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					
08/21/2019	\$ 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		2019/1				
B	rate	tructions:  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 owneringle statement of account and royalty fee payment covering the entire accounts. Check here if this is the system's first filing. If not, enter the system's ID.	ess of the cable system on the last day of a counting perioa	em the accounting period should s	ubmi	063019
	LI	EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
		Lafayette City Parish Consolidated Government				
		Lafayette Utilities System				
				(	0630192	:019/1
					063019 2	2019/1
		700 St John Street, Suite 300				
		Lafayette, LA 70501-6761				
С		STRUCTIONS: In line 1, give any business or trade names used to it				
	naı	mes already appear in space B. In line 2, give the mailing address of	the system, if diff	erent from the address give	n in space B.	
System	1	IDENTIFICATION OF CABLE SYSTEM:				
	Ŀ	LUS Fiber				
		MAILING ADDRESS OF CABLE SYSTEM: 700 St John Street, Suite 300				
	2	(Number, street, rural route, apartment, or suite number)				
		Lafayette, LA 70501 (City, town, state, zip code)				
		(City, town, state, zip code)				
D	Ins	structions: For complete space D instructions, see page 1b. Identify	only the frst comr	munity served below and rel	ist on page 1t	b
Area	wit	h all communities.				
Served		CITY OR TOWN	STATE			
First		Lafayette	LA			
Community	Е	Below is a sample for reporting communities if you report multiple cha				
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GF	RP#
Sample	Alc		MD	A	1	
		iance	MD MD	B B	3	
ĺ	Ge	ring	MD	Б	3	

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

-ORM SA3E. PAGE 1b.				T					
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
Lafayette City Parish Consolidated Government			063019						
<b>Instructions:</b> List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future fillings.									
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
f 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-common channel line-up designated by an alpha-letter(s) (based on your Space G reporting) a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	nd a subscriber gro								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
Lafayette	LA	Α		First					
Broussard	LA	Α		Community					
Youngsville	LA	A							
Scott	LA	A							
Carencro	LA	A							
Outerioro									
				See instructions for					
				additional information on alphabetization.					
				on alphabetization.					
				Add rows as necessary.					
		I	d	i i					

Name
Legal Name of OWNER OF CABLE SYSTEM:
SYSTEM ID#
Lafayette City Parish Consolidated Government
063019

## Ε

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1				BLOCK 2				
	NO. OF					NO. OF			
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Ц	CATEGORY OF SERVICE	SUBSCRIBERS	RATE		
Residential:				_					
<ul> <li>Service to first set</li> </ul>	9,091	\$	24.95						
<ul> <li>Service to additional set(s)</li> </ul>									
<ul> <li>FM radio (if separate rate)</li> </ul>									
Motel, hotel									
Commercial	939	\$	24.95						
Converter									
<ul> <li>Residential</li> </ul>	12,577	\$	8.50						
Non-residential	657	\$	8.50						
		. ,		1 1		T			

## F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1			BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	CATEGORY OF SERVICE	RATE	
Continuing Services:		Installation: Non-residential			НВО	\$ 17.95
• Pay cable	N/A	Motel, hotel		PP	Cinemax	\$ 13.95
<ul> <li>Pay cable—add'l channel</li> </ul>	N/A	Commercial		PP	Showtime	\$ 15.95
Fire protection	N/A	Pay cable		PP	Starz	\$ 13.60
<ul><li>Burglar protection</li></ul>	N/A	Pay cable-add'l channel		PP	ESPN Hospitality	\$ 114.99
Installation: Residential		Fire protection		N/A	Playboy Monthly	\$ 16.99
First set	N/A	Burglar protection		N/A	NFL Redzone	\$ 47.00
<ul> <li>Additional set(s)</li> </ul>	N/A	Other services:			Fox Sports Pack	\$ 95.00
<ul> <li>FM radio (if separate rate)</li> </ul>	N/A	Reconnect	\$	10.00	Stingray Digital Music	\$ 30.00
Converter	N/A	Disconnect	\$	5.00	Wallfish Fee	\$ 35.00
		Outlet relocation	\$	60.00	Truck Roll	\$ 20.00
		Move to new address		N/A	DVR Service	\$ 11.99
					Set Top Box Rental	 \$8.50

PRIMARY TRANSMITTERS: TELEVISION  In General: In space S. (juentify 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(q)(2) and (4), 76.61(e)(2) an	FORM SA3E. PAGE 3.					OVOTEM ID#	.1		
Final Principle of the Community of the Station station (including translator stations and low power television stations) area of carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCO rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 7, 850(f)]; and (1), 67, 816 (s)[c) and (4), or 7, 83 (s) (repaired by your cable system on a substitute program basis, as explained in the next paragraph.  **Sp30(f)] and (1), 76, 816 (s)[c) and (4), or 7, 83 (s) (repaired pix) for 8, 816 (s) and 40, 81), and (2) and (3), and (2) contains stations carried on a substitute program basis, as explained in the next paragraph.  **Do not list the station here in space 0.—but do list it in space (1) the Spacial 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 can be sufficient information concerning substitute basis station, see page (v) of the general instructions located in the paper SA3 form.  **Octional 1: List each station's call sign. Do not report origination program services such as HBO. ESPN, etc. Usersity occurrent in the station was carried be station.  **Octional 2: Give the channel number the FCO has assigned to the television station for broadcasting over-the-air in the community of times.—For example, without the station of the stati						SYSTEM ID#	Name		
received in gasee G. identify every television station (including translate stations and to vigore television stations) garded by your called system during the accounting period, except (1) stations carried only on a part time basis under rCC roles and regulations in office on June 24, 1981, permitting the carriage of contain network programs gloss under rCC carried and regulations in office on June 24, 1981, permitting the carriage of contain network programs gloss under rCC carried and regulations in office on June 24, 1981, permitting the carriage of contain network programs gloss under stations of the regulations and regulations are regulated by your cable system and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the page SAS for further information concerning substitute basis stations, see page (v) of the general instructions located in the page SAS for further information concerning substitute basis stations, see page (v) of the general instructions for regulations and regulations of the regulations o				overnment		063019			
Substitute Basis Stations: With respect to any use 24, 1981, permitting the carriage of certain network programs [sections 75.59(4)2) and (4), 75.61(9)(2) and (4), 75.61(9) a	PRIMARY TRANSMITT	ERS: TELEVISIO	ON						
CHANNEL LINE-UP	In General: In space carried by your cable and regular 76.59(d)(2) and (4), 76 substitute program based by the station was carried at the station was carried at the station was carried at the station here, basis. For further in the paper SA3 for Column 1: List ear each multicast stream as "WETANETA-simulcast). Column 2: Give the stational station, by for independent multifor the meaning of the Column 4: If the stational station, by for independent multiper the meaning of the Column 5: If you he cable system carried the distant station of local server Column 5: If you he cable system carried the distant station of written agreement the cable system and ion "E" (exempt). For explanation of these the Column 6: Give the Column 6:	G, identify ever system during to tions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or authors, or authors, or authors, or authors, or authors, in a station acceptable in a station acceptable in a station acceptable in a station. Whether the station, whether the station, whether the station acceptable (v) of the the local service in column on during the me basis becar multicast strain or before Jumitter or an acceptable (v), see page (v) ch station. For	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations to report origination cording to its own be reported in the referring to the report origination cording to its own be reported in the report origination cording to its own be reported in the report origination cording to its own be reported in the report origination cording to its own be reported in Wash tation is a network, "N-M" (I educational), contained the report of lack of a general instruction of the general or U.S. stations,	(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 book station, an indefer network multiple of "E-M" (for noncettions located in the distant"), enter "You ions located in the mplete column 5, and Indicate by enactivated channel subject to a royalty senting the primal channel on any of instructions located list the community is the community of the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the senting the primal channel on any of instructions located list the community is the primal channel on any of instructions located list the community is the primal channel on any of instructions located list the community is the primal channel on any of instructions located list the community is the primal channel on any of instructions located list the community is the primal channel on any of the primal channel o	ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify ation. For example, report multish stream separately; for example aion for broadcasting over-the-air in may be different from the channel dependent station, or a noncommercial cast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form.  Sear: If not, enter "No". For an example stating the basis on which your terring "LAC" if your cable system capacity. It is the subject stem or an association representing any transmitter, enter the designation the paper SA3 form.  The paper SA3 form is the subject stem or an association representing any transmitter, enter the designation the paper SA3 form.  The paper SA3 form is the subject stem or an association representing any transmitter, enter the designation the paper SA3 form.  The paper SA3 form is the subject stem or an association representing any transmitter, enter the designation the paper SA3 form.	Primary Transmitters: Television		
1. CALL   SIGN   2. B'CAST   CHANNEL   OF CHANNEL   OF STATION   CARRIAGE (If Distant)   CARRIAGE (IF DISTANTA (IF DIS	Note: If you are utilizing	ng multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.			
SIGN			CHANN	EL LINE-UP	AA				
KATC-CW         3.2         N-M         No         Lafayette, LA         additional informon alphabetization           KLFY         10.1         N         No         Lafayette, LA           KLFY-GetTV         10.2         N-M         No         Lafayette, LA           KADN         15.1         I         No         Lafayette, LA           KADN-MyNet         15.3         I-M         No         Lafayette, LA           KLPB-Wall         22.1         I-M         No         Carencro, LA           KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Carencro, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA		CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION			
KATC-CW         3.2         N-M         No         Lafayette, LA         additional informon alphabetization           KLFY         10.1         N         No         Lafayette, LA           KLFY-GetTV         10.2         N-M         No         Lafayette, LA           KADN         15.1         I         No         Lafayette, LA           KADN-MyNet         15.3         I-M         No         Lafayette, LA           KDCG-H&I         22.1         I-M         No         Carencro, LA           KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Carencro, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA						Lafa Maria	-		
No		•	<b>†</b>				See instructions for		
KLFY         10.1         N         No         Lafayette, LA           KLFY-GetTV         10.2         N-M         No         Lafayette, LA           KADN         15.1         I         No         Lafayette, LA           KADN-MyNet         15.3         I-M         No         Lafayette, LA           KDCG-H&I         22.1         I-M         No         Carencro, LA           KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA	•••••	•	<b>†</b>	No	<b></b>		additional information on alphabetization.		
KADN         15.1         I         No         Lafayette, LA           KADN-MyNet         15.3         I-M         No         Lafayette, LA           KDCG-H&I         22.1         I-M         No         Carencro, LA           KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA		10.1	N	No					
KADN-MyNet         15.3         I-M         No         Lafayette, LA           KDCG-H&I         22.1         I-M         No         Carencro, LA           KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA		10.2	N-M	No		······································			
KDCG-H&I         22.1         I-M         No         Carencro, LA           KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA	KADN	15.1	I	No		Lafayette, LA			
KDCG-H&I         22.1         I-M         No         Carencro, LA           KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA	KADN-MyNet	15.3	I-M	No		Lafayette, LA	]		
KLPB         24.1         E         No         Baton Rouge, LA           KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA			I-M	No					
KLPB-Kids         24.2         E         No         Baton Rouge, LA           KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA	KLPB	24.1	E	No			]		
KLPB-Create         24.3         E         No         Baton Rouge, LA           KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA		•					1		
KXKW         32.1         I-M         No         Carencro, LA           KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA			<del>†</del>				1		
KAJN         40         I         No         Lafayette, LA           KLAF         46.1         I         No         Lafayette, LA           KLWB         50.1         I-M         No         Carencro, LA		•	<b>†</b>				1		
KLAF 46.1 I No Lafayette, LA KLWB 50.1 I-M No Carencro, LA									
KLWB 50.1 I-M No Carencro, LA		•	<u> </u>				1		
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WBRZ 2.1 N No Baton Rouge, LA		50.1	I-M	No		Caronero I A			
							1		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment		063019	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis	G, identify ever system during the ions in effect on ions in estations: With ions and also in spariformation concurr.  In the station's call associated with ions in each case with each case in each case in each each each each each each each each	y television state he accounting in June 24, 198 (4), or 76.63 (red) in the next perspect to any attions, or auth G—but do list titute basis. ace I, if the state erning substitions are station accounting the station. Whether the station whether the station. Whether the station accommercial page (v) of the effect of the local servage (v) of the erning the ame basis becat multicast stream or before Jumitter or an associated on the station. Foons, if any, given and the station.	g period, except 81, permitting the referring to 76.6 paragraph.  If distant stations orizations: to it in space I (the ation was carried tute basis station report origination cording to its own be reported in containing the reported in containing to its own be reported in containing the reported in standard in Wash ation is a network of the decent instruction of the general instruction of the same that is not some 30, 2009, be sesociation repreyou carried the containing the report of the general in true. Substituting the report of the general in true.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce e Special Statemed both on a substitus, see page (v) on program services er-the-air designation of the television statifington, D.C. This in the television stat	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	ΔR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	T	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					OVOTEM ID#	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Lafayette City I	Parish Cons	solidated G	overnment		063019	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space ( carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 Column 1: List 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 sti planation of local servi Column 5: If you he cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a	G, identify ever system during to the stations: With a CC rules, regular here in space only on a substant also in spatformation concern. The station's call associated with a concern case of the station's call associated with a concern case of the station's call associated with a concern case of the station's call associated with a concern case of the station's call associated with a concern case of the station's call associated with a concern case of the station's call associated with a concern case of the station and the station of a distant static ion on a part-tipion of a distant a centered into of a primary trans	y television standard by television standard by television standard by television standard by televisions, or authorized by the state of the state o	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the following the referring to 76.6 paragraph. It is a control of the following to the following to the following to the report origination cording to its own the reported in control of the following to its own the report origination cording to its own the reported in control of the following to its own the reported in control of the following to its own the following to its own the following the followin	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your content of the Special Statement of the Special	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
explanation of these th	ree categories	, see page (v	of the general i	instructions locate	d in the paper SA3 form.	
FCC. For Mexican or C Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AC		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment		063019	
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 Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent 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 ever system during the ions in effect on ions in estations: With ions and also in spariformation concurr.  In the station's call associated with ions in each case with each case in each case in each each each each each each each each	y television standard and the accounting of June 24, 194, or 76.63 (in did in the next prespect to any ations, or auth G—but do listitute basis. In the standard area of the station acceptance of the station acceptance of the station acceptance of the station. In the station acceptance of the station acceptance of the station. In the station acceptance of the station of the station of the local service of the station of the station. In the station of the station of the station of the station. For the station of the station of the station of the station of the station. For one, if any, giving the station of the stat	g period, except 81, permitting the referring to 76.6 paragraph.  If distant stations orizations: to it in space I (the ation was carried tute basis station report origination cording to its own be reported in containing the reported in containing to its own be reported in containing the reported in standard in Wash ation is a network of the decent instruction of the general instruction of the same that is not some 30, 2009, be sesociation repreyou carried the containing the report of the general in true. Substituting the report of the general in true.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce e Special Statemed both on a substitus, see page (v) on program services er-the-air designation of the television statifington, D.C. This limit of the television statifington, D.C. This limi	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your etering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- ether basis, enter "O." For a further ed in the paper SA3 form. expected to which the station is licensed by the enter which the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	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	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment		063019	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis	G, identify ever system during the ions in effect on ions in estations: With ions and also in spariformation concurr.  In the station's call associated with ions in each case with each case in each case in each each each each each each each each	y television state he accounting in June 24, 198 (4), or 76.63 (red) in the next perspect to any attions, or auth G—but do list titute basis. ace I, if the state erning substitions are station accounting the station. Whether the station whether the station. Whether the station accommercial page (v) of the effect of the local servage (v) of the erning the ame basis becat multicast stream or before Jumitter or an associated on the station. Foons, if any, given and the station.	g period, except 81, permitting the referring to 76.6° paragraph.  I distant stations corrizations: to it in space I (the atton was carried tute basis station cording to its ower be reported in cordinate as assigned to the cordinate of its ower be reported in struction of the general instruction of the general in the cordinate of lack of a seam that is not some 30, 2009, be sesociation representation of the general in true. Substitutions, I de the name of the cordinate in the cordinate	(1) stations carrie to carriage of certa 1(e)(2) and (4))]; as carried by your context of the statement of both on a substitute, see page (v) of a program services the television station, an indefer network multicute free the station, an indefer network multicute free the station of the sta	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your etering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- ether basis, enter "O." For a further ed in the paper SA3 form. expected to which the station is licensed by the enter which the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	ΔF		
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	

