and day we "5/7." es when the Example: a ler "R" if the land regulation or summing	attach additional nnetwork televition and that your authorizations at use general cast live, enterestation broadca on's location (thous, if any, the owner your system of a program carried listed program ons in effect du	al pages. ision program (substitute pur cable system substitute pur cable system substitute s. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the stem carried the substitute purposed by a system from 6:01:10 was substituted for programing the accounting period	rogram) that, d for the progeral instruction "basketball". lo." m. station is lice station is ider program. Use cable system. 5 p.m. to 6:2 mming that y to enter the let	during the accounting ramming of another stations located in the paper List specific program nsed by the FCC or, in niffied). numerals, with the monitalist the times accurately 8:30 p.m. should be our system was required ter "P" if the listed pro	th y	
effect on October 19, 1976					EN SUBSTITUTE	7. REASON	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	FOR DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO		
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ACCOUNTING PERIOD: 2018/2 FORM SA3E, PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 29323 **BLUE RIDGE CABLE TECHNOLOGIES INC 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-

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Part-Time Carriage Log

time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

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

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

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

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

U.S. Copyright Office

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	ŧI		
	UE RIDGE CABLE TECHNOLOGIES INC			29323	Mama		
Ins all a (as pag	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount imounts (gross receipts) paid to your cable system by subscribers for the system's secidentified in space E) during the accounting period. For a further explanation of how to de (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary	y transmite this au	ission service	K Gross Receipts		
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.							
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should back 3 below.	e ente	ered on li	ne 1 of			
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entere	ed on line	e 2 in block			
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be	e entered	I on line			
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.		064 perc	cent of the			
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.		\$	1,003,364.72			
	This is your minimum fee.	\$		10,675.80			
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. No—Leave block 3 below blank and continued the properties of t	mn 4, y	you mus	t check			
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	5,805.52			
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00			
	Line 3. Add lines 1 and 2 and enter here	\$		5,805.52			
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		\$	10,675.80	Cable systems		
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.	r		0.00	submitting additional deposits under		
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)(7) should contact the Licensing		
	Line 4. FILING FEE		\$	725.00	additional fees. Division for the		
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		11,400.80	appropriate form for submitting the additional fees.		
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See p	age (i) o	f the			

Marra	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#									
Name	BLUE RIDGE CABLE TECHNOLOGIES INC	29323									
	CHANNELS										
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations										
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the account	inting period.									
	Enter the total number of channels on which the cable	9									
	system carried television broadcast stations	······									
	2. Enter the total number of activisted shannels										
	Enter the total number of activated channels on which the cable system carried television broadcast stations										
	and nonbroadcast services	64									
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an indivi- we can contact about this statement of account.)	idual									
Individual to											
Be Contacted for Further		Telephone 610 926 9109									
Information	Name Carl Litwin	Telephone 610-826-9109									
	Address PO Box 215										
	(Number, street, rural route, apartment, or suite number)										
	Palmerton. Pa 18071 (City, town, state, zip)										
	(Oily, offin, otale, Elp)										
	Email Clitwin@pencor.com Fax (optional	al)									
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copy	right Office regulations.									
0											
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)										
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in	n line 1 of space B; or									
		•									
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the ow	vner of the cable system as identified									
	in line 1 of space B and that the owner is not a corporation or partnership; or										
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity	y identifed as owner of the cable system									
	in line 1 of space B.										
	I have examined the statement of account and hereby declare under penalty of law that all statements.										
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in g [18 U.S.C., Section 1001(1986)]	good raith.									
	V										
	/s/ David L. Masenheimer										
	Enter an electronic signature on the line above using an "/s/" signature to certify thi	is statement.									
	(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, pi "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabli										
		, , ,									
	Typed or printed name: David Masenheimer										
	Title: President										
	(Title of official position held in corporation or partnership)										
	Date: February 7, 2019										

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

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 2932	Namo
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Name Mailing Address Name Mailing Address Name Mailing Address	
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	_
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,	
space L, (page 7)	_
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served Accounting period ID number	

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

ACCOUNTING PERIOD: 2018/2

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	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	E 11. (CONTINUED)									
4	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
I	BLUE RIDGE CABLE T	ECHNOLOGIE	S INC			29323				
	SUM OF DSEs OF CATEGO									
	Add the DSEs of each station	4 ==								
	Enter the sum here and in lin	e 1 of part 5 of this	s schedule.		1.75					
•	Instructions:		-							
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3)									
Computation	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-									
of DSEs for										
Category "O"			CATEGORY "O" STATION	IS: DSEs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	WETM	0.250								
	WETM-2	1.000								
	WSKG	0.250								
	WVIA	0.250								
Add rows as						<u> </u>				
necessary.										
Remember to copy										
all formula into new										
rows.										
10113.										
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						<u> </u>				

Name		WNER OF CABLE SYSTEM							S	YSTEM ID#
	BLUE KIDGE	E CABLE TECHNO	LUGIES INC							29323
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.									
	CATEGORY LAC STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 3. NUMBER 4. BASIS OF 5. TYPE 6. DSE									
	SIGN	OF HO CARR SYSTI	OURS JED BY EM	OF H STA ON A	HOURS TION AIR	CARRIA VALUE	GE	VALUE		,_
						=				
						= =			=	
			÷		:	=	Х		=	
			÷		:				=	
			÷		:	=	X		=	
	01114 OF DOE	05.047500574.40	÷		•	=	X		<u> </u>	
	SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule,									
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).									
	4 0411					S: COMPUT			0 111111000	4 505
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUME OF DA IN YEA	YS	4. DSE	1. CALL SIGN	2. NUN OF PRO	OGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=				÷		=
			÷					÷		=
			+	=				÷		=
			÷ ÷	<u>-</u>				÷ ÷		=
	Add the DSEs of	OF SUBSTITUTE-BA of each station. m here and in line 3 of						0.00		
5		R OF DSEs: Give the a		e boxes in	parts 2, 3, and	I 4 of this schedu	ule and add the	em to provide	the tota	
Total Number	1. Number of	DSEs from part 2 ●					-		1.75	
of DSEs	2. Number of	DSEs from part 3 ●					<u> </u>		0.00	
	3. Number of	DSEs from part 4 ●					<u> </u>		0.00	
	TOTAL NUMBE	R OF DSEs						>		1.75

