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.

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

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

| | 1 | | | | |
|---|--|--|--|----------------|---------|
| Α | ACCOUNTING PERIOD COVERED BY THIS STATEMENT: | | | | |
| Accounting Period | 2019/1 | | | | |
| B Owner | Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines. If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire acco Check here if this is the system's first filing. If not, enter the system's ID | ss of the cable syste r on the last day of th unting period. | m. e accounting period should su | - | 63540 |
| | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM | | | | |
| | NEMONT COMMUNICATIONS, INC. | | | | |
| | NEMONT COMMUNICATIONS, INC. dba NEMONT | | | | |
| | | | | 63540 | 020182 |
| | | | | 63540 | 2019/1 |
| | PO BOX 600 SCOBEY, MT 59263 | | | | |
| С | INSTRUCTIONS: In line 1, give any business or trade names used to i | identify the busine | ss and operation of the sys | stem unless | s these |
| | names already appear in space B. In line 2, give the mailing address o | of the system, if dif | ferent from the address giv | en in spac | e B. |
| System | 1 IDENTIFICATION OF CABLE SYSTEM: SCOBEY | | | | |
| | MAILING ADDRESS OF CABLE SYSTEM: PO BOX 600 2 (Number, street, rural route, apartment, or suite number) SCOBEY, MT 59263 | | | | |
| | (City, town, state, zip code) | | | | |
| D Area | Instructions: For complete space D instructions, see page 1b. Identify with all communities. | y only the frst com | munity served below and re | elist on pag | je 1b |
| Served | CITY OR TOWN | STATE | | | |
| First | SCOBEY | МТ | | | |
| Community | Below is a sample for reporting communities if you report multiple ch | annel line-ups in S | Space G. | | |
| | CITY OR TOWN (SAMPLE) | STATE | CH LINE UP | SUB | GRP# |
| Sample | Alda | MD | Α | | 1 |
| Gampio | Alliance | MD | В | | 2 |
| | Gering | MD | В | | 3 |
| form in order to pro numbers. By provid search reports prep | Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect cess your statement of account. PII is any personal information that can be used to identify ing PII, you are agreeing to the routine use of it to establish and maintain a public record, vared for the public. The effect of not providing the PII requested is that it may delay proces f statements of account, and it may affect the legal sufficiency of the fling, a determination for the statements of account. | y or trace an individual, which includes appeari ssing of your statement | such as name, address and telep ng in the Offce's public indexes ar of account and its placement in th | phone nd in | |