FURM SAJE. PAGE 3.					OVOTEM ID#	
Lafayette City I			overnment		SYSTEM ID# 063019	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during to ions in effect or 6.61(e)(2) and ( sis, as explaine	he accounting n June 24, 19 4), or 76.63 (i d in the next	g period, except 81, permitting th referring to 76.6 paragraph.	(1) stations carrie ne 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	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 for Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast).  Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the 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	CC rules, regular here in space only on a subs and also in spatioformation concurrent. The station's call associated with a case of the station's call associated with a common concurrent. The station's call associated with a channel number of the concurrent of the distant static ion on a part-tilicition of a distant at entered into on a primary trans simulcasts, also ree categories e location of ea	ations, or auth G—but do listitute basis. Ince I, if the state erning substitute basis. Ince I, if the state erning substitute basis. In a station active area with a station active area with a station. In a station whether the station. In a station are go (v) of the local service in column and uring the me basis becamulticast stream or before Jumitter or an appearance of the station. In a see page (v) of station. For the station.	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 is truct the of the general is russe of the general is russe.	de Special Statement of both on a substiffus, see page (v) on program service er-the-air designate column 1 (list each the television statington, D.C. This bork station, an indefor network multicor "E-M" (for noncotions located in the implete column 5, so d. Indicate by entactivated channel of subject to a royalty steween a cable systement of the primal channel on any of instructions located list the community	ent and Program Log)—if the tute basis and also on some other if the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multi- n 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" commercial educational multicast). The paper SA3 form. The pap	Television
Note: If you are utilizing	ig multiple char		EL LINE-UP		cnannei iine-up.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
		L				

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment		063019	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis	G, identify ever system during the ions in effect on ions in estations: With ions and also in spariformation concurr.  In the station's call associated with ions in each case with each case in each case in each each each each each each each each	y television state he accounting in June 24, 198 (4), or 76.63 (red) in the next perspect to any attions, or auth G—but do list titute basis. ace I, if the state erning substitions are station accounting the station. Whether the station whether the station. Whether the station accommercial page (v) of the effect of the local servage (v) of the erning the ame basis becat multicast stream or before Jumitter or an associated on the station. Foons, if any, given and the station.	g period, except 81, permitting the referring to 76.6° paragraph. It distant stations to rizations: It it in space I (the attornance of the basis station report origination cording to its ower than as assigned to the assaurable of lack attornance of the same	(1) stations carried to carriage of certa 1(e)(2) and (4))]; as carried by your case special Statement of both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television stationington, D.C. This for hetwork multicon "E-M" (for noncontrolled to the television of the television stations located in the distant"), enter "Ye ions located in the mplete column 5, so desired the television stations located in the mplete column 5, so desired to a royalty extended channel of the column 1 cativated channel of the primar channel on any of the community with the community with the community with the community with	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	ΔG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	T	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					OVOTEM ID#	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Lafayette City I	Parish Cons	solidated G	overnment		063019	
PRIMARY TRANSMITTE	RS: TELEVISION	ON				
In General: In space ( carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the stri planation of local servi Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and a	G, identify ever system during toons in effect on a fattons: With a carried in space only on a subsuand also in spatformation concurr. In station's call associated with a carried the cast), "E" (for noise terms, see ation is outside ce area, see pave entered "Y ne distant staticion on a part-tii ion of a distant entered into o a primary trans	y television standard programme to the station and sta	g period, except 81, permitting the referring to 76.6 paragraph. It is in space I (the stion was carried tute basis station report origination cording to its own be reported in company of the stion is a network attention is a network of the stion is a	(1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each column 1 (list each column 1). This in the carried column 1 (for noncontext of the carried column 1), enter "Ye ions located in the column 2), enter column 2), enter column 3), enter "Ye ions located in the column 4), enter column 5, enter column 5, enter column 5, enter column 6), enter column 6)	s". If not, enter "No". For an expaper SA3 form. Stating the basis on which your ering "LAC" if your cable system capacity.  payment because it is the subject stem or an association representing y transmitter, enter the designa-	G Primary Transmitters: Television
explanation of these the	ree categories location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv nnel line-ups,	of the general in U.S. stations, the the name of the use a separate	instructions locate list the community ne community with space G for each	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AH		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	<u> </u>	<u> </u>				
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Lafayette City I	Parish Cons	olidated G	overnment		063019	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bass Substitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast).  Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local service Column 5: If you he cable system carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For state of the state of the cable system and attion "E" (exempt). For state of the state of the cable system and attion "E" (exempt). For state of the state of the system and attion "E" (exempt). For state of the state of the system and attion "E" (exempt). For state of the state of the system and attion "E" (exempt). For state of the state of the system and attion "E" (exempt). For state of the state of the system and attion "E" (exempt). For state of the state of the system and attion "E" (exempt). For state of the stat	ers: TELEVISIO G, identify even system during the cons in effect on G.61(e)(2) and ( gis, as explaine stations: With a CC rules, regula here in space only on a subs and also in spa formation conc rm. the station's call associated with case veneral numbers in each case veneral regula is in each case veneral regula ce area, see pa ave entered "Y me distant static ion on a part-tip ion of a distant entered into o a primary trans simulcasts, also	y television stane accounting a June 24, 1964), or 76.63 (rd in the next) respect to any attions, or auth G—but do list ittute basis. In the stane accounting substitute basis. In the stane account of the station account of the station account of the station. In the station account of the station. In the station account of the station account of the station. In the station account of the station account of the station account of the station account of the station. In column on during the station or before Jumitter or an account of the station or before Jumitter or an account of the station or before Jumitter or an account of the station or before Jumitter or an account of the station or station or station or station of the station or station or station of the st	ation (including period, except 81, permitting the referring to 76.6 paragraph.  I distant stations orizations:  It it in space I (the stion was carried to the station was carried to the station was station to the report origination cording to its own be reported in comparable of the station is a netwo etwork), "N-M" (if I educational), of the egeneral instruction of the station is a network), "at the station is a network of the egeneral instruction of the station is a network of the station is a network of the egeneral instruction of the station of the s	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each column 1 (list each column 1). This is the carried column 1 (for noncontext of the carried column 1), and the carried column 1 (for noncontext of the carried column 1), and the carried column 2), and the carried column 2), and the carried column 3), and the carried column 3).	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel upendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). the paper SA3 form. sis. If not, enter "No". For an ex- in paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the	
<b>Note:</b> If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	Al		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City I	Parish Cons	solidated G	overnment		063019	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for ind						
		CHANN	EL LINE-UP	٨١		
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	