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

	OWNER OF CABLE		INC				S	YSTEM ID# 29323	Name
In block A: • If your answer if schedule.	ck A must be complete blooming complete blooming.	emainder of p	·	7 of the DSE scho	edule blank a	nd complete pa	art 8, (page 16) of	the	6
			BLOCK A: 1	ELEVISION M	ARKETS				Computation of 3.75 Fee
effect on June 24	m located wholly o , 1981? nplete part 8 of the plete blocks B and	schedule—E	•					gulations in	3.73166
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations Be DSE Scheme	ons prior to Judule. (Note: T	part 2, 3, and 4 o ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions fo E Carried pursus *F A station pre	lles and regued pursuant to as defined all educations of station (76.6 or DSE sched ant to individuations) restation with the station will be station well and regular to station will be station well and regular to the station well as the	ations cited b o the FCC ma I in 76.5(kk) (7 il station [76.5 55) (see paragule). ule). ual waiver of F d on a part-tir ithin grade-B	76.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding sure (76.7) ne or substitute bacontour, [76.59(d)(ose in effect of 6.57, 76.59(b) e)(1), 76.63(a) e3(a) referrint bstitution of go	n June 24, 198 a), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s	76.63(a) referring 76.61(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	
WSKG	C	0.25	SIGN	BASIS		SIGIN	BASIS		-
WVIA	С	0.25				-	†		
								0.50	
		R	OCK C: CC	MPUTATION O	F 3 75 FFF				
Line 1: Enter the	e total number of				3.731 LL				
Line 2: Enter the	e sum of permitte	d DSEs fror	n block B ab	ove			•		
	line 2 from line 1 leave lines 4–7 b			•		rate.	<u>.</u>		
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply	line 4 by 0.0375 a	and enter su	ım here				x		permited/ partially nonpermitted
Line 6: Enter tot	al number of DSI	Es from line	3				,		carriage? If yes, see part 9 instructions.
Line 7: Multiply	line 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

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LUE R	IDGE (CABLE TECH	NOLOGIES	SINC					29323	Name
		1	BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)	1		
1. CA SIG		2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
										Computation 6
<mark></mark>										0.70100
•••••••										
	••••••									
										
									•••••	
<mark></mark>										
<mark></mark>										
						 				
									••••••	
<mark></mark>				·		†				ĺ

Nama	LEGAL NAME OF OWN	IER OF CABLE	E SYSTEM:						S	YSTEM ID#	F:
Name	BLUE RIDGE C	ABLE TEC	HNOLOGIES I	NC						29323	;
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fot A—Part-time spi 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Comparion block	or to June 25, call sign for ear the DSE for the DSE for the accounting the basis of CC rules and ecialty progra (d)(1),76.61(e rogramming: (e)(3)). Carriage under all instructions the station's Ite the DSE figures information you information you	1981, under forme ach distant station his station for a sing period and year arriage on which the regulations cited be mming: Carriage, ()(1), or 76.63 (refe Carriage under FC certain FCC rules, in the paper SA3 DSE for the curren ures listed in columof part 6 for this state ungive in columns	er FCC rules govidentifed by the gle accounting in which the car ne station was collow pertain to a part-time bearing to 76.61(e) C rules, section regulations, or form. t accounting per and 5 and attion. 2, 3, and 4 musting the gle and 5	ver let perria arritho asi asi (1) (1) aurio lis	entifed by the letter "F" rning part-time and subtter "F" in column 2 of priod, occurring between the seand DSE occurred of the seand DSE occurred by listing one of the seand part of the seand	estitute carri part 6 of the n January 1 (e.g., 1981/ e following 4, 1981. nming unde), or 76.63 (er explanation 2, 3, and 4 o figures he	age. DSE schedule, 1978 and Jun 1) letters r FCC rules, se referring to on, see page (v of this schedu	ene 30, 19 ections vi) of the should be	981 ne entere	
		DEDMITT	ED DSE EOD ST	TIONS CAPPII	ΕD	ON A PART-TIME AN	ID SLIBSTI	TI ITE BASIS			_
	1. CALL	2. PRI		COUNTING		4. BASIS OF		RESENT	6 P	ERMITTED	_
	SIGN	DSE		ERIOD		CARRIAGE		DSE	0.1	DSE	
	0.014			_				-		BOL	Ħ
					••••						•••
											•••
											•••
											···
											_
7 Computation of the	,	"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											
Surcharge	• Is any portion of the o	cable system v	vithin a top 100 maj	or television mar	ke	t as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?	
	Yes—Complete	blocks B and	IC.		_	X No—Proceed to	part 8				
		· · · · · · · · · · · · · · · · · · ·	F/Grade B Contou		_	BLOCK	C: Compu	tation of Exem	pt DSEs	3	
	Is any station listed in commercial VHF stati or in part, over the ca	on that places				Was any station listed nity served by the cab to former FCC rule 76	le system p				
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	in I	DSE	
	, III 3.3.1		3.3					2. 22 310			
				<u> </u>							
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 29323	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,003,364.72	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 Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE .	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

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Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
- Hamo	I	BLUE RIDGE CABLE TECHNOLOGIES INC	29323
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge.	
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge	
		cynalouted Exclusivity Curonal go	
	Instru	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p	art
_		checked "Yes," use the total number of DSEs from part 5.	
Computation	_	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	• If you blank	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	low
Dase Nate Fee		. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "located outside that area."	al
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did v	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	_	X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
		(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section	· /	
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	-
		Base Rate Fee	0.00

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
BLUE	RIDGE CABLE TECHNOLOGIES INC	29323	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	in the figure in section 2 is more than 4.000, compute your base rate fee field and leave section 5 blank.		8
	A. Enter 0.01064 of gross receipts		0
	(the amount in section 1) \$	_	
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) \$		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here >	_	
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here > \$		
	G. Add lines A, C, and F. This is your base rate fee.	———— I	
	Enter here and in block 3, line 1, space L (page 7)	0.00	
	Base Rate Fee	0.00	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	st signals shall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel		9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation
•	s from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:	dvantage of this	of
			Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine		Syndicated
DSEs a	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for		Exclusivity Surcharge
-	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in properties a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
	For each community served, determine the local service area of each wholly distant and each partially distant states that community.	ion you	Stations
Step 2	to that community. For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo the station's local service area. A subscriber located outside the local service area of a station is distant to that station.		
	ne token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compt groups	ating the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system.	em's subscriber	
-	section:		
	fy the communities/areas represented by each subscriber group.		
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.	of the	
• If:			
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in fthis schedule; or,	n parts 2, 3,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,	
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	nstructions	
Comp page.DSEs f	the a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the in making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	at is, the total	

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ACCOUNTING PERIOD: 2018/2 DSE SCHEDULE. PAGE 18. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 29323 **BLUE RIDGE CABLE TECHNOLOGIES INC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