FURM SAJE. PAGE 3.	IED OF OARLE O	(07514			SYSTEM ID#	
Lafayette City			overnment		063019	Name
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during t ions in effect of 6.61(e)(2) and ( sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	g period, except 81, permitting th referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television
basis under specifc FC  Do not list the station station was carried  List the station here, basis. For further ir in the paper SA3 fc  Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast).  Column 2: Give th its community of licens on which your cable s' Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serve Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	CC rules, regular here in space only on a substand also in spatioformation concurrs. The station's call associated with a second carries of the second case of the se	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 ber the FCC has, WRC is Chane station. Whether the station acommercial page (v) of the the local serving (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.	tit in space I (the ation was carried tute basis station report origination cording to its own to be reported in the assigned to annel 4 in Wash tation is a network and a sassigned to annel 4 in Wash tation is a network and a sassigned to annel 4 in Wash tation is a network and a sassigned to annel 4 in Wash tation is a network annel 4 in Wash tation is a network area, (i.e. "General instruct 4, you must coraccounting period ause of lack of a sam that is not some 30, 2009, be sociation repreyou carried the of the general in the property of the general in the property of the general in the name of the same of th	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 lork station, an indefer network multicute for "E-M" (for noncontrol located in the inplete column 5, so d. Indicate by entional located in the inplete column 5, so d. Indicate by entional control of the inplete column 5, so d. Indicate by entional control of the inplete column 5, so d. Indicate by entional control of the inplete column 5, so d. Indicate by entional control of the inplete column of	ent and Program Log)—if the sute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example con for broadcasting over-the-air in imay 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 capacity. The paper service is the subject testem or an association representing the paper service is the subject the paper service is the subject the paper service is the subject the station is not provided in the paper service is the subject to which the station is licensed by the the which the station is identified.	Television
Trouble in you are aimain	.ga.a.p.o oa.		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	

FORM SA3E. PAGE 3.					OVOTEM ID#	
LEGAL NAME OF OWN					SYSTEM ID# 063019	Name
Lafayette City			overnment		063019	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during t tions in effect of 5.61(e)(2) and ( sis, as explaine <b>Stations:</b> With	he accounting n June 24, 19 (4), or 76.63 (led in the next respect to any	g period, except 81, permitting th referring to 76.6 paragraph. y distant stations	(1) stations carrie ne 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 able system on a substitute program	G Primary Transmitters: Television
Do not list the station	n here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the	
basis. For further in the paper SA3 for Column 1: List each	and also in spanformation condorm.  ch station's call	ace I, if the state of the stat	tute basis station	ns, see page (v) o n program service	tute basis and also on some other if the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in	column 1 (list each	n stream separately; for example	
	e channel num	ber the FCC h	nas assigned to	the television stati	ion for broadcasting over-the-air in	
its community of licens on which your cable s	•		annel 4 in Wash	ington, D.C. This	may be different from the channel	
(for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	cast), "E" (for n ese terms, see tation is outside ice area, see p. ave entered "Y he distant statiis ion on a part-ti sion of a distant t entered into o a primary trans simulcasts, als nree categories e location of ea Canadian static	oncommercia page (v) of the the local servage (v) of the es" in column on during the me basis becate in multicast strator or or before Ju- mitter or an a o enter "E". If a, see page (v) inch station. Foons, if any, giv	I educational), of e general instructivice area, (i.e. "of general instructivity and	or "E-M" (for nonco- ctions located in the distant"), enter "Ye- ions located in the mplete column 5, sod. Indicate by enta- ctivated channel of subject to a royalty etween a cable sys- senting the prima channel on any of instructions locate list the community me community with	es.' If not, enter "No". For an ex- e paper 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 ed in the paper SA3 form. If to which the station is licensed by the mathematical which the station is identified.	
Note: If you are utilizing	ng multiple cha		•	'	cnannel line-up.	
		CHANN	EL LINE-UP	AL		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.					0/07514 10//	
LEGAL NAME OF OWN					SYSTEM ID#	Name
			overnment		063019	
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast).	ers: TELEVISIO G, identify every system during the lons in effect or 6.61(e)(2) and ( sis, as explaine stations: With a CC rules, regular here in space only on a subs and also in spa formation concern. h station's call associated with -2". Simulcast	y television state accounting a June 24, 198 4), or 76.63 (rad in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state raing substitution sign. Do not rate a station according streams must	ation (including to period, except 81, permitting the referring to 76.67 paragraph.  If distant stations orizations: to the station was carried that the basis station report origination cording to its over the period of the reported in continuous carried carried in continuous carried c	(1) stations carried e carriage of certa 1(e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services er-the-air designation of the column 1 (list each	and low power television stations) donly 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 multinatream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television
on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you had cable system carried the distant stating For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the	estem carried the in each case we entering the lecast), "E" (for no ese terms, see parties and ese terms, see parties entered "You entered "You entered estant station of a distant entered into on a part-tipion of a primary transsimulcasts, also aree categories elocation of each canadian statio	ne station. whether the stater "N" (for ne concommercial page (v) of the state (v) of the s	ration is a networe twork), "N-M" (for educational), or egeneral instructive area, (i.e. "dogeneral instructive area (i.e. "dogeneral instructive accounting periodause of lack of accounting periodause in the second of the general in the second of the second of the general in the second of the general in the second of the general in the second of the se	rk station, an indefor network multic r "E-M" (for noncotions located in the listant"), enter "Ye lons located in the mplete column 5, so d. Indicate by entictivated channel of ubject to a royalty tween a cable syssenting the primarchannel on any of instructions locate list the community with	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identifed.	
		CHANN	EL LINE-UP	AM		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
Lafayette City	Parish Cons	solidated G	overnment		063019	
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 Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent 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 ever system during the ions in effect on ions in estations: With ions and also in spariformation concurr.  In the station's call associated with ions in each case with each case in each case in each each each each each each each each	y television st he accounting in June 24, 194, or 76.63 (i 4), or 76.63 (i 4), or 76.63 (i 4) do in the next   respect to any ations, or auth G—but do lis- titute basis. ace I, if the sta- terning substiff sign. Do not r h a station acc streams must beer the FCC h e, WRC is Cha- ne station. whether the station.	g period, except 81, permitting the referring to 76.6 paragraph.  If distant stations orizations: to it in space I (the ation was carried tute basis station report origination cording to its own be reported in containing the reported in containing to its own be reported in containing the reported in standard in Wash ation is a network of the decent instruction of the general instruction of the same that is not some 30, 2009, be sesociation repreyou carried the containing the report of the general in true. Substituting the report of the general in true.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce e Special Statemed both on a substitus, see page (v) on program services er-the-air designation of the television statifington, D.C. This limit of the television statifington, D.C. This limi	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says to be subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identifed.	Primary Transmitters: Television
		CHANN	EL LINE-UP	ΛN		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated G	overnment		063019	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent 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 ever system during the ions in effect on ions in estations: With ions and also in spariformation concurr.  In the station's call associated with ions in each case with each case in each case in each each each each each each each each	y television state he accounting in June 24, 198 (4), or 76.63 (red) in the next perspect to any attions, or auth G—but do list titute basis. ace I, if the state erning substitions are station accounting the station. Whether the station whether the station. Whether the station accommercial page (v) of the effect of the local servage (v) of the erning the ame basis becat multicast stream or before Jumitter or an associated on the station. Foons, if any, given and the station.	g period, except 81, permitting the referring to 76.6° paragraph.  I distant stations corrizations: to it in space I (the atton was carried tute basis station cording to its ower be reported in cordinate as assigned to the cordinate of its ower be reported in struction of the general instruction of the general in the cordinate of lack of a seam that is not some 30, 2009, be sesociation representation of the general in true. Substitutions, I de the name of the cordinate in the cordinate	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce e Special Statemed both on a substitus, see page (v) on program services er-the-air designation of the television statifington, D.C. This limit of the television statifington, D.C. This limi	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system capacity. expaper says the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the enter the station is identified.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AO		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	T	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
Lafayette City I	Parish Cons	solidated G	overnment		063019	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List 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 5: If you had cable system carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify ever system during the consine effect on the consistency of the consistency o	y television st he accounting in June 24, 194, or 76.63 (i 4), or 76.63 (i 4), or 76.63 (i 4) do in the next   respect to any ations, or auth G—but do lis- titute basis. ace I, if the sta- terning substiff sign. Do not r h a station acc streams must beer the FCC h e, WRC is Cha- ne station. whether the station.	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph.  If distant stations orizations: to it in space I (the 181) tit in the 181, permitting I (the 181) tit in th	(1) stations carried to carriage of certa 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitutions, see page (v) on a program service er-the-air designation of the television statistington, D.C. This ork station, an indefor network multicution "E-M" (for noncontrol of the television of the television statistington, p.c. This ork station, an indefor network multicution "E-M" (for noncontrol of the television of the television statistington), enter "Yesions located in the mplete column 5, so the television of the televisions located in the mplete column 5, so the television of the tel	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 id in the paper SA3 form. If to which the station is licensed by the mathematical which the station is identified.	G Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGIV	NUMBER	STATION	` ,	(If Distant)		
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FORM SA3E. PAGE 3.					OVOTEM ID#	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Lafayette City I	Parish Cons	solidated G	iovernment		063019	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space ( carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 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 educational station, by (for independent multic For the meaning of the Column 5: If you he cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For se	G, identify even by stem during the lons in effect on a scale only on a subsuand also in space on a carried the in each case when the long the long of a distant static ion on a part-tili ion of a distant entered into on a primary trans simulcasts, also	y television standard page (v) of the station. whether the station. whether the station page (v) of the es" in column on during the me basis becar multicast stream and on enter "E". If	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to the station was carried that the basis station report origination cording to its own be reported in containing the station is a network etwork), "N-M" (I educational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, instruction is a network of lack of a geam that is not so the sociation repreyou carried the	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your constitution of the second of the	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Column 6: Give the	e location of ea Canadian statio	ch station. Fo ns, if any, giv nnel line-ups,	or U.S. stations, e the name of the use a separate	list the community ne community with space G for each	to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AQ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
		<u> </u>				