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		BER GROUP	BSCRIB	S FOR EACH	BASE RAT	COMPUTATION OF	LOCK A: C	В
•	IP	SUBSCRIBER GROU	COND S		Р	SUBSCRIBER GROU	FIRST	
9 Computa	ranch Twr	Pike Twp,West B	leton,F	MUNITY/ AREA	ırg,Liber	ld,Arnot,Blossbu		COMMUNITY/ AREA
of	DSE	CALL SIGN	SE	L SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate			0.25	М			0.25	WSKG
and			1.00	M-2			0.25	WVIA
Syndica			0.25	4				
Exclusiv			Ш					
Surcha			Ш					
for					<u> </u>			
Partial					<u> </u>			
Distar			Ш					
Station								
					<u> </u>			
	1.50			OSEs	0.50			otal DSEs
	52,988.08	s 5	oup	Receipts Secon	644.90	\$ 300	roup	Gross Receipts First G
	749 52	¢	oun	Pate Fee Second	599 43	e 1	roun	Raso Pato Foo First G
	749.52	\$ SUBSCRIBER CROU		Rate Fee Second	,599.43		•	3ase Rate Fee First G
	IP .	\$ SUBSCRIBER GROU			P	SUBSCRIBER GROU	THIRD	
				Rate Fee Second	P	SUBSCRIBER GROU	THIRD	
	IP .				P	SUBSCRIBER GROU	THIRD S Charles DSE	COMMUNITY/ AREA
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	THIRD S Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN NSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	THIRD S Charles DSE	COMMUNITY/ AREA CALL SIGN VSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	THIRD S Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN VSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	THIRD S Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN VSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN NSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN NSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN VSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN VSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN NSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN NSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN WSKG WVIA
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN NSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN NSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN VSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	COMMUNITY/ AREA CALL SIGN VSKG
	0 0	SUBSCRIBER GROU	URTH S	//UNITY/ AREA	P an,Farm	SUBSCRIBER GROU ton,Delmar,Dunc	Charles DSE 0.25	CALL SIGN WSKG WVIA
	DSE	SUBSCRIBER GROU	SE	MUNITY/ AREA	DSE	CALL SIGN	THIRD S Charles DSE 0.25 0.25	COMMUNITY/ AREA CALL SIGN NSKG

DLUE KIDGE CABLE 16	ABLE SYSTEM: CHNOLOGIES IN	C				YSTEM ID# 29323	Name
	A: COMPUTATION C		TE FEES FOR EAC				
	TH SUBSCRIBER GRO		 		I SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0	Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
		<mark></mark>					and
		····					Syndicat Exclusiv
							Surchar
							for
							Partiall Distan
		····					Station
		<u></u>					
		····					
		····					
Total DSEs		0.00	Total DSEs		•	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
sioss receipts i list Gloup	<u>\$</u>	0.00	Gross Receipts Sec	ond Group	<u>\$</u>		
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	TH SUBSCRIBER GRO	OUP		EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	0.00	Total DSEs	DSE	CALL SIGN	DSE	
Total DSEs	CALL SIGN				CALL SIGN		
Total DSEs		0.00	Total DSEs			0.00	
CALL SIGN DSE CALL SIGN Total DSEs Gross Receipts Third Group Base Rate Fee Third Group		0.00	Total DSEs	orth Group		0.00	

BEGE RIDGE GABLE		E SYSTEM: I NOLOGIES INC	:				YSTEM ID# 29323	Name
				ATE FEES FOR EAC				
	NTH S	SUBSCRIBER GRO		 		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computa
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
			<u>-</u>		<u></u>			and Syndicat
					·····			Exclusiv
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			<u> </u>					for
			<u> </u>					Partiall Distan
			<u></u>					Station
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			<u>-</u>	-				
			<u>-</u>		••••			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Group	-	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
oroso rescripto i irst Group	- -		0.00	Cross receipts eee	ona Oroap			
Base Rate Fee First Group	<u>ا</u>	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ELEVE	NTH S	SUBSCRIBER GRO	UP		TWELVTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DS	E	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
	E	CALL SIGN	DSE	Total DSEs		CALL SIGN		
Fotal DSEs		CALL SIGN			DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs	DSE		DSE	
CALL SIGN DS CALL SIGN DS Total DSEs Gross Receipts Third Group Base Rate Fee Third Group			0.00	Total DSEs	DSE		DSE	

BLUE RIDGE CABLE TE	ABLE SYSTEM: ECHNOLOGIES INC	:				29323	Name
	A: COMPUTATION C						<u> </u>
	TH SUBSCRIBER GRO		111		SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0	Comput
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rat
							and Syndica
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							Surcha
							for
							Partia Distai
							Statio
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otal DSEs		0.00	Total DSEs	•		0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
oloss Necelpts I list Gloup	4	<u> </u>	Gloss Receipts Sec	ond Group	Ψ		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTEEN	TH SUBSCRIBER GRO	OUP		SIXTEENTH	I SUBSCRIBER GROU	JP	
	TH SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		I SUBSCRIBER GROU	JP 0	
OMMUNITY/ AREA			COMMUNITY/ ARE		SUBSCRIBER GROU		
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
COMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
OMMUNITY/ AREA		0		Α		0	
CALL SIGN DSE		0		Α		0	
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	
CALL SIGN DSE	CALL SIGN	0 DSE	Total DSEs	DSE	CALL SIGN	0 DSE	
COMMUNITY/ AREA	CALL SIGN	0 DSE	Total DSEs	DSE	CALL SIGN	0 DSE	

BLUE RIDGE CABLE TE	ABLE SYSTEM: CHNOLOGIES INC	<u> </u>				YSTEM ID# 29323	Nan
	A: COMPUTATION C						
	TH SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0	Comput
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Ra
							and
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		••••					Surcha
							for
							Partia Dista
		····					Statio
		••••					
otal DSEs	•	0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	<u>·</u>				·		
sase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINTEEN	TH SUBSCRIBER GRO	OUP		TMENITIETL	L CLIDCODIDED ODOL	ID.	
			H	IVVENILEIL	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	0 0	
	CALL SIGN		li		CALL SIGN		
		0	COMMUNITY/ ARE	Α		0	
		0	COMMUNITY/ ARE	Α		0	
		0	COMMUNITY/ ARE	Α		0	
		0	COMMUNITY/ ARE	Α		0	
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		0	COMMUNITY/ ARE	Α		0	
		0	COMMUNITY/ ARE	Α		0	
		0	COMMUNITY/ ARE	Α		0	
		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	
CALL SIGN DSE	CALL SIGN	0 DSE	COMMUNITY/ ARE CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	
CALL SIGN DSE CALL SIGN DSE Fotal DSEs Gross Receipts Third Group	CALL SIGN	0 DSE	COMMUNITY/ ARE CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	

	29323					HNOLOGIES INC	R OF CABL	BLUE RIDGE CAE
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (В
۵	JP	SUBSCRIBER GROU	Y-SECOND	H		SUBSCRIBER GRO	TY-FIRST	
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F					<u> </u>		<mark>.</mark>	
and Syndicate					<u>.</u>	-	<mark></mark>	
Exclusivi			······································		<u>.</u>		<u>.</u>	
Surcharg								
for								
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Distant					<u>.</u>		<mark></mark>	
Stations			<u> </u>		<u>.</u>			
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	Y-FOURTH	TWENT	UP	SUBSCRIBER GRO	TY-THIRD	TWEN
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
				- COMMONT IT AREA				
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
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	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE	CALL SIGN		CALL SIGN	DSE	
	0.00			Total DSEs	0.00	CALL SIGN		Total DSEs
		CALL SIGN		CALL SIGN		CALL SIGN		CALL SIGN Cotal DSEs Gross Receipts Third Cotal DSEs