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City I	Parish Cons	olidated G	overnment		063019	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "E" (for independent), "I-M" (for ind						
,		•	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	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
Lafayette City I	Parish Cons	olidated G	overnment		063019	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here 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 differed 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), "To for independent), "-M" (for indepe						
,	-		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	IER OF CABLE S	/STEM:			SYSTEM ID#	Name		
Lafayette City I	Parish Cons	olidated G	overnment		063019	<u> </u>		
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),76,616(e)(2) and (4),76,616(e)(2) and (4)),76,63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under station, as substitute basis.  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast). "E" (for noncommercial educational statio								
Note: If you are utilizing	-	•	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	IER OF CABLE S	/STEM:			SYSTEM ID#	Name		
Lafayette City I	Parish Cons	solidated G	overnment		063019			
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(l)(2) and (4),76,616(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 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.  - 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 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 inetwork multicast). "E" (for noncommercial educational multi								
Note: If you are utilizing			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			
	NOWBER	STATION		(II Distant)				
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
Lafayette City	Parish Cons	solidated G	overnment		063019			
PRIMARY TRANSMITT	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.616(e)(2) and (4), 76.63 (fel(2)(2) and (4)), 76.63 (fel(2)(2) and (4))], and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, wRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M								
Note: If you are utilizing	ng multiple chai	•	•		cnannel line-up.			
		CHANN	EL LINE-UP	AV				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name		
Lafayette City	Parish Cons	olidated G	overnment		063019			
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(lc)] and (4), 76.16 (lc)(2) and (4), 76.51 (lc)(2) and (4), 76.51 (lc)(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, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast), For (f								
		CHANN	EL LINE-UP	ΔW				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063019 **Lafayette City Parish Consolidated Government** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2019/1
LEGAL NAME OF OWNER OF CABLE SYS Lafayette City Parish Consolid		nent				SYSTEM ID# 063019	Name
SUBSTITUTE CARRIAGE: SPECI	AL STATEMEN	IT AND PROGRAM LOG					
In General: In space I, identify every no substitute basis during the accounting p	eriod, under spe	ecific present and former FC	C rules, regula	ations, or a	uthorizatio	ons. For a further	
explanation of the programming that multiple 1. SPECIAL STATEMENT CONCE			e general instr	ructions loc	ated in the	e paper SA3 form.	Substitute Carriage:
<ul> <li>During the accounting period, did you broadcast by a distant station?</li> </ul>			s, any nonne	twork telev	vision proo		Special Statement and
<b>Note:</b> If your answer is "No", leave the log in block 2.	e rest of this pag	ge blank. If your answer is '	Yes," you mu	ust comple			Program Log
2. LOG OF SUBSTITUTE PROGR. In General: List each substitute progrelear. If you need more space, please Column 1: Give the title of every neriod, was broadcast by a distant stander certain FCC rules, regulations, SA3 form for futher information. Do notitles, for example, "I Love Lucy" or "Necolumn 2: If the program was broadcast sign of the Column 3: Give the call sign of the Column 4: Give the broadcast state the case of Mexican or Canadian state Column 5: Give the month and day first. Example: for May 7 give "5/7."  Column 6: State the times when the tothe nearest five minutes. Example: stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the delete under FCC rules and regula gram was substituted for programmin effect on October 19, 1976.	am on a separa attach additional attach additional attach additional attach additional attachment to use general of BA Basketball: addast live, enter station broadca on's location (thons, if any, the average when your system a program carried listed program ions in effect du	al pages. ision program (substitute pour cable system substitutes. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ged by a system from 6:01:	rogram) that, d for the progeral instructio "basketball".  o." m. station is lice station is idenorogram. Use cable system. 5 p.m. to 6:2 mming that yes enter the let	during the ramming ones located List specinsed by the httiffied). In numerals List the till 8:30 p.m. our system ter "P" if the	e accounting another of another o	ng station per m , in month rately	
SURSTITI	TE PROGRAM			EN SUBS		7. REASON	
1. TITLE OF PROGRAM  2. LIVE? Yes or No.	3. STATION'S		5. MONTH AND DAY		TIMES	FOR DELETION	
					_		
					_		
					_		
					_		
					_		
<u> </u>							

**ACCOUNTING PERIOD: 2019/1** FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Lafayette City Parish Consolidated Government 063019 PART-TIME CARRIAGE LOG J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in

## Part-Time Carriage Log

column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-

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

		DATES	S AND HOURS (	OF PART-TIME CAR	RIAGE			
CALL SIGN -	WHEN	CARRIAGE OCC		CALL SIGN -	WHEN CARRIAGE OCCURRED			
	DATE	HOU FROM	RS TO		DATE	FROM	OURS	то
		_					_	
		_					_	
		_					_	
		_					_	
		_					_	
							_	
		_					_	
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							_ <del>_</del>	
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							_	
							<mark></mark> -	

LEGA	L NAME OF OWNER OF CABLE SYSTEM:  ayette City Parish Consolidated Government		SYSTEM ID# 063019	Name						
all a (as	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.  A 1,969,385.43 (Amount of gross receipts)									
• Con • Con • If you fee: • If you accompany	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.									
bloc ▶ If pa 3 be	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 3 below.  rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.  rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be surcharge.	entered on line 2 in	block							
Block	2 in block 4 below.  Block MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at									
Block 2	This is your minimum fee.  DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colu "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting per Yes—Complete the DSE schedule.	mn 4, you must chec	ck							
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	\$	0.00							
	Line 3. Add lines 1 and 2 and enter here	\$	-							
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger 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. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	\$	0.00 0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing						
	Line 4. FILING FEE									
	Add Lines 1, 2 and 3 of block 4 and enter total here	\$ (See page (i) of the	21,679.26	form for submitting the additional fees.						

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
Name	Lafayette City Parish Consolidated Government	063019								
	•	000010								
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations									
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	296								
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Ide we can contact about this statement of account.)	ntify an individual								
for Further Information	Name Chad Governale	Telephone 337-291-8128								
	Address 700 St John Street, Suite 300 (Number, street, rural route, apartment, or suite number)									
	Lafayette, LA 70501 (City, town, state, zip)									
	Email cgovernale@lus.org	Fax (optional) 337-210-4558								
0	CERTIFICATION (This statement of account must be certifed and signed in accordan	ce with Copyright Office regulations.								
Certifcation	I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)									
	(Owner other than corporation or partnership) I am the owner of the cable system	as identifed in line 1 of space B; or								
	(Agent of owner other than corporation or partnership) I am the duly authorized a in line 1 of space B and that the owner is not a corporation or partnership; or	gent of the owner of the cable system as identified								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of in line 1 of space B.	the legal entity identifed as owner of the cable system								
	I have examined the statement of account and hereby declare under penalty of law that are true, complete, and correct to the best of my knowledge, information, and belief, and [18 U.S.C., Section 1001(1986)]									
	X "/s/" Teles Fremin									
	Enter an electronic signature on the line above using an "/s/" signatu (e.g., /s/ John Smith). Before entering the first forward slash of the /s "F2" button, then type /s/ and your name. Pressing the "F" button w	s/ signature, place your cursor in the box and press the								
	Typed or printed name: <b>Teles Fremin</b>									
	Title: <b>Communications Director</b> (Title of official position held in corporation or partnership)									
	Date: August 21, 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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
Lafayette City Parish Consolidated Government	063019	Name						
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."								
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.								
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners?	nsmissions							
X NO								
YES. Enter the total here and list the satellite carrier(s) below								
Name Name Name Mailing Address Mailing Address								
INTEREST ASSESSMENTS								
You must complete this worksheet for those royalty payments submitted as a result of a late payment or unc For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	lerpayment.	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								
x 0.	00274							
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	_							
	st charge)							
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistation contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ance please							
** 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 Of please list below the owner, address, first community served, accounting period, and ID number as given in filling.								
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: 2019/1

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that 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  $\varepsilon$  television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

### **EXAMPLE**:

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

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



	Distant Stations Carried		Identification o	f Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
)-	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

40,00							
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: 2019/1** 

DSE SCHEDULE. PAGE 11. (CONTINUED)												
4	Legal Name of Owner of Cable System:  Lafayette City Parish Consolidated Government  063019											
1												
	SUM OF DSEs OF CATEGORY "O" STATIONS:											
	Add the DSEs of each station											
	Enter the sum here and in line	0.00										
	Unetructions:											
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
	of space G (page 3).											
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-											
of DSEs for	mercial educational station, give the DSE as ".25."  CATEGORY "O" STATIONS: DSEs											
Category "O"	CALL SIGN	DOE	CALL SIGN		CALL SIGN	DCE						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
				<b></b>								
Add rows as				<b></b>								
necessary.				<b> </b>								
Remember to copy												
all formula into new				<b>.</b>								
rows.												
				<b>†</b>								
				<b></b>								
				<b>†</b>								

	LEGAL NAME OF 0	OWNER OF CABLE SYSTEM:					,	SYSTEM ID#			
Name	Lafayette City Parish Consolidated Government							063019			
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3).  Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station.  Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.										
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs										
	1. CALL SIGN	2. NUMBEI OF HOU CARRIE SYSTEM	R 3. NU JRS OI ED BY ST M OI	JMBER HOURS TATION NAIR	4. BASIS OF CARRIAG VALUE	5. TYF	.UE				
						X Y					
						x					
						x					
			÷	=		X					
			÷			x x					
Computation of DSEs for Substitute-Basis Stations	space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted										
		SUE	BSTITUTE-BAS	IS STATIONS	S: COMPUTA	TION OF DSEs					
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE			
			••••••••••••				÷	=			
		÷					÷				
			:				÷	=			
		÷	:				÷	=			
	Add the DSEs	OF SUBSTITUTE-BASI	S STATIONS:	),	▶	0.	00				
<b>5</b> Total Number of DSEs	number of DSE:  1. Number of 2. Number of 2.	ER OF DSEs: Give the ames applicable to your system of DSEs from part 2 • f DSEs from part 3 • f DSEs from part 4 •		in parts 2, 3, and	4 of this schedule	and add them to prov	0.00 0.00 0.00	0.00			

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

LEGAL NAME OF C			overnment				S'	YSTEM ID# 063019	Name
Instructions: Blod In block A: • If your answer if schedule.	"Yes," leave the re	emainder of p		7 of the DSE scho	edule blank aı	nd complete pa	art 8, (page 16) of	the	6
If your answer if	"No," complete blo			ELEVISION M	ARKETS				Computation of
_	1981?	outside of all	major and sma		efined under s			gulations in	3.75 Fee
		BLOG	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	s of distant st and regulatione DSE Sche	ations listed in ons prior to Jui dule. (Note: TI	part 2, 3, and 4 one 25, 1981. For fund letter M below r	f this schedule urther explana	e that your sys	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfatherec instructions fc E Carried pursu: *F A station pre	ules and reguled pursuant to as defined to all educations of the station (76. or DSE schedant to individuationally carried JHF station was and to station was a station wa	lations cited be to the FCC mand in 76.5(kk) (7 all station [76.565) (see paragulule). Lual waiver of Fed on a part-ting grade-Berthin grade-B	ne or substitute ba contour, [76.59(d)(	ose in effect of 76.57, 76.59(b (e)(1), 76.63(a 63(a) referring obstitution of g	n June 24, 198 ), 76.61(b)(c), n) referring to 7 g to 76.61(d) randfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
						ļ			
		1						0.00	
		В	LOCK C: CO	MPUTATION O	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				-	
Line 2: Enter the	sum of permitte	ed DSEs fro	m block B ab	ove					
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter so	um here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				x		carriage?  If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

Lafayette City Parish Consolidated Government 063019											
		ī	BLOCK	A: TELEVIS	ION MARKET	S (CONTIN	UED)	ī			
	CALL IGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6	
										Computation of 3.75 Fee	
										0.10100	
							•		•••••		
									•••••		
									•••••		
				-							
••••••							•				
••••••							•				
				-							
				<b>-</b>							
••••••							•				
									•••••		
				-							
									•••••		
									•••••		

Name	LEGAL NAME OF OWN			rnmont					S	YSTEM ID#					
	Lafayette City I	Parish Cons	solidated Gove	ernment						063019					
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FA—Part-time sp 76.59  B—Late-night pp 76.61  S—Substitute ca gener. Column 5: Indicate Column 6: Compar in block	stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.  Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule  Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981  Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1)  Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters  (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).  B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)).  S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form.  Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule  Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station.  IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division.													
		PERMITTE	ED DSE FOR STA	TIONS CARRI	FD	ON A PART-TIME AN	ID SUBSTI	THE BASIS							
	1. CALL	1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED													
	SIGN	SIGN DSE PERIOD CARRIAGE DSE DSE													
									•••••						
									••••••						
Computation of the		"Yes," comple	te blocks B and C ocks B and C blan	k and complete		art 8 of the DSE sched									
Syndicated			BLOCI	K A: MAJOR	TE	ELEVISION MARK	ET								
Exclusivity Surcharge	• Is any portion of the	cable system w	ithin a top 100 maio	or television mar	ket	t as defned by section 7	6.5 of FCC	rules in effect J	lune 24.	1981?					
	Yes—Complete	•				No—Proceed to									
							parto								
	BLOCK B: C	arriage of VHF	/Grade B Contour	Stations		BLOCK	C: Compu	itation of Exem	npt DSE	S					
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p								
	Yes—List each s  X No—Enter zero a		n its appropriate per part 8.	mitted DSE		Yes—List each st  X No—Enter zero a			ate permi	itted DSE					
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE					
		<del>  </del>		ļ											
		<del>  </del>													
		<b> </b>													
		<del>                                     </del>	TOTAL DSEs	0.00				TOTAL DS	SEs	0.00					
		L		0.00	- []										

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government	SYSTEM ID# 063019	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,969,385.43	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.      No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	<u></u>		
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 D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		

Name			STEM ID#
	I	Lafayette City Parish Consolidated Government	063019
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
Syndicated		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	
		Syndicated Exclusivity Surcharge.	
	Instruc	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.	
		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	_	ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	
Base Rate Fee	blank		
	What i	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 "local	
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ \$	
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	-
	2	(If block A of part 6 was checked "Yes,"	
		use the total number of DSEs from part 5.).	<u>-</u>
	Section 3	If the figure in section 2 is <b>4.000 or less,</b> 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 ▶ <u>\$</u>	-
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	0.00

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Lafayette City Parish Consolidated Government	063019	
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4 A. Enter 0.01064 of gross receipts		8
(the amount in section 1)		
B. Enter 0.00701 of gross receipts	_	Commutation
(the amount in section 1)► \$		Computation of
		Base Rate Fee
C. Multiply line B by 3.000 and enter here	_	
D. Enter 0.00330 of gross receipts		
(the amount in section 1) ▶ \$		
E. Subtract 4.000 from total DSEs		
(the figure in section 2) and enter here		
F. Multiply line D by line E and enter here <b>\$</b>		
G. Add lines A, C, and F. This is your base rate fee.		
Enter here and in block 3, line 1, space L (page 7)		
Base Rate Fee	0.00	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	ast signals shall	
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel		9
Space G.  In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee	e to exclude	_
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take a		Computation of
exclusion, you must:		Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to		and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in		Partially
also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be if your cable system is wholly located outside all major television markets, complete block A only.	now. However,	Distant Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant sta	tion you	Permitted Stations
carried to that community.  Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo	postod	
outside the station's local service area. A subscriber located outside the local service area of a station is distant to that sta		
the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the		
system will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
groups. In each section:		
Identify the communities/areas represented by each subscriber group.		
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all	l of the	
subscribers in the group.		
<ul><li>If:</li><li>1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it it</li></ul>	n narts 2_3	
and 4 of this schedule; or,	parto 2, 0,	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in be part 6 of this schedule.	olock B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
<ul> <li>Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in the particular subscriber group.</li> </ul>	instructions	
in the paper SA3 form.		
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the		
DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need actual calculations on the form.		

## SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063019 **Lafayette City Parish Consolidated Government** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE  Lafayette City Par			ment			S	063019	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROU	JP		UP	٥		
COMMUNITY/ AREA	Lafayet	te		COMMUNITY/ AREA	Brouss	ard		<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		<u> </u>				 		Syndicated
								Exclusivity
					<u></u>			Surcharge for
	<u> </u>		<del></del>		<del></del>	-		Partially
	<u></u>	<b>-</b>	<u></u>		···	- H		Distant
								Stations
						-		
					<u></u>			
	<u> </u>		·- <del>-</del>		<del></del>			
Total DSEs		<u> </u>	0.00	Total DSEs		Į.I.	0.00	
		. 4.020				_		
Gross Receipts First G	iroup	\$ 1,938	3,254.56	Gross Receipts Secon	nd Group	\$	11,502.81	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Youngs	sville		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
	···	+	•		<u></u>	-		
		<b></b>			<u></u>		•••••	
						-		
						H	····	
						H		
					1			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	<u>\$</u> 17	<b>7,251.41</b>	Gross Receipts Fourt	h Group	\$	549.20	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourtl	h Group	\$	0.00	
	•	-		<u> </u>	•	-		
			criber group	as shown in the boxes a	above.			
Enter here and in block	k 3, line 1,	space L (page 7)				\$	0.00	

LEGAL NAME OF OWNE  Lafayette City Par			nment			S	YSTEM ID# 063019	Name
B		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAG		IBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Carenc	ro		COMMUNITY/ ARE			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
		-				+		and
		-						Syndicated Exclusivity
								Surcharge for
						-		Partially
		-						Distant Stations
		-				-		
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	1,827.45	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GRO	)UP <b>0</b>	COMMUNITY/ ARE		SUBSCRIBER GROU	JP <b>0</b>	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
	<u> </u>						<u></u>	
		-				-		
	-							
		-						
Total DSEs Gross Receipts Third (	2roup	¢	0.00	Total DSEs	rth Group	<b>¢</b>	0.00	
Gross Receipts Trilla (	эгоир	\$	0.00	Gross Receipts Fou	rui Gioup	Ψ	<u> </u>	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER  Lafayette City Paris			ment			S	YSTEM ID# 063019	Name
BLO				TE FEES FOR EAC				
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
			<u>.</u>		<u></u>			Syndicated
					<del></del>		<u></u>	Exclusivity Surcharge
			·		····			for
								Partially
								Distant
		-						Stations
			<u>.</u>		<u></u>		<u></u>	
			·		····		<u></u>	
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
							-	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ELE	EVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<b></b>					
			-				<u></u>	
			·		····			
					<u></u>			
		-			<del></del>			
			<u>-</u>			<b>-</b>		
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			<b></b>		<u></u>	-		
			·			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
		_						
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER  Lafayette City Pari			ment			Sì	O63019	Name
				TE FEES FOR EACH				
	TEENTH	SUBSCRIBER GROU		11	JRTEENTH	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
						H		for
								Partially
		-						Distant
								Stations
••••••		-					<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	TEENTH	SUBSCRIBER GROU		11	IXTEENTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-					<u></u>	
		-			-		<u> </u>	
		-						
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

	GAL NAME OF OWNER OF CABLE SYSTEM:  afayette City Parish Consolidated Government  063019								
				TE FEES FOR EACH					
	ITEENTH	SUBSCRIBER GROU		11	GHTEENTH	SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
O'TEE O'O'T	DOL	OALL GIGIT	DOL	OTTEL OTOTA	BOL	O/ LEE OIGIV	DOL	Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
					<u></u>		<u></u>	Surcharge	
		-			<mark></mark>		<del></del>	for Partially	
					<u></u>		<del></del>	Distant	
		-			······································	-	<u></u>	Stations	
		-							
					<u> </u>		<del></del>		
					<mark></mark>		<del></del>		
	<u> </u>					Ц	0.00		
Total DSEs			0.00	Total DSEs		-	0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
NIN	ITEENTH	SUBSCRIBER GROU	JP	11	WENTIETH	SUBSCRIBER GROU	IP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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		-							
					<u> </u>		<del></del>		
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		-			<u> </u>		<del></del>		
							<u></u>		
					<u></u>	H	<del></del>		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	Y-FIRST	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.120				Base Rate Fee
								and
						-		Syndicated
								Exclusivity
								Surcharge
		-					<u></u>	for
							····	Partially Distant
						-		Stations
		-			••••			3
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
or occurrence is most of	oup	<u>·</u>		l c. ccc : tccc,p.tc ccc.	oa	· ·		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWENT	Y-THIRD	SUBSCRIBER GRO	UP	TWEN	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-	····	
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	·····							
Total DSEs	- 1		0.00	Total DSEs	<b>'</b>		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Dana Bata Fan Third C			0.00	Basa Bata Faa Faw	ath Crown		0.00	
Base Rate Fee Third G	συρ	\$	0.00	Base Rate Fee Four	ui Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			ment			SY	O63019	Name
				TE FEES FOR EACH				
	Y-FIFTH	SUBSCRIBER GROU		11	ITY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA	•••••		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated
								Exclusivity Surcharge
		-						for
								Partially
		-						Distant
								Stations
	ļ							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	EVENTH	SUBSCRIBER GROU	JP	Ti .	Y-EIGHTH	SUBSCRIBER GROU	Р	
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 G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

,	BLE SYSTEM: nsolidated Gover	nment			S	063019	Name
	: COMPUTATION C		TE FEES FOR EAC				
	H SUBSCRIBER GRO				SUBSCRIBER GRO		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
		<u></u>					Exclusivity Surcharge
		<u> </u>	1	·····			for
			· · · · · · · · · · · · · · · · · · ·				Partially
							Distant
							Stations
		<u></u>					
	•••		1				
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	<b>\$</b>	0.00	Gross Receipts Sec	ond Group	\$	0.00	
orodo redespto i not orodo	•		ll cross receipts eed	ona Oroup			
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
			<b> </b>	•	1		
THIRTY-FIRS	T SUBSCRIBER GRO	)UP			SUBSCRIBER GRO	UP	
	T SUBSCRIBER GRO	OUP 0		TY-SECOND	SUBSCRIBER GRO	UP <b>0</b>	
	T SUBSCRIBER GRO		THIR	TY-SECOND	SUBSCRIBER GRO		
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE	A		0	
CALL SIGN DSE		0	THIR COMMUNITY/ ARE	A		0	
CALL SIGN DSE		DSE	THIR COMMUNITY/ ARE	DSE		DSE	
CALL SIGN DSE	CALL SIGN	0 DSE	THIR COMMUNITY/ ARE CALL SIGN  Total DSEs	DSE	CALL SIGN	0 DSE	
COMMUNITY/ AREA	CALL SIGN	0 DSE	THIR COMMUNITY/ ARE CALL SIGN  Total DSEs	DSE	CALL SIGN	0 DSE	