Name								
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: C	Bl
9		SUBSCRIBER GROU	NTY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndical Exclusiv			-					
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
				•				
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	0.00	\$		Base Rate Fee Secon	0.00	\$		
 - -	0.00	\$ SUBSCRIBER GROU		Base Rate Fee Secon	JP	\$ SUBSCRIBER GROU		TWENTY-S
	0.00			Base Rate Fee Secon				TWENTY-S
=	0.00			Base Rate Fee Secon	JP			TWENTY-S
=	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
- - - -	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
- - - - -	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
- - - - - -	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
-	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
-	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	0.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	TWENTY-S
	O.00	SUBSCRIBER GROL	Y-EIGHTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	SEVENTH	TWENTY-S COMMUNITY/ AREA CALL SIGN
	0.00 JP DSE 0.00	SUBSCRIBER GROL	Y-EIGHTH DSE	Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE	TWENTY-SCOMMUNITY/ AREA CALL SIGN Fotal DSEs
	O.00	SUBSCRIBER GROL	Y-EIGHTH DSE	Base Rate Fee Secon TWENT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	TWENTY-SCOMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 JP DSE 0.00	CALL SIGN	Y-EIGHTH DSE	Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

	ECHNOLOGIES IN	С			3	YSTEM ID# 29323	Name
	A: COMPUTATION (TE FEES FOR EAG				
	TH SUBSCRIBER GR				H SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A			Computati
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate F
							and
		·····					Syndicate
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		••••					for
							Partially
				<u></u>			Distant
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		••••					
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIRTY-FIR	ST SUBSCRIBER GR	OUP	THIF	RTY-SECONE	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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				······			
		••••					
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
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	COMPUTATION O		TE FEES FOR EAC				
COMMUNITY/ AREA	SUBSCRIBER GRO	UP	THIF	TY-FOLIRTH	LOUDOODIDED ODOL		
			İ		I SUBSCRIBER GROU		9
		0	COMMUNITY/ ARE	Α		0	Computati
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
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							Syndicate
		<u></u>				····	Exclusivi Surcharg
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		<u></u>					Partially
							Distant
							Stations
		<u></u>					
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			1				
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Stood Roddipto Filet Group	<u>*</u>		C1000 1000 pt0 000	ona Group	<u>*</u>		
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIRTY-FIFT	H SUBSCRIBER GRO)UP	TI	HIRTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
<u> </u>		<u></u>					
							
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		<u></u>					
		<u></u>					
			·	·····			
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

LEGAL NAME OF OWN BLUE RIDGE CA			:			S	YSTEM ID# 29323	Name
I	BLOCK A: (COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		H		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
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	<u></u>		<u></u>			. -		
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THII	RTY-NINTH	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	····	-		·				
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			···			-		
	••••		<u></u>		•••••			
Total DSEs			0.00	Total DSEs	•	-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWI BLUE RIDGE CA			:			S	YSTEM ID# 29323	Name
	BLOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		H		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
	····							Surcharge for
				·				Partially
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								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	
FO	RTY-THIRD	SUBSCRIBER GRO	DUP	FOF	RTY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				·				
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			····					
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

		E SYSTEM: INOLOGIES INC				S	YSTEM ID# 29323	Name
				TE FEES FOR EAC				
	/-FIFTH	SUBSCRIBER GRO		1		H SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
					<u></u>			and Syndicat
								Syndicat Exclusiv
								Surchar
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								Partiall Distan
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Γotal DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gro	un	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
orosa receipta i iist Gro	цρ	<u>4</u>	0.00	Gloss Receipts Sec	ona Group	4	0.00	
Base Rate Fee First Grou	up	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-SE	VENTH	SUBSCRIBER GRO	UP	FOI	RTY-EIGHTH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>		····			
					·····			
otal DSEs			0.00	Total DSEs			0.00	
	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third Gro								
Gross Receipts Third Gro			1			i		

FEES FOR EACH SUBSCRIBER GROUP FIFTIETH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE Base Rate F			LE IECE	BLUE RIDGE CAB
CALL SIGN DSE CALL SIGN DSE Of	JP			
CALL SIGN DSE CALL SIGN DSE of		SUBSCRIBER GROU	Y-NINTH	
CALL SIGN DSE CALL SIGN DSE of	0			COMMUNITY/ AREA
Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN
and				
Syndicated			ļ	
Exclusivity				
Surcharge		-	·	
for Partially			·	
Distant			·	
Stations			·	
		-		
	ļ		<u> </u>	
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otal DSEs	0.00			Total DSEs
Gross Receipts Second Group \$ 0.00	0.00	\$	roup	Gross Receipts First G
				·
sase Rate Fee Second Group \$ 0.00	0.00	\$	roup	Base Rate Fee First G
FIFTY-SECOND SUBSCRIBER GROUP	JP	SUBSCRIBER GROU	TY-FIRST	FIF
COMMUNITY/ AREA	0			COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN
	·····		· ····-	
		-		
otal DSEs	0.00			Fotal DSEs
otal DSEs 0.00	0.00			
otal DSEs 0.00 Gross Receipts Fourth Group \$ 0.00	0.00	\$	Group	
	_	\$	iroup	Total DSEs Gross Receipts Third G

	ABLE SYSTEM: CCHNOLOGIES IN	С			3	YSTEM ID# 29323	Name
BLOCK A	A: COMPUTATION (OF BASE RA	ATE FEES FOR EA	CH SUBSCF	RIBER GROUP		
	RD SUBSCRIBER GR		tt -		I SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	:A		0	Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
							and
							Syndicat
			-				Exclusiv Surchar
				•••••			for
							Partiall
							Distan
							Station
				•••••			
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	cond Group	\$	0.00	
	TH SUBSCRIBER GR	OUP		FIFTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0	
COMMUNITY/ AREA CALL SIGN DSE	CALL SIGN	DSE	COMMUNITY/ ARE		CALL SIGN		
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
CALL SIGN DSE	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN			Α		0	
	CALL SIGN	DSE		Α		DSE	
CALL SIGN DSE		DSE	Total DSEs	DSE	CALL SIGN	0 DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE		DSE	

		E SYSTEM: INOLOGIES INC	;				YSTEM ID# 29323	Name
				TE FEES FOR EAC				
	/ENTH	SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computat
CALL SIGN I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicat Exclusiv
			•••				••••	Surcharg
								for
								Partially
								Distant
							····	Stations
				1		•		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Grou	ıp	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Grou	р	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTY-	NINTH	SUBSCRIBER GRO	UP		SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-			·····	
				·				
			 					
			···				····	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gro	up	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
					-			
				11		1		

	LE IECI	INOLOGIES INC	;				29323	Name
BI	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAG	CH SUBSCR	RIBER GROUP		
	TY-FIRST	SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
			<u></u>					and
	·		<u></u>	·				Syndicat Exclusiv
								Surchar
								for
								Partiall
								Distan
			<u></u>					Station
	·						····	
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GRO)UP	SIX	(TY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
	-				·····		····	
			<u></u>					
	·		<u></u>					
				1				
······								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
		e fees for each subs						

LEGAL NAME OF OWN BLUE RIDGE CA						S	YSTEM ID# 29323	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>							and Syndicated
		-						Exclusivity
								Surcharge
								for Partially
								Distant
	<u></u>							Stations
	····				···			
	<mark></mark>							
	····				···			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
·	•				•			
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		II		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		1	0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
11111000,510 111110		•						
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