LEGAL NAME OF OWNER Lafayette City Paris			ment			S	YSTEM ID# 063019	Name
BLO	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	Y-THIRD	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 0.0.1	502	07122 0.011	202	07.122 0.0.1	302	07.22 0.0.1	302	Base Rate Fee
								and
		-						Syndicated
								Exclusivity
					<u></u>			Surcharge
			-		<del></del>			for Partially
			-		<del></del>			Distant
		-	•		···		····	Stations
					••••			
		-						
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
THIRT	Y-FIFTH	SUBSCRIBER GRO	UP	ТН	IIRTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA .			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				_		
		-			<u></u>		<u></u>	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	O63019	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU		Ti .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-					<u></u>	Syndicated Exclusivity
								Surcharge
		-						for
		-						Partially
								Distant
					<u> </u>		<del></del>	Stations
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		-						
••••••								
T + 1005			0.00	T		Ц	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	Y-NINTH	SUBSCRIBER GROU		Ti .		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·		<del></del>	
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					<u></u>	H	<u></u>	
		-						
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	O63019	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU		Ti .	Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.22 0.0.1	302	07.122 01011		0,122 0.0.1	202	07.22 0.0.1	302	Base Rate Fee
								and
		-						Syndicated
								Exclusivity
		-					<del> </del>	Surcharge for
		-						Partially
							<u></u>	Distant
								Stations
		-				 		
							<del></del>	
••••••								
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FORT	Y-THIRD	SUBSCRIBER GROU	JP	FORT	Y-FOURTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
							<del> </del>	
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		-						
		- -				 		
		-					<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER  Lafayette City Pari			ment			Sì	O63019	Name
				TE FEES FOR EACH				
	ΓY-FIFTH	SUBSCRIBER GROU		11	RTY-SIXTH	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
							<del>.  </del>	Exclusivity
							<del></del>	Surcharge for
							<u></u>	Partially
								Distant
		-				_		Stations
		-					<u></u>	
		-			<u>-</u>		<del></del>	
					<u>-</u>		<del></del>	
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GROU	JP	FORT	Y-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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					<u>.</u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			ment			Sì	O63019	Name
				TE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GROU			FIFTIETH	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>		<u> </u>	Exclusivity Surcharge
					<u>.</u>		<u> </u>	for
		-						Partially
								Distant
		-						Stations
					<u> </u>			
••••••		-			·		<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
				·	·			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FIFT	Y-FIRST	SUBSCRIBER GROU	JP	Ti .	Y-SECOND	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u></u>	
							<u></u>	
					<u>-</u>		<u> </u>	
Total DCFa			0.00	Total DCFs			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

	963019	S			nment			LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EAC				
9		SUBSCRIBER GROU				SUBSCRIBER GRO	TY-THIRD	
Computat	0			COMMUNITY/ AREA	0		••••••	COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and					<mark></mark>			
Syndicate Exclusivi					<mark></mark>		···	
Surcharg								
for						_		
Partially								
Distant								
Stations					<u></u>			
			···		···		···	
		-		•	<u> </u>	_		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	roup	<b>Sase Rate Fee</b> First G
	JP	SUBSCRIBER GROU	IFTY-SIXTH	F	UP	SUBSCRIBER GRO	TY-FIFTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			····		<u> </u>			
					<mark></mark>		···	
		-		•	<u> </u>	_		
					<u></u>	-		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	h Group	Total DSEs Gross Receipts Four	0.00	\$	Group	otal DSEs

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
		-						Syndicated
					<del></del>	<u> </u>		Exclusivity Surcharge
					···	-		for
		-				-		Partially
								Distant
		-						Stations
		-			···	•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
·				·				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FIFT	Y-NINTH	SUBSCRIBER GROU	JP			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>			
						-		
Total DCCa			0.00	Total DOFo			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Paris			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EAC				
	Y-FIRST	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			<mark>.</mark>					Exclusivity
					····		<del></del>	Surcharge for
					····			Partially
								Distant
								Stations
					····			
					••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	auc	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXT	Y-THIRD	SUBSCRIBER GRO	UP	SIX	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
		-				-		
			<u>-</u>				<u></u>	
							<u></u>	
			<u> </u>					
					<mark></mark>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
•					•			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			criber group	as shown in the boxes	s above.	\$		

Lafayette City Parish Co	BLE SYSTEM: Isolidated Goveri	nment			S	063019	Name
BLOCK A	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP		
	H SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA	٩		0	Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u> </u>		Base Rate F
		<u></u>			.		and
	·	<del> </del>					Syndicate Exclusivit
					H		Surcharg
							for
							Partially
							Distant
		<u></u>					Stations
		···					
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Group	<b> \$</b>	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
						1	
SIXTY-SEVENT	SUBSCRIBER GRO	DUP	SIX	XTY-EIGHTH	SUBSCRIBER GRO	UP	
SIXTY-SEVENT				XTY-EIGHTH		1	
SIXTY-SEVENT		DUP	SIX	XTY-EIGHTH		UP	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENT	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENTI COMMUNITY/ AREA  CALL SIGN DSE	H SUBSCRIBER GRO	0 0	SIX COMMUNITY/ AREA	XTY-EIGHTH	I SUBSCRIBER GRO	UP <b>0</b>	
SIXTY-SEVENTI COMMUNITY/ AREA  CALL SIGN DSE	H SUBSCRIBER GRO	DUP  DSE	CALL SIGN	DSE	I SUBSCRIBER GRO	DSE	
SIXTY-SEVENTI COMMUNITY/ AREA  CALL SIGN DSE	CALL SIGN	DUP  DSE  DSE  O.000	COMMUNITY/ AREA	DSE	CALL SIGN	DSE 0.00	
COMMUNITY/ AREA	CALL SIGN	DUP  DSE  DSE  0.00	COMMUNITY/ AREA	DSE The Group	CALL SIGN	DSE 0.00	

LEGAL NAME OF OWN Lafayette City Pa			nment			S	YSTEM ID# 063019	Name
				TE FEES FOR EAG				
	(TY-NINTH	SUBSCRIBER GRO		Ħ		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
	····		····		<u> </u>			Exclusiv Surchar
			••••			•		for
								Partiall
								Distant
			····					Station
	····		•		•••••	•		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
							1	
SEVEI COMMUNITY/ AREA	NTY-FIRST	SUBSCRIBER GRO	<b>0</b>	COMMUNITY/ ARE		SUBSCRIBER GROU	<b>0</b>	
COMMUNITY AREA				COMMONT IT ARE				
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 For	uth Group	e	0.00	
Jude Nate i ee iiiilu	Стоир	4	0.00	Dase Nate Fee POU	aar Group	Ψ	0.00	
Base Rate Fee Third  Base Rate Fee: Add the Enter here and in block	he <b>base ra</b>		0.00	Base Rate Fee Foundation as shown in the boxe		\$	0.00	

LEGAL NAME OF OW Lafayette City P		LE SYSTEM: solidated Govern	ment			S	YSTEM ID# 063019	Name
				ATE FEES FOR EAC		RIBER GROUP	LID	
COMMUNITY/ AREA		SUBSCRIBER GRO	JP <b>0</b>	COMMUNITY/ AREA	9			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL GIGIT	DOL	ONEE GIGIT	DOL	Office Office	DOL	O/IEE OIOIV	DOL	Base Rate Fee
								and
								Syndicated
					····			Exclusivity Surcharge
								for
								Partially
								Distant
••••••								Stations
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					<u>.</u>			
						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
SEVE	ENTY-FIFTH	SUBSCRIBER GRO	JP	SEVE	ENTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA0			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····			-				
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Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE Lafayette City Par			ment			S	YSTEM ID# 063019	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
SEVENTY-	SEVENTH	SUBSCRIBER GROU	JP	SEVEN	ITY-EIGHTH	I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGIV	DOL	CALL SIGN	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
	·····			.				Partially Distant
	····			.	····			Stations
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Total DSEs			0.00	Total DSEs			0.00	l
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVEN'	TY-NINTH	SUBSCRIBER GROU	JP		EIGHTIETH	SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
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Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	l
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			ment			Sì	O63019	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU		11	Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				Computation of
								Base Rate Fee
								and
		-						Syndicated
							<del>.  </del>	Exclusivity
							<del></del>	Surcharge for
							<u></u>	Partially
								Distant
		-				_		Stations
		-					<u></u>	
					<u>-</u>		<del></del>	
					<u>-</u>		<del></del>	
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 Secon	d Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GROU	JP	EIGHT	Y-FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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					<u> </u>			
		-			<u>.</u>		<u> </u>	
		-			<u>.</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			ment			Sì	O63019	Name
				TE FEES FOR EACH				
	ΓY-FIFTH	SUBSCRIBER GROU		Ti .	HTY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE		CALL SIGN DSE CALL SIGN DSE			
								Base Rate Fee
		-						and
		-						Syndicated
					-		<u> </u>	Exclusivity Surcharge
					·		<u> </u>	for
		-						Partially
								Distant
		-						Stations
••••••								
••••••		-					<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
					•			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	EVENTH	SUBSCRIBER GROU	JP	EIGH1	Y-EIGHTH	SUBSCRIBER GROU	Р	
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>	
							2.22	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Paris			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EAC				
	Y-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA .			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
					<u></u>			Syndicated
					<u></u>	<u> </u>	<del></del>	Exclusivity Surcharge
						-		for
								Partially
								Distant
		-						Stations
					<u></u>		<u></u>	
					<del></del>	-	<del></del>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINET	Y-FIRST	SUBSCRIBER GRO	UP	li		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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					<u></u>		<u></u>	
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						<del> </del>		
		-						
			<u>-</u>		<u></u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
•					•			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER  Lafayette City Pari			ment			SY	O63019	Name
				TE FEES FOR EACH				
	Y-THIRD	SUBSCRIBER GROU		11	Y-FOURTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O'TEE O'O'T	DOL	OALL GIGIT	DOL	O/ALL OIGIN	DOL	O'ALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
		-						for Partially
								Distant
••••••								Stations
		-						
T + 1005			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINET	ry-FIFTH	SUBSCRIBER GROU	JP	11	ETY-SIXTH	SUBSCRIBER GROU	Р	
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 G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 063019	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	SEVENTH	SUBSCRIBER GROU		††		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
OTTLE OF OTT	DOL	CALL CICIA	BOL	O/ IEE O/O/V	202	OALL SIGIT	502	Base Rate Fee
								and
								Syndicated
				-				Exclusivity
	<del></del>			·			<u></u>	Surcharge for
	·			·				Partially
								Distant
								Stations
	·····							
	······································							
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		\$	0.00	Base Rate Fee Seco		\$	0.00	
	TY-NINTH	SUBSCRIBER GROU		II		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
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	····				<del></del>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third C	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 OWNER  Lafayette City Pari			ment			S	O63019	Name
				TE FEES FOR EACH				
	D FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				of
								Base Rate Fee
								and
		-						Syndicated
		-						Exclusivity
		-						Surcharge
••••••		-						for
						<u> </u>	····	Partially Distant
		-						Stations
		-					····	Gtationo
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
·	•			·				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	JP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-						
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					<u></u>		<u></u>	
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
						_		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba	<b>9</b> Computation
COMMUNITY/ AREA  O COMMUNITY/ AREA  CALL SIGN  DSE  SE  SE  SE  SE  SE  SE  SE  SE  S	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Ba	
	of
	Base Rate F
	and
	Syndicate
	Exclusivity
	Surcharge for
	Partially
	Distant
	Stations
Total DSEs Total DSEs	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
ONE HUNDRED SEVENTH SUBSCRIBER GROUP  ONE HUNDRED EIGHTH SUBSCRIBER GROUP	
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
<u> </u>	
Total DSEs	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	

Name	YSTEM ID# 063019	S			ment			LEGAL NAME OF OWNE  Lafayette City Par
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	Bl
9	JP	SUBSCRIBER GROU	ED TENTH			SUBSCRIBER GRO	ED NINTH	
Computatio	COMMUNITY/ AREA 0				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	····				<u>.</u>			
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	0.00	-		Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	TWELVTH		JP	SUBSCRIBER GRO	EVENTH	ONE HUNDRED EI
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							<u>.</u>	
							·- <mark>-</mark>	
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							•	
		_						
	····							
	0.00			Total DSEs	0.00		<u> </u>	Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

OWNER OF CABLE SYSTEM:  y Parish Consolidated Government  063	Name Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
OTHIRTEENTH SUBSCRIBER GROUP ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP	<u> </u>
REAO COMMUNITY/ AREA	Computation
DSE CALL SIGN DSE CALL SIGN D	OSE of
	Base Rate F
	and
······································	Syndicate
	Exclusivity Surcharge
	for
	Partially
	Distant
	Stations
<u></u>	
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0.00 Total DSEs 0.	.00
First Group \$ 0.00 Gross Receipts Second Group \$ 0.	.00
erioce recorpte decorpt discap	<u></u>
First Group \$ 0.00 Base Rate Fee Second Group \$ 0.	.00
ED FIFTEENTH SUBSCRIBER GROUP ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP	
REA 0 COMMUNITY/ AREA	0
DSE CALL SIGN DSE CALL SIGN D	SE
<u></u>	
······································	
0.00 Total DSEs 0.	.00
	.00
Third Croup & DOD HCrose Dossints Fourth Croup &	.00
Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.	<del></del>

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EAC				
ONE HUNDRED SEVEN	TEENTH	SUBSCRIBER GROU		Ħ		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 0.0.1	502	07.122.0.0.1	302	07.22 0.0.1	302	07.122.010.1	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
		-					<u></u>	Surcharge for
					····			Partially
		-						Distant
								Stations
							<u></u>	
••••••					····			
Total DSEs		•	0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED NIN	TEENTH	SUBSCRIBER GROU		ii		SUBSCRIBER GROU	JP <b>0</b>	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u></u>	
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	<b></b>							
		-						
		-						
	ļ							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER  Lafayette City Paris			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWENT	Y-FIRST	SUBSCRIBER GRO				SUBSCRIBER GROUP		9
COMMUNITY/ AREA		•••••	0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
					<u> </u>			Syndicated
			-		·····			Exclusivity
			-		·····			Surcharge for
			·		·····		<u></u>	Partially
			•		·····		<u> </u>	Distant
		-						Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gro	up	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWENT	Y-THIRD	SUBSCRIBER GROUP	)	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA .			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-					<u></u>	
		-			·····		<u></u>	
			·				<u> </u>	
			-			H	<u> </u>	
						H		
							<u></u>	
						<u> </u>		
Total DSEs			0.00	Total DSEs		- <u></u>	0.00	
Gross Receipts Third Gro	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWI Lafayette City Pa			nment			S	YSTEM ID# 063019	Name
				TE FEES FOR EA	CH SUBSCE	RIBER GROUP		
		SUBSCRIBER GROU		H		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	:A		0	Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and Syndicate
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								Surcharg
								for
								Partially
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				1				Stations
			<mark>.</mark>					
Γotal DSEs		Ш	0.00	Total DSEs		-11	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	
		SUBSCRIBER GROU	JP	ONE HUNDRED TW	ENTY-EIGHTH	H SUBSCRIBER GROUF	)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	:A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····		<mark>.</mark>					
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	<u></u>							
			<mark></mark>		<mark></mark>			
	·····		····		·····		<u></u>	
				1				
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN Lafayette City Pa			ment			S	YSTEM ID# 063019	Name
В	SLOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGIV	DOL	OALL GIGIT	DOL	OALL SIGN	DOL	CALL GIGIN	DOL	Base Rate Fee
								and
		_						Syndicated
								Exclusivity
					·····	<u> </u>	<u></u>	Surcharge for
					·····			Partially
					••••			Distant
								Stations
					····			
						-		
			······································		·····		····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
0.000 . 1000.pt0ot	2.0up	<u>·</u>		l cost reserve	a	·		
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROUP	<b>)</b>	ONE HUNDRED THII	RTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
			······································		····	-	<u></u>	
	<u></u>						<u></u>	
						H		
						<del> </del>		
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	s above.	\$		

		E SYSTEM: olidated Govern	nment			S	063019	Nam
				TE FEES FOR EAC				
ONE HUNDRED THIRTY-	-THIRD S	SUBSCRIBER GROUI		1		I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Comput
CALL SIGN D	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rat
								and
	H							Syndica
								Exclusi
				·				Surcha for
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			**					Dista
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			<u></u>	1				
otal DSEs			0.00	Total DSEs		!!	0.00	
	,						-	
Gross Receipts First Group	ρ	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First Group	p	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THIRTY	-FIFTH S	SUBSCRIBER GROU	P	ONE HUNDRED	THIRTY-SIXTH	I SUBSCRIBER GROUP	>	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN E	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN E	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN E	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN E	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
CALL SIGN [	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN		
Total DSEs		CALL SIGN	0.00	Total DSEs		CALL SIGN	DSE	
CALL SIGN C							DSE	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  SYSTEM ID#  063019								
E	BLOCK A: (	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROU		H		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			···		·····			and Syndicated
		H						Exclusivity
								Surcharge
		_						for
					·····			Partially Distant
	···		···	·	·····			Stations
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	···		···					
Total DSEs	·	<del>                                     </del>	0.00	Total DSEs	•		0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	Р							
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	RTY-NINTH	SUBSCRIBER GROU	Р	Ħ		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	···		···	·	·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER Lafayette City Paris			ment			S	YSTEM ID# 063019	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FOR	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-SECOND	SUBSCRIBER GROUP		9
COMMUNITY/ AREA	••••••		0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-	<b></b>					and
			·				····	Syndicated Exclusivity
								Surcharge
						-		for
								Partially
								Distant
		-						Stations
		-	<u>.</u>				<u></u>	
			<del> </del>				<u></u>	
			<b>-</b>					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP	)	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			<u> </u>					
T			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  063019								
				TE FEES FOR EACH	SUBSCR	BER GROUP		
	TY-FIFTH	SUBSCRIBER GROUP		ff	ORTY-SIXTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						_		and
		-						Syndicated
					-			Exclusivity
		-						Surcharge for
								Partially
								Distant
								Stations
		-						
		-						
		-				_		
Total DSEs	l	-	0.00	Total DSEs		<del>   </del>	0.00	
Gross Receipts First Gr	oup	<b>s</b>	0.00	Gross Receipts Secor	nd Group	\$	0.00	
, , , , , , , , , , , , , , , , , , , ,								
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
••••••					·	_		
••••••						_		
						<b>-</b>		
		-					•	
T-4-1 D05-			0.00	T-4-1 DOF-			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	i Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU		tt -		SUBSCRIBER GROU	IP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.122				Base Rate Fee
								and
		_						Syndicated
								Exclusivity
					<u></u>		<u></u>	Surcharge
					<del></del>			for Partially
					<del></del>			Distant
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					<u></u>		<u></u>	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

Name	YSTEM ID# 063019	S			ment			LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH	ONE HUNDRED FIFT		SUBSCRIBER GRO	ry-third	ONE HUNDRED FIFT
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	<u>.</u>							
Exclusivity Surcharge								
for		_				-	•	
Partially						_		
Distant							•	
Stations								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>3ase Rate Fee</b> First Gi
	JP	SUBSCRIBER GROU	TY-SIXTH	ONE HUNDRED FI	JP	SUBSCRIBER GRO	TY-FIFTH	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			otal DSEs
		\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	0.00							

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  063019								
				TE FEES FOR EACH	I SUBSCR	IBER GROUP		
ONE HUNDRED FIFTY-	SEVENTH	SUBSCRIBER GROUP		ti -	FTY-EIGHTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA	••••••		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
					<u></u>		<del>.  </del>	Exclusivity
								Surcharge for
		-			<u></u>			Partially
								Distant
		-						Stations
					<u></u>			
					<u></u>			
					<u></u>			
					-			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROUP		11	ED SIXTIETH	SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
	roun	•			h Croup	•		
Gross Receipts Third G	ισυμ	4	0.00	Gross Receipts Fourth	і	Ψ	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  O63019								
В				TE FEES FOR EACH			LID	
COMMUNITY/ AREA		SUBSCRIBER GROU	JP	COMMUNITY/ AREA		SUBSCRIBER GRO	UP	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						-		Base Rate Fee
						+		Syndicated
								Exclusivity
						-		Surcharge
	·····							for Partially
						†		Distant
								Stations
	·····					+		
						†		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 1,938,254.56			,254.56	Gross Receipts Secon	d Group	\$	11,502.81	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Youngs	sville		COMMUNITY/ AREA	Scott			
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	\$ 17	,251.41	Gross Receipts Fourth	Group	\$	549.20	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	ne <b>base ra</b> t	e fees for each subsc	criber aroun	as shown in the boxes a	above			
Enter here and in block			o. group	as shown in the boxes t		\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  063019							Name	
В				TE FEES FOR EAC				
		SUBSCRIBER GRO	UP			SUBSCRIBER GRO		9
COMMUNITY/ AREA	Carenc	ro		COMMUNITY/ AREA			0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicate
								Exclusivi
		-						Surchar
			<u> </u>			-		for Partially
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			0.00	T			0.00	
otal DSEs			0.00	Total DSEs	d C		0.00	
Gross Receipts First G	roup	\$ 1	,827.45	Gross Receipts Seco	ona Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
;	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GRO	UP	
	SEVENTH	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	
	DSE	SUBSCRIBER GRO		COMMUNITY/ AREA		SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0				0	
COMMUNITY/ AREA			0				0	
COMMUNITY/ AREA			0				0	
COMMUNITY/ AREA			0				0	
COMMUNITY/ AREA			0				0	
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COMMUNITY/ AREA			0				0	
COMMUNITY/ AREA			0				0	
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CALL SIGN  CALL SIGN  Fotal DSEs	DSE		DSE	CALL SIGN	DSE		DSE	
CALL SIGN  CALL SIGN  Fotal DSEs	DSE	CALL SIGN	0 DSE	Total DSEs	DSE	CALL SIGN	0 DSE	
COMMUNITY/ AREA	DSE	CALL SIGN	0 DSE	Total DSEs	DSE	CALL SIGN	0 DSE	

## **Nonpermitted 3.75 Stations**

Name	YSTEM ID# 063019				ment			LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EACH				В
9	JP <b>0</b>	SUBSCRIBER GROU	TENTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NINTH	COMMUNITY/ AREA
Computatio			1				- 1	
of Base Rate Fe	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and		-					·	
Syndicated		-				-		
Exclusivity								
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for							···	
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						-		
	0.00	<u> </u>		Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
		\$	d Croup	Base Rate Fee Secon	0.00	\$	iroun	Base Rate Fee First G
	0.00	ą	u Group			[*	тоир	
		SUBSCRIBER GROU				SUBSCRIBER GROU		
								E
	JP				JP			E
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	LEVENTH	E COMMUNITY/ AREA  CALL SIGN
	JP 0 DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA  CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	E COMMUNITY/ AREA

Name	YSTEM ID# 063019				ment	solidated Govern		LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	IRTEENTH			SUBSCRIBER GROU	RTEENTH	
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Exclusivity Surcharge		<del> </del>					-	
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	0.00	<u> </u>		Total DSEs	0.00			Γotal DSEs
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	0.00							
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
	0.00							FI
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	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	FTEENTH	FI COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	FTEENTH	FI COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	FTEENTH	FI COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	FTEENTH	FI COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	FTEENTH	FI COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	FTEENTH	FI COMMUNITY/ AREA
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	0.00 JP 0	SUBSCRIBER GROU	IXTEENTH	S COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	FTEENTH	FI COMMUNITY/ AREA
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	O.00  JP  O  DSE	SUBSCRIBER GROU	IXTEENTH	CALL SIGN	JP 0	SUBSCRIBER GROU	FTEENTH	CALL SIGN
	0.00  JP	SUBSCRIBER GROU	DSE	CALL SIGN  CALL SIGN  Total DSEs	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	CALL SIGN	DSE	CALL SIGN  CALL SIGN  Total DSEs
	O.00  JP  O  DSE	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	FI COMMUNITY/ AREA