BLUE RIDGE CABLE TE	ABLE SYSTEM: CHNOLOGIES INC	C			·	YSTEM ID# 29323	Name
BLOCK /	A: COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	TH SUBSCRIBER GRO				I SUBSCRIBER GRO		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Computati
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate I
							and
				<mark>.</mark>			Syndicate
							Exclusivi Surcharg
		···	·				for
							Partially
							Distant
							Stations
		<u></u>			<u> </u>	<u></u>	
		<u></u>		•••••			
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
roos roospie riist sieup	<u>*</u>			oa	<u>*</u>		
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	\$ ST SUBSCRIBER GRO				\$ SUBSCRIBER GROU		
SEVENTY-FIR				TY-SECOND			
SEVENTY-FIR	ST SUBSCRIBER GRO	OUP	SEVEN	TY-SECOND		UP	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR COMMUNITY/ AREA	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR COMMUNITY/ AREA	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR COMMUNITY/ AREA	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR COMMUNITY/ AREA	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR COMMUNITY/ AREA	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR COMMUNITY/ AREA CALL SIGN DSE	ST SUBSCRIBER GRO	0 0	SEVEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	UP 0	
SEVENTY-FIR COMMUNITY/ AREA CALL SIGN DSE	ST SUBSCRIBER GRO	DSE	SEVEN COMMUNITY/ AREA CALL SIGN	TY-SECOND A DSE	SUBSCRIBER GRO	DSE	
SEVENTY-FIR COMMUNITY/ AREA CALL SIGN DSE	CALL SIGN	DSE	SEVEN COMMUNITY/ AREA CALL SIGN Total DSEs	TY-SECOND A DSE	CALL SIGN	DSE O.00	
COMMUNITY/ AREA	CALL SIGN	DSE	SEVEN COMMUNITY/ AREA CALL SIGN Total DSEs	TY-SECOND A DSE	CALL SIGN	DSE O.00	

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# SLUE RIDGE CABLE TECHNOLOGIES INC 29323									
BLOCK A	A: COMPUTATION (OF BASE RA	ATE FEES FOR EAG	CH SUBSCF	RIBER GROUP					
	RD SUBSCRIBER GR		 		SUBSCRIBER GRO		9			
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				Computati			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
							Base Rate			
						<u></u>	and			
				·····			Syndicate Exclusivi			
		••••	-		-		Surcharg			
							for			
							Partially			
							Distant			
							Stations			
						<u></u>				
					•					
Total DSEs		0.00	Total DSEs			0.00				
Gross Receipts First Group	0.00	Gross Receipts Sec	ond Group	\$	0.00					
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00				
SEVENTY-FIF7	H SUBSCRIBER GR	OUP	SEV	'ENTY-SIXTH	SUBSCRIBER GRO	UP				
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
					•					
						•••••				
Total DSEs	-	0.00	Total DSEs			0.00				
Gross Receipts Third 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				
·			11							

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# BLUE RIDGE CABLE TECHNOLOGIES INC 29323									
BLOCK	A: COMPUTATIO	N OF BASE RA	ATE FEES FOR EA	CH SUBSCF	RIBER GROUP				
	ITH SUBSCRIBER		SEVENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				9		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Computation					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
							Base Rate Fe		
				<u></u>			and		
				·····			Syndicated Exclusivity		
							Surcharge		
							for		
							Partially		
							Distant		
							Stations		
				·····		<u></u>			
				•••••		·····			
Total DSEs	-	0.00	Total DSEs			0.00			
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00			
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00			
SEVENTY-NIN	ITH SUBSCRIBER	GROUP		EIGHTIETH	SUBSCRIBER GRO	UP			
COMMUNITY/ AREA		0	COMMUNITY/ ARE	:A		0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
				<u> </u>		<u> </u>			
				·····					
				·····					
	·····			•••••					
Total DSEs		0.00	Total DSEs			0.00			
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00			
	<u>*</u>			C. 54p					
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00			
e Third Group	\$	0.00		irth Group					

	EIGH1			ID		
COMMUNITY/ AREA 0 C		TY-SECOND	SUBSCRIBER GROU	ID		
		EIGHTY-SECOND SUBSCRIBER GROUP				
	COMMUNITY/ AREA 0					
CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
					Base Rate F	
					and	
					Syndicate	
		····		<u></u>	Exclusivit Surcharge	
		····			for	
					Partially	
					Distant	
<u> </u>					Stations	
		••••	-			
Fotal DSEs	otal DSEs			0.00		
Gross Receipts First Group \$ 0.00 G	Gross Receipts Seco	and Group	\$	0.00		
Base Rate Fee First Group \$ 0.00	ase Rate Fee Seco	and Group	\$	0.00		
EIGHTY-THIRD SUBSCRIBER GROUP	EIGH	TY-FOURTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	COMMUNITY/ AREA	١		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 To	otal DSEs			0.00		
Gross Receipts Third Group \$ 0.00 G	Gross Receipts Four	th Group	\$	0.00		
		•				
Base Rate Fee Third Group \$ 0.00	sase Rate Fee Four	th Group	\$	0.00		

	EGAL NAME OF OWNER OF CABLE SYSTEM: SLUE RIDGE CABLE TECHNOLOGIES INC 29323									
	A: COMPUTATION C		TE FEES FOR EA	CH SUBSCR	RIBER GROUP					
	H SUBSCRIBER GRO			EIGHTY-SIXTH SUBSCRIBER GROUP			9			
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				Computati			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
							Base Rate			
							and			
							Syndicate			
<u> </u>							Exclusivi			
				·····			Surcharg for			
							Partially			
		····		•••••			Distant			
		••••					Stations			
				<u></u>						
					<u> </u>					
otal DSEs	-	0.00	Total DSEs		-	0.00				
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00				
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00				
EIGHTY-SEVENT	H SUBSCRIBER GRO	DUP	EIG	HTY-EIGHTH	I SUBSCRIBER GRO	JP				
COMMUNITY/ AREA		0	COMMUNITY/ ARE	:A		0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
		••••				••••				
Fotal DSEs		0.00	Total DSEs			0.00				
	\$	0.00	Total DSEs Gross Receipts Fol	urth Group	\$	0.00				
Fotal DSEs Gross Receipts Third Group	\$			urth Group	\$	_				

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# BLUE RIDGE CABLE TECHNOLOGIES INC 29323									
[BLOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP				
		SUBSCRIBER GRO		<u> </u>	NINTIETH 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 F		
								and		
			····		·····			Syndicated Exclusivity		
								Surcharge		
								for		
								Partially		
					<u></u>			Distant Stations		
	····		····		······		····	Stations		
		_								
	<u></u>				<u></u>					
Fotol DSFo		<u> </u>	0.00	Total DSEs			0.00			
otal DSEs 0.00							3			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
NIN	ETY-FIRST	SUBSCRIBER GRO	OUP	NINE	TY-SECONE	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			····							
	····		····		······		····			
		_								
		_								
		_								
	····		····		·····					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00			
				<u>II</u>						
3ase Rate Fee: Add	the base rat	te fees for each sub	scriber aroun	as shown in the boxe	es above.					
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$				

BLOCK A: COMPUTATION OF BASE NINETY-THIRD SUBSCRIBER GROUP MMUNITY/ AREA ALL SIGN DSE CALL SIGN DSE	0 CO		Y-FOURTH	SUBSCRIBER GROU	0	9
MMUNITY/ AREA		MMUNITY/ AREA			0	9
			1			9
	SE C		1			Computati
			DOL	CALL SIGN	DSE	of
						Base Rate I
						and
						Syndicate
						Exclusivit Surcharg
		•••••				for
						Partially
						Distant
<u> </u>						Stations
al DSEs	00 Tot	al DSEs			0.00	
ss Receipts First Group \$ 0.0	00 Gro	ss Receipts Secon	d Group	\$	0.00	
						
se Rate Fee First Group \$ 0.0	00 Bas	se Rate Fee Secon	d Group	\$	0.00	
NINETY-FIFTH SUBSCRIBER GROUP	_		ETY-SIXTH	SUBSCRIBER GROU		
MMUNITY/ AREA	CO	MMUNITY/ AREA			0	
ALL SIGN DSE CALL SIGN DS	SE C	ALL SIGN	DSE	CALL SIGN	DSE	
<u> </u>						
<u> </u>						
	00 Tot	al DSEs			0.00	
al DSEs	— II ~			_	0.00	
al DSEs 0.0 pss Receipts Third Group \$ 0.0		ss Receipts Fourth	Group	\$	0.00	
		ss Receipts Fourth	n Group	\$		
	00 Gro	ess Receipts Fourth	·	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 29323									
PUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
CRIBER GROUP NINETY-EIGHTH SUBSCRIBER GROUP	9								
0 COMMUNITY/ AREA 0	Computat								
LL SIGN DSE CALL SIGN DSE CALL SIGN DSE	of								
B	Base Rate								
	and								
	Syndicat Exclusiv								
	Surcharg								
	for								
	Partially								
	Distant								
	Stations								
0.00 Total DSEs									
0.00 Gross Receipts Second Group \$ 0.00									
0.00 Base Rate Fee Second Group \$ 0.00									
CRIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP									
0 COMMUNITY/ AREA 0									
LL SIGN DSE CALL SIGN DSE CALL SIGN DSE									
0.00 Total DSEs 0.00									
1									

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# BLUE RIDGE CABLE TECHNOLOGIES INC 29323									
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP				
ONE HUNDF	RED FIRST	SUBSCRIBER GRO	UP	ONE HUNDR	ED SECOND	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		
	<u></u>							Base Rate Fe and		
	···	-	<u></u>					Syndicated		
			······································	·				Exclusivity		
								Surcharge		
		-	<u> </u>					for		
			<u></u>					Partially		
	···		<u></u>					Distant Stations		
		-						Stations		
			<u> </u>							
			<u></u>							
Total DSEs			0.00	Total DSEs		-	0.00			
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
ONE HUNDR	ED THIRD	SUBSCRIBER GRO	UP	11		I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	···		<u></u>							
	···									
			<u></u>							
			<u></u>							
			<u>-</u>							
			<u></u>							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
C.000 Receipts Tillu	Стоир	<u>*</u>	0.00	- Si Soo Receipte Fou	.ar Group	*	0.00			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	es above.	\$				

29323		EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# BLUE RIDGE CABLE TECHNOLOGIES INC 29323									
ON OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	SCRIBER	R EACH S	ATE FEES I	BASE R	OMPUTATION OF	OCK A: C	BL				
<u> </u>	ONE HUNDRED SIXTH SUBSCRIBER GROUP				SUBSCRIBER GROU	ED FIFTH					
O COMMUNITY/ AREA O Computation	COMMUNITY/ AREA 0						COMMUNITY/ AREA				
	11		- 11	DSE	CALL SIGN	DSE	CALL SIGN				
Base Rate F											
and											
Syndicate	·····			.							
Exclusivit Surcharge				<u>.</u>		ļ					
for											
Partially											
Distant											
Stations	·····										
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0.00 Total DSEs 0.00	11		Total DSE	0.00			otal DSEs				
		te Second (-								
0.00 Gross Receipts Second Group \$ 0.00	up <u>\$</u>	is Second C	- GIUSS REC	0.00	\$	oup	31055 Receipts Filst Gi				
0.00 Base Rate Fee Second Group \$ 0.00	up \$	e Second C	Base Rate	0.00	\$	oup	Base Rate Fee First Gr				
GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP	SHTH SUB	IUNDRED I	10	JP	SUBSCRIBER GROU	SEVENTH:	ONE HUNDRED S				
O COMMUNITY/ AREA O		/ AREA	COMMUN	0			COMMUNITY/ AREA				
DSE CALL SIGN DSE CALL SIGN DSE	E C/	1	CALL SI	DSE	CALL SIGN	DSE	CALL SIGN				
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0.00 Total DSEs			Total DSE	0.00			Total DSEs				
	p \$	ts Fourth Gi	Gross Red	0.00	\$	roup	Gross Receipts Third G				
	p <u>\$</u>	ts Fourth G	Gross Red	0.00	\$	roup	Gross Receipts Third G				

	LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 29323									
				TE FEES FOR EACH						
9		SUBSCRIBER GROU			SUBSCRIBER GRO	ED NINTH				
Computation	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate F			<u> </u>			 				
and			<u></u>			H				
Syndicated Exclusivity	<u></u>		<mark></mark>			H				
Surcharge										
for										
Partially			<u></u>			 				
Distant			<u></u>			H				
Stations						H				
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	2.22					<u> </u>				
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G		
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	Group	3ase Rate Fee First G		
	JP	SUBSCRIBER GROU	TWELVTH	ONE HUNDRED	UP	SUBSCRIBER GRO	LEVENTH	ONE HUNDRED E		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	<u></u>		<u></u>			H	···			
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						<u> </u>				
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	n Group	Total DSEs Gross Receipts Fourt	0.00	\$	Group	Fotal DSEs Gross Receipts Third (

LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 29323									
B ONE HUNDRED THI				ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	IP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
					·····			Base Rate Fe	
								Syndicated	
	<u> </u>							Exclusivity Surcharge	
								for	
								Partially Distant	
								Stations	
			0.00				2.00		
Total DSEs	`roun	<u> </u>	0.00	Total DSEs	and Croup	•	0.00		
Gross Receipts First G	oroup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00		
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GRO	0 0	ONE HUNDRED		1 SUBSCRIBER GROU	JP 0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	<u> </u>								
Fotal 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		
	ne base ra	te fees for each subs		Base Rate Fee Fou		\$	0.00		

LEGAL NAME OF OWN BLUE RIDGE CAI						S	YSTEM ID# 29323	Name
В	BLOCK A: (COMPUTATION O	BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	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
07.122 0.011	302	0,422 0.0.1	332	07.122.01.01.1	202	07.22 0.0.1	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
			<u> </u>		·····			Partially Distant
	···		<u> </u>		·····			Stations
								Otations
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Cross rescipto i not c	эгоар		0.00	Cross receipts dec	ond Group	<u>*</u>	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED N	NTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···							
		-						
					·····			
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
C. SOO TOOGIPIO TIIII'U	oup	<u>-</u>			O. Jup	<u>*</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER BLUE RIDGE CAE						S	YSTEM ID# 29323	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED TWEN	TY-SECONE	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIT	DOL	O/ LEE OF OF T	DOL	O'NEE GIGIT	DOL	O/ALL GIGIT	DOL	Base Rate Fee
								and
					<u> </u>			Syndicated
								Exclusivity
								Surcharge
								for
								Partially
		-			<u></u>			Distant
								Stations
					<u></u>			
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	···							
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
						·		
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TWEE	NTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	ITY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<u></u>			
								