	063019	S			ment			LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EAC				
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROU	NTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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Surcharge		<b>-</b>					···	
for		-	<b></b>				<mark></mark>	
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Stations	<u> </u>	<b>-</b>		•••••			<del>" </del>	
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	0.00			Total DSEs	0.00		-	Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	Froup	Base Rate Fee First G
	•	SUBSCRIBER GROU				SUBSCRIBER GROU		
	•							NI
	UP	SUBSCRIBER GROU		COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>		VENTIETH	1	JP			NI
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
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	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	UP <b>0</b>	SUBSCRIBER GROU	VENTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	NTEENTH	NI COMMUNITY/ AREA
	DSE	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	NI COMMUNITY/ AREA

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
TWENT	Y-FIRST	SUBSCRIBER GRO	UP	TWENT	Y-SECOND	SUBSCRIBER GROU	IP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						+		Exclusivity
			<u>.</u>		<u></u>			Surcharge for
			<u>.</u>		···		····	Partially
			-		<u></u>	<del>                                     </del>	····	Distant
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	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWENT	Y-THIRD	SUBSCRIBER GRO	UP	TWENT	Y-FOURTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<b></b>	-	<b></b>					
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
•					•			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

	YSTEM ID# 063019	S`			ment			LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GRO	ITY-FIFTH	
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
and								
Syndicated				•••••		_		
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	0.00	<u> </u>		Total DSEs	0.00	ļ		Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	iroup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	Y-EIGHTH		UP	SUBSCRIBER GRO	SEVENTH	TWENTY-
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third (
		\$	Group			\$	Group	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  063019							Name	
				TE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		_						and
								Syndicate
								Exclusivit
								Surcharge
	····		····				·····	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	
THI	RTY-FIRST	SUBSCRIBER GRO	DUP	THIR	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add				<u>II</u>				

NI	Legal Name of Owner of Cable System:  Lafayette City Parish Consolidated Government  O63019							
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	TY-THIRD	
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate								
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Distant								
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_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROU			<b>'</b>	\$ SUBSCRIBER GROU		
<u> </u> == 2.					<b>'</b>			THIR
				THIE	JP			THIR
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
] ] ] ] ] ] 	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
D	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROU	RTY-SIXTH	THIF COMMUNITY/ AREA  CALL SIGN	JP 0 DSE	SUBSCRIBER GROU	TY-FIFTH	THIR COMMUNITY/ AREA  CALL SIGN
	DSE DSE O.00	SUBSCRIBER GROU	DSE	THIF COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE O.00	CALL SIGN	DSE	THIR COMMUNITY/ AREA  CALL SIGN  Fotal DSEs
	JP 0 DSE	SUBSCRIBER GROU	DSE	THIF COMMUNITY/ AREA  CALL SIGN	JP 0 DSE	SUBSCRIBER GROU	DSE	THIR COMMUNITY/ AREA

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EACH				
THIRTY-S COMMUNITY/ AREA	EVENTH	SUBSCRIBER GROU	JP <b>0</b>	THIRT COMMUNITY/ AREA	Y-EIGHTH	SUBSCRIBER GROU	JP <b>0</b>	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
		-				-		Syndicated Exclusivity
								Surcharge
		-				-		for
								Partially
								Distant
						-		Stations
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Total DSEs	<u> </u>		0.00	Total DSEs	1		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIRT	Y-NINTH	SUBSCRIBER GROU	JP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
			0.00		Crown			
	roup	\$	0.00	Total DSEs Gross Receipts Fourth	Group	\$	0.00	
Total DSEs Gross Receipts Third G	·	<u>\$</u>			•	\$		

	YSTEM ID# 063019				ment		R OF CABL	Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	'-SECOND			SUBSCRIBER GRO	TY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity Surcharge		<u> </u>					·- <del>-</del>	
for							•	
Partially							•	
Distant								
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	0.00	П		Total DSEs	0.00			Total DSEs
	0.00	<b>\$</b>	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
		-	•			, ·  -	·	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>Base Rate Fee</b> First G
	JP	SUBSCRIBER GROU	/-FOURTH	FORT	UP	SUBSCRIBER GRO	TY-THIRD	FOR
	0				0			COMMUNITY/ AREA
				COMMUNITY/ AREA		••••••	•••••	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN		CALL SIGN		CALL SIGN		Total DSEs
	0.00	CALL SIGN  S		CALL SIGN  Total DSEs	0.00			

## **Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER  Lafayette City Pari			•			SY	STEM ID# 063019	Name
				TE FEES FOR EACH				
FORT COMMUNITY/ AREA	ΓY-FIFTH	SUBSCRIBER GROU	JP <b>0</b>	FOR COMMUNITY/ AREA	RTY-SIXTH	SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							<u> </u>	Base Rate Fee
						<b></b>	<u> </u>	and Syndicated
							<u> </u>	Exclusivity
							<b></b>	Surcharge
								for
								Partially
		-				<u> </u>		Distant
						H		Stations
						-	<b></b>	
	<b></b>		ļ					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GROU	JP	FORT	Y-EIGHTH	SUBSCRIBER GROUP	<b>D</b>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<del> </del>	<b></b>	
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						<del> </del>	<b></b>	
		-				<u> </u>		
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						<del> </del>	<b>†</b>	
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE  Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EAC			ID	
COMMUNITY/ AREA	Y-NIN I H	SUBSCRIBER GRO	<u>0</u>	COMMUNITY/ AREA		I SUBSCRIBER GROU	<b>0</b>	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
					····	<u> </u>		Syndicated Exclusivity
			·			<u> </u>		Surcharge
								for
								Partially
			·					Distant Stations
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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	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIF	ΓY-FIRST	SUBSCRIBER GRO	UP	FIF	TY-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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					<u></u>	<u> </u>		
			·					
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	<b> </b>		-			+		
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				11				
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

NI	YSTEM ID# 063019	S			ment	solidated Govern		LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-FOURTH			SUBSCRIBER GROU	TY-THIRD	
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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_	0.00			Total DSEs	0.00			Total DSEs
_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
<u>-</u>								FIF
) 	JP			FI	JP			FIF
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
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) 	JP <b>0</b>	SUBSCRIBER GROU	TY-SIXTH	FI COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-FIFTH	FIF COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	TY-SIXTH	CALL SIGN	JP 0	SUBSCRIBER GROU	TY-FIFTH	FIE COMMUNITY/ AREA  CALL SIGN
	DSE DSE O.00	SUBSCRIBER GROU	DSE	CALL SIGN  CALL SIGN  Total DSEs	DSE O.00	CALL SIGN	DSE	CALL SIGN  CALL SIGN  Figure 1
	JP 0	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	FIF COMMUNITY/ AREA

	YSTEM ID# 063019	S			ment			LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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Exclusivity		H	<b>.</b>				·	
Surcharge for	<u></u>	<b></b>	<u>.</u>			-		
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Distant	····	<b>+</b>	·		•		·····	
Stations								
				•••••			. <mark>.</mark>	
			<b></b>				. <mark>.</mark>	
	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	<b>3ase Rate Fee</b> First G
	UP	SUBSCRIBER GROU	SIXTIETH		UP	SUBSCRIBER GROU	TY-NINTH	FIF <sup>-</sup>
	UP <b>0</b>	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GROU	TY-NINTH	
	0				0			COMMUNITY/ AREA
	_	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA		SUBSCRIBER GROU	DSE	
	0				0			COMMUNITY/ AREA
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	0				0			CALL SIGN
	DSE		DSE	CALL SIGN	DSE		DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNE Lafayette City Pari			ment			S	O63019	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU			-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
							···	Syndicated
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Total DSEs	<u> </u>		0.00	Total DSEs	!		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SIXT	Y-THIRD	SUBSCRIBER GROU	JP	SIXTY	′-FOURTH	H SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			l					
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
				11				
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

LEGAL NAME OF OWNER  Lafayette City Pari			ment			S	YSTEM ID# 063019	Name
				TE FEES FOR EACH	SUBSCR	RIBER GROUP		
SIXT	Y-FIFTH	SUBSCRIBER GRO		SI	XTY-SIXTH	I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA	••••••		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
						+		Exclusivity
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	JP <b>0</b>	SUBSCRIBER GROU	ETY-SIXTH	NIN COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ETY-FIFTH	NINE COMMUNITY/ AREA
] ] ] ] ] ] ] ] ]	JP <b>0</b>	SUBSCRIBER GROU	ETY-SIXTH	NIN COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ETY-FIFTH	NINE COMMUNITY/ AREA
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Name	YSTEM ID# 063019				ment			LEGAL NAME OF OWNE  Lafayette City Par
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
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Name	YSTEM ID# 063019	S'			ment			LEGAL NAME OF OWNE  Lafayette City Par
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9		SUBSCRIBER GROU	SECOND			SUBSCRIBER GRO	ED FIRST	
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LEGAL NAME OF OWNE  Lafayette City Par			ment			S	YSTEM ID# 063019	Name
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e base rate f	\$	i <b>ees</b> for each subs	0.00	Gross Receipts Fourth	n Group	\$ \$	0.00	

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LEGAL NAME OF OWNE  Lafayette City Pari			ment			S
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e Fee: Add th	e <b>base rat</b>			as shown in the boxes	· 	\$

Name	YSTEM ID# 063019				ment	solidated Govern	rish Cons	LEGAL NAME OF OWNE  Lafayette City Par
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LEGAL NAME OF OWNI Lafayette City Pai			ıment			S	YSTEM ID# 063019	Name
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROUI	0	ONE HUNDRED FOR	RTY-FOURTH	I SUBSCRIBER GROUP		
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	063019	S			ment			LEGAL NAME OF OWNE  Lafayette City Par
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	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR	0	SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FORTY COMMUNITY/ AREA
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Legal Name OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  O63019								
				TE FEES FOR EACH				
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU		ONE HUNDRED FIFTIETH SUBSCRIBER GROUP				9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA	Computation			
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ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	/-SECOND	SUBSCRIBER GROU	JP	
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e Rate Fee: Add the			riber group	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government  063019									
		BER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	Bl		
9	ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP				ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP					
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LEGAL NAME OF OWNER  Lafayette City Pari			ment			Sì	O63019	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCF	RIBER GROUP		
ONE HUNDRED FIFTY-	SEVENTH	SUBSCRIBER GROUP	TY-EIGHTH	I SUBSCRIBER GROUP	•			
COMMUNITY/ AREA 0			COMMUNITY/ AREA	9 Computation				
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Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	SIXTIETH	SUBSCRIBER GROU	Р	
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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063019 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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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  Lafayette City Parish Consolidated Government	SYSTEM ID# 063019
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
<b>9</b> Computation	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 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:	
of	☐ First 50 major television market	☐ Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	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 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 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.  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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.	
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP	ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE First Group	Line 1: Enter the VHF DSEs
	total number of DSEs for this subscriber group subject to the surcharge computation	

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063019 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 SEVENTEENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTEENTH 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 NINTEENTH SUBSCRIBER GROUP ONE HUNDRED TWENTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Lafayette City Parish Consolidated Government 063019 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-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH 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 FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-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 . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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