		-						
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		-			<u></u>			
					<mark></mark>			
	···							
Total DSEs			0.00	Total DSEs			0.00	
	Croup	<u> </u>	0.00		h Croup		0.00	
Gross Receipts Third (σισαμ	\$	0.00	Gross Receipts Fourt	ιι σιυυρ	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW BLUE RIDGE CA		LE SYSTEM: HNOLOGIES INC				S	YSTEM ID# 29323	Name
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EACH		RIBER GROUP)	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<mark></mark>			Base Rate Fee
					<u></u>			and Syndicated
								Exclusivity
					<u> </u>			Surcharge
					<u></u>			for Partially
					<u>-</u>			Distant
								Stations
					<u>-</u>			
					<u>-</u>			
					<u> </u>			
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROUP		ii .		SUBSCRIBER GROUP)	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
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					<u> </u>			
Total DSEs			0.00	Total DSEs		II	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI BLUE RIDGE CA			;			S	YSTEM ID# 29323	Name
		COMPUTATION C		ATE FEES FOR EAC		RIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fe and
	••••							Syndicated
								Exclusivity
		<u> </u>		-				Surcharge for
								Partially
	····							Distant Stations
								Stations
		<u> </u>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU		ii e		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>							
		 						
		<u> </u>	···					
		<u> </u>						
		-	<u></u>					
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	
ird	Group the base ra	\$	0.00	Gross Receipts Fou	rth Group		0.00	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP THIRTY-THIRD SUBSCRIBER GROUP ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA Compu
EA 0 COMMUNITY/ AREA 0
o ominoral in the contract of
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE O
Base Ra
an an
Syndi Exclu
Surch
fo
Parti
Dist
Stati
rst Group \$ 0.00 Gross Receipts Second Group \$ 0.00
rst Group \$ 0.00 Base Rate Fee Second Group \$ 0.00
THIRTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP
EA 0 COMMUNITY/ AREA 0
DSE CALL SIGN DSE CALL SIGN DSE
<u></u>
<u></u>
0.00 Total DSEs 0.00
nird Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00
1 111

LEGAL NAME OF OWN			;			S	YSTEM ID# 29323	Name
В	LOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED THIRTY	'-SEVENTH	SUBSCRIBER GROU		H		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.22 0.0.1	362	07.122.01.01.1	302	07.122.01.01.1	302	0/122 0.0.1	302	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
			 					for
					·····			Partially Distant
	···		···					Stations
								Otations
							••••	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roun	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
orosa recorpto i mor e	лоар		0.00	arous receipts eec	ond Group	*	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THI	RTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRE	D FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
	···	-						
	···	-	···	·				
		 						
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		-						
	···		 		·····			
			···					
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	•	0.00	Gross Receipts Fou	urth Croup	¢	0.00	
Cross recogipts millu	J. Oup	\$	0.00	1033 Receipts Fou	ii ai Gioup	\$	3.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add to Enter here and in bloc			scriber group	as shown in the boxe	es above.	\$		

Name	29323	S'						LEGAL NAME OF OWNE BLUE RIDGE CAB
		BER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	_OCK A: (BL
9		SUBSCRIBER GROUP	TY-SECOND			SUBSCRIBER GROUP	RTY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
•••	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated								
Exclusivity Surcharge			-					
for			-					
Partially						-		
Distant								
Stations								
			-					
	0.00		•	Total DSEs	0.00		'	otal DSEs
_	0.00	¢	nd Group	Gross Receipts Secor	0.00	¢	roup	Gross Receipts First G
_	0.00	\$	ia Group	Gross Receipts Secon	0.00	\$	roup	510SS Receipts Filst G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FOR	1	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR
O	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			-					
			-				·	
						-	·	
						-		
							-	
							·	
	0.00			Total DSEs	0.00			Total DSEs
_	0.00	- - s	n Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	
_	-	\$	n Group		_	\$	Group	Fotal DSEs Gross Receipts Third G

LEGAL NAME OF OWNE						S	YSTEM ID# 29323	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
ONE HUNDRED FO	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED F	ORTY-SIXTH	H SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0,122 0.0.1	202	07.122.01.01.1	302	07.122 01011	100	07.22 0.0.1	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
	<mark></mark>							Distant
								Stations
					<u></u>			
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		-				•		
	···							
	<u></u>							
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHTH	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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		-					••••	
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Total DSEs			0.00	Total DSEs		-11	0.00	
Gross Receipts Third (Group	•	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Cross Necelpts Tillia	υ ιουμ	\$	3.00	Orosa Neceibis Lonii	ii Gioup	<u>Ψ</u>	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

BLUE RIDGE CA		LE SYSTEM: HNOLOGIES INC				S	YSTEM ID# 29323	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA	······		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-	<u></u>		····	Exclusivity Surcharge
					···			for
								Partially
								Distant
								Stations
					···			
Total DSEs		_	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-SECONE	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	·		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					···			
		-						
								
					···			
								
					···			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

BLUE RIDGE CA						S	YSTEM ID# 29323	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROU		ONE HUNDRED FIFT		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<mark></mark>				<u></u>			and
								Syndicated Exclusivity
						+	••••	Surcharge
								for
								Partially
		-			<u></u>			Distant Stations
	····				<u></u>			Stations
	<u></u>				<u></u>			
Total DSEs			0.00	Total DSEs		!!	0.00	
Gross Receipts First	Group	¢	0.00	Gross Receipts Secon	ad Group	\$	0.00	
Gross Receipts First	Оюф	\$	0.00	Gross Neceipts Secon	iu Group	Ψ	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-FIFTH	SUBSCRIBER GROL	JP	ONE HUNDRED FI	FTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>				<u></u>			
				-		+		
					<u> </u>	<u> </u>		
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	····				<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	า Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 29323	S						LEGAL NAME OF OWNE BLUE RIDGE CAB
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
9		SUBSCRIBER GROUP	TY-EIGHTH			SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FIFTY
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated Exclusivity								
Surcharge								
for								
Partially								
Distant								
Stations								
	····						·	
						-		
	0.00	-		Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	•	SUBSCRIBER GROUP	D SIXTIETH	ONE HUNDRE)	SUBSCRIBER GROUP	TY-NINTH	ONE HUNDRED FIF
	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	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
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LEGAL NAME OF OWNE BLUE RIDGE CAE			•			S'	YSTEM ID# 29323	Name
В				TE FEES FOR EACH				
		SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA		eld,Arnot,Blossbu		COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs	ļ		0.00	
Gross Receipts First G	roup	<u>\$</u> 300,	644.90	Gross Receipts Secon	d Group	\$ 5	52,988.08	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
		SUBSCRIBER GROU			FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Charles	ston,Delmar,Dunc	an,Farn	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	ı		0.00	
Gross Receipts Third (Group	\$ 649,	731.74	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	ne base ra t	te fees for each subsc	riber group	as shown in the boxes a	above.			
Enter here and in block			g.oup	and the second control of		\$	0.00	

Name	YSTEM ID# 29323					LE SYSTEM: HNOLOGIES INC		BLUE RIDGE CAE
				TE FEES FOR EACH				В
9	JP 0	SUBSCRIBER GROU	SIXTH	COMMUNITY ADDA	UP 0	SUBSCRIBER GRO	FIFTH	COMMUNITY/ADEA
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Distant Stations		 					<u>-</u>	
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	iroup	3ase Rate Fee First G
	JP	SUBSCRIBER GROU	EIGHTH		UP	SUBSCRIBER GRO	SEVENTH	,
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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			DSE					
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	0.00	S			0.00	\$	Group	Total DSEs Gross Receipts Third (
	_	\$		Total DSEs		\$	Group	

LEGAL NAME OF OWNE BLUE RIDGE CAB			;			S	29323	Name
BL				TE FEES FOR EAC				
_	NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs	•	-	0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
EL	.EVENTH	SUBSCRIBER GRO	UP		TWELVTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		•	0.00	Total DSEs	l.		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				as shown in the boxes				

LEGAL NAME OF OWNER BLUE RIDGE CAB							YSTEM ID# 29323	Name
				TE FEES FOR EACH				
	TEENTH	SUBSCRIBER GRO		ii		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FIF	TEENTH	SUBSCRIBER GRO	UP	:	SIXTEENTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	roun	\$	J.00	Toross izeceibis Lonii	Group	Ψ	0.00	
Total DSEs Gross Receipts Third G	roup						Ţ	
		\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	

Name	YSTEM ID# 29323	S'						BLUE RIDGE CAE
				TE FEES FOR EACH				
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Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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OF OWNER OF CABLE SYSTEM: E CABLE TECHNOLOGIES INC	SYSTEM ID# 29323	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUB		
	COND SUBSCRIBER GROUP	9
AREA COMMUNITY/ AREA	0	Computati
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TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOL	URTH SUBSCRIBER GROUP	
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Mana	YSTEM ID# 29323					HNOLOGIES INC		BLUE RIDGE CAE
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GROU	ITY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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LEGAL NAME OF OWNE			;			S	YSTEM ID# 29323	Name
				TE FEES FOR EACH				
	TY-NINTH	SUBSCRIBER GRO		il e		I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Secon		\$	0.00	
	TY-FIRST	SUBSCRIBER GRO		ii –		SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	***************************************		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 29323	S`						BLUE RIDGE CAE
				TE FEES FOR EAC				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	TY-THIRD	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	JP			TH	UP			THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	TH COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR
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	JP 0	SUBSCRIBER GROU	RTY-SIXTH	TH COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR
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	EM ID# 29323	Name
TE FEES FOR EACH SUBSCRIBER GROUP		
THIRTY-EIGHTH SUBSCRIBER GROUP		9
COMMUNITY/ AREA		mputati
CALL SIGN DSE CALL SIGN		of
	Base	e Rate
		and
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Total DSEs	0.00	
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Base Rate Fee Second Group \$	0.00	
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				TE FEES FOR EACH				
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	IP	SUBSCRIBER GROU	NDREDTH		JP	SUBSCRIBER GROU	TY-NINTH	NINET
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- - -		\$	Group			<u>\$</u>	Group	

	29323							BLUE RIDGE CAB
				TE FEES FOR EACH				
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A: GIES INC	SYSTEM ID# 29323	Name
ATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP		
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0 COMMUNITY/ AREA	0 Co	omputation
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	Bas	ase Rate F
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LEGAL NAME OF OWNER BLUE RIDGE CAB						S	YSTEM ID# 29323	Name
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COMMUNITY/ AREA			0	COMMUNITY/ AREA				Computation
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED EL	EVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
	roup		0.00	Total DSEs Gross Receipts Fourth	1 Group	\$	0.00	
	roup	\$			n Group	\$		
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				TE FEES FOR EACH				
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	UP	SUBSCRIBER GROU	XTEENTH	ONE HUNDRED S	JP	SUBSCRIBER GROU	FTEENTH	ONE HUNDRED FIF
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Mana	YSTEM ID# 29323	S'						BLUE RIDGE CAB
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (Bl
9		SUBSCRIBER GROUP	GHTEENTH			SUBSCRIBER GROUP	ENTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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- - -	0.00 0.00	\$	d Group	Dase Rate Fee Secon ONE HUNDRED TO COMMUNITY/ AREA	JP	SUBSCRIBER GROU		ONE HUNDRED NII
= -	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0		NTEENTH	ONE HUNDRED NII COMMUNITY/ AREA
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- - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Dase Rate Fee Secon ONE HUNDRED TO COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII COMMUNITY/ AREA
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Dase Rate Fee Secon ONE HUNDRED TO COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NII COMMUNITY/ AREA
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	0.00 0.00 JP 0 DSE	\$ SUBSCRIBER GROU	d Group VENTIETH DSE	Base Rate Fee Secon ONE HUNDRED TO COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	ONE HUNDRED NII COMMUNITY/ AREA

LEGAL NAME OF OWNER BLUE RIDGE CABI			•			S	YSTEM ID# 29323	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-SECONE	SUBSCRIBER GROUP		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			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 Second	d Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-FOURTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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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	
Dana Bata Fay Till 10			0.00	Bass Bata E. E. "	0		0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		to foos for each subsc	ribor group	as shown in the boxes a	phove			

	YSTEM ID# 29323	S					ER OF CABL BLE TECH	BLUE RIDGE CAB
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	SLOCK A: (Bl
9)	SUBSCRIBER GROUP	NTY-SIXTH			SUBSCRIBER GROUP	NTY-FIFTH	
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		SUBSCRIBER GROUP)			IE HUNDRED TWENTY
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	0		TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	/-SEVENTH	COMMUNITY/ AREA
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	0		TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	/-SEVENTH	COMMUNITY/ AREA
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	0		TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	/-SEVENTH	COMMUNITY/ AREA
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	YSTEM ID# 29323	S'						BLUE RIDGE CAB
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SYSTEM ID# 29323 Na					BLUE RIDGE CAB
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 29323							
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 29323							
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	JP 0 DSE	SUBSCRIBER GROU	DSE	ONE HUNDREI COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE DSE	COMMUNITY/ AREA

ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **BLUE RIDGE CABLE TECHNOLOGIES INC** 29323 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **BLUE RIDGE CABLE TECHNOLOGIES INC** 29323 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. THIRTY-EIGHTH SUBSCRIBER GROUP THIRTY-SEVENTH 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 Second Group THIRTY-NINTH SUBSCRIBER GROUP FORTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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ACCOUNTING PERIOD: 2018/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **BLUE RIDGE CABLE TECHNOLOGIES INC** 29323 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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