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

08/15/2019

| LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | | | SYSTEM ID# 63540 | |
|--|---|--|----------------------------------|---|
| Instructions: List each separate community served by the cable system. A "or in FCC rules: "a separate and distinct community or municipal entity (including areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(d of system identification hereafter known as the "first community." Please use in Note: Entities and properties such as hotels, apartments, condominiums, or n below the identified city or town. | y unincorporated communiti d). The frst community that as the first community on a nobile home parks should be | es within unincorp you list will serve all future filings. e reported in pare | orated as a form ntheses | D Area Served |
| If all communities receive the same complement of television broadcast station all communities with the channel line-up "A" in the appropriate column below of on a partially distant or partially permitted basis in the DSE Schedule, associa designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community- channel line-up designated by an alpha-letter(s) (based on your Space G repo | or leave the column blank. It te each relevant community by-community basis, associa orting) and a subscriber grou | f you report any st with a subscriber ate each commun | ations · group, ity with a | |
| (based on your reporting from Part 9 of the DSE Schedule) in the appropriate CITY OR TOWN | Columns below. | CH LINE UP | SUB GRP# | - |
| SCOBEY | МТ | В | 1 | First |
| CULBERTSON | MT | B | 2 | Community |
| OUTLOOK | MT | B | 2 | Community |
| FLAXVILLE | MT | B | 1 | |
| WILLISTON | ND | C | 2 | |
| PLENTYWOOD | MT | В | 2 | |
| BAINVILLE | MT | В | 2 | See instructions for additional informatic |
| WESTBY | MT | B | 2 | on alphabetization. |
| FROID | MT | B | 2 | |
| BROCKTON | MT | B | 2 | |
| FORT PECK | MT | A | 3 | |
| MEDICINE LAKE | MT | B | 3 | Add rows as necessar |
| NASHUA | MT | | | |
| POPLAR | MT | A B | 3 2 | |
| SACO | MT | A | 2 | |
| GLASGOW | MT | | | |
| WOLF POINT | | A | 3 | |
| RESERVE | MT | B | 2 | |
| | MT | B | 2 | |
| AMBROSE FORTUNA | ND ND | B | 2 2 | |
| DAGMAR | | | | |
| | MT MT | B | 2 | |
| FRAZER GLENTANA | MT | A | 3 | |
| HINSDALE | MT | A | | |
| LARSLAN | MT | A | 3 | |
| OPHEIM | MT | A | 3 | |
| | | A | 3 | |
| PEERLESS | MT | В | 1 | |
| | | | | |
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| Name | LEGAL NAME OF OWNER OF CABL | E SYSTEM: | | | | | | | S | | EM ID |
|------------------------|---|-----------------|-----------|------------------------------|------------|---------------|--------|-------------|-----------------------|----------|------------|
| Name | NEMONT COMMUNICA | TIONS, INC | • | | | | | | | | 6354 |
| F | SECONDARY TRANSMISSION | N SERVICE: S | UBSCF | RIBERS AND I | RATES | | | | | | |
| E | In General: The information in | | | - | | - | | | | | |
| Secondary | system, that is, the retransmissi about other services (including | | | | | | | | | | |
| Transmission | last day of the accounting perior | • • | • | | | | SUDE | LIUSE EXIS | | | |
| Service: Sub- | Number of Subscribers: Bot | h blocks in spa | ace E ca | all for the num | per of sub | scribers to t | | - | | | |
| scribers and | down by categories of secondar | | | | | | | | | | |
| Rates | each category by counting the r separately for the particular service | | | | | | | | scharged | | |
| | Rate: Give the standard rate | charged for eac | ch cate | gory of service | . Include | both the am | ount | of the chai | - | | |
| | unit in which it is generally billed | | | | | dard rate va | riatio | ns within a | particular rate | | |
| | category, but do not include dis Block 1: In the left-hand block | | | | | econdarv tra | insmi | ssion serv | ice that cable | | |
| | systems most commonly provid | | | - | | | | | | | |
| | that applies to your system. No | | | - | | - | | | | | |
| | categories, that person or entity subscriber who pays extra for c | | | | | | • | | | | |
| | first set" and would be counted | | | | | | uncu | | | | |
| | Block 2: If your cable system | - | | - | | | | | | | |
| | printed in block 1 (for example, with the number of subscribers | | | | | • | | , | - | | |
| | sufficient. | | lo rigiti | | | | oonp | | | | |
| | BL | OCK 1 NO. OF | | | | | | BLOC | K 2 NO. OF | | |
| | CATEGORY OF SERVICE | SUBSCRIB | | RATE | CA | FEGORY OF | - SEF | RVICE | SUBSCRIBERS | F | RATE |
| | Residential: | | | | | | | | | | |
| | Service to first set | | 2,102 | \$ 29.00 | Preferr | | | | 1,987 | \$ | 50.0 |
| | Service to additional set(s) FM radio (if separate rate) | | | | Ultimat | e | | | 228 | \$ | 10.0 |
| | Motel, hotel | | 1 | \$ 1,050.00 | Hospit | alitv | | | 21 | \$ | 69.4 |
| | Commercial | | 108 | \$ 68.50 | MDU | | | | 3 | \$ | 258.0 |
| | Converter | | | | | | | | | | |
| | Residential | | | | | | | | | | |
| | Non-residential | | | | | | | | | | |
| | SERVICES OTHER THAN SEC | | | | ES | | | | | | |
| - | In General: Space F calls for ra | | | | - | all your cab | ole sy | stem's ser | vices that were | | |
| F | not covered in space E, that is, | | | | | | | | | | |
| Services | service for a single fee. There a furnished at cost or (2) services | | | | | | | | | | |
| Other Than | amount of the charge and the u | | | | | | | | | | |
| Secondary | enter only the letters "PP" in the | | | | | | | | | | |
| ransmissions: Rates | Block 1: Give the standard ra Block 2: List any services that | | | - | | | | | | | |
| Rates | listed in block 1 and for which a | | | | | - | - | | | | |
| | brief (two- or three-word) descri | ption and inclu | de the i | rate for each. | | | | | | | |
| | | BLO | CK 1 | | | | | | BLOCK 2 | | |
| | CATEGORY OF SERVICE | RATE | CATE | GORY OF SEF | RVICE | RATE | | CATEGO | RY OF SERVICE | F | RATE |
| | Continuing Services: | | | ation: Non-re | sidential | | | | | | |
| | Pay cable Pay cable—add'l channel | | | otel, hotel mmercial | | \$99 \$99 | | | ome DVR al Streams | \$ \$ | 5.0 4.0 |
| | • Fire protection | | - | y cable | | \$ 33 | .00 | Protectio | | ې \$ | 4.0 5.0 |
| | •Burglar protection | | | y cable-add'l c | hannel | | | | | * | 5.5 |
| | Installation: Residential | | | e protection | | | | Starz/En | core | \$ | 16.0 |
| | First set | \$ 99.00 | • Bu | rglar protection | ı | | | НВО | | \$ | 19.0 |
| | Additional set(s) | \$ 99.00 | | services: | | | | Cinemax | | \$ | 16.0 |
| | • FM radio (if separate rate) | | | connect | | \$ 25 | .00 | Showtim | ne/TMC | \$ | 16.0 |
| | • Converter | | | sconnect Itlet relocation | | \$ 25 | .00 | | | | |
| | | 1 | 1 ° O U | | | ψ ∠5 | .00 | | | | |
| | | | • Mc | ove to new add | ress | \$ 25 | 00 | | | | |

| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | ¢ |
|--|--|--|---|---|--|---|
| NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| PRIMARY TRANSMITT | ERS: TELEVISI | 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 o 5.61(e)(2) and sis, as explaine Stations: With | he accountin n June 24, 19 (4), or 76.63 (ad in the next respect to an | g period except 081, permitting t referring to 76.0 paragraph y distant station | (1) stations carri the carriage of ce 61(e)(2) and (4))] | ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a cable system on a substitute progran | G Primary Transmitters: Television |
| 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 as "WETA-simulcast). Column 2: Give th its community of licens on which your cable system carried the distant station of local serv Column 5: If you h cable system carried the distant stata For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the state the system carried the distant state for the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the distant state the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the Column | here in space only on a subs and also in spa- formation cond- rm. ch station's call associated with A-2". Simulcast e channel num se. For exampl- ystem carried t e neach case (entering the le cast), "E" (for n ese terms, see ation is outside ice area, see " ave entered "Y he distant statii icion on a part-ti sion of a distant t entered into o a primary trans simulcasts, also nee categories e location of ea Canadian statio | G—but do lis stitute basis ace I, if the st cerning subst sign. Do not h a station ac streams mus ber the FCC e, WRC is Ch he station whether the s etter "N" (for r oncommercia page (v) of the the local ser age (v) of the the local ser age (v) of the the local ser age (v) of the state of the the local ser age (v) of the local ser age (v) of | st it in space I (t ation was carrie itute basis static report originatic coording to its or t be reported in has assigned to has a set of tation is a netw network), "N-M" al educational), the general instruct accounting per ause of lack of eam that is not une 30, 2009, b hassociation repri- tyou carried the ty of the general for U.S. stations, ve the name of the | ed both on a subsons, see page (v) on program service ver-the-air design column 1 (list ea the television station, D.C. Thi ork station, D.C. Thi ork station, an ine (for network mult or "E-M" (for non- uctions located in the project on a located in the project column 5 iod. Indicate by e activated channe subject to a royal estimate a cable s esenting the prime channel on any linstructions locat , list the community with | Yes". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable syster I capacity ty payment because it is the subjec ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec | |
| | | CHANN | EL LINE-UP | ΔΔ | · · · · · · · · · · · · · · · · · · · | - |
| 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 | |
| KRTV-DT | 7 | N | Yes | 0 | Great Falls, MT | |
| KFBB-DT | 8 | N | Yes | 0 | Great Falls, MT | See instructions for |
| KUSM-DT | 9 | Е | Yes | 0 | Bozeman, MT | additional information |
| KBGF-DT | 50 | N | Yes | 0 | Great Falls, MT | on alphabetization. |
| KFBB2-DT | 8 | N | Yes | 0 | Great Falls, MT | |
| KXMD-DT | | N | No | . | Williston, ND | |
| KUMV-DT | 8 | N | No | | Williston, ND | |
| KBMY-DT | 8 17 | N | Yes | 0 | Bismarck, ND | |
| KXND-DT | 24 | N | Yes | 0 | Minot, ND | |
| KWSE-DT | 24 11 | E | No | Č. | Williston, ND | |
| KW3E-DT KNDM-DT | 26 | N N | Yes | 0 | Minot, ND | |
| KXMD-CW | 20 11.2 | N | No | | Williston, ND | |
| | | | | | | |
| KWSE-LL | 11 | E-M | No | | Williston, ND | m |
| KWSE-WORLD | 11 | E-M | No | | Williston, ND | |
| KWSE-MN | 11 | E-M | No | _ | Williston, ND | |
| KRTV-CW | 7 | N-M | Yes | 0 | Great Falls, MT | |
| | | | | | | n. |

| Network COMMUNICATIONS, INC. 63540 Native PRIMARY TRANSMITTERS TELEVISION In General: Inspace (a, lostif), every latevision station (including translator itations and low power latevision stations) carried by your cable system during the accounting period except(1) stations carried by your cable system during the accounting period except(1) stations carried by your cable system during the accounting of the space (b, lostif), every latevision is during the accounting of the space (b, lostif), every latevision is during the accounting of the space (b, lostif), every latevision is during the accounting of the space (b, lostif), every latevision is during the accounting of the space (b, lostif), and (2) an | LEGAL NAME OF OW | NER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|--|---|--|---|--|--|--|------------|
| 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 reflect on June 24, 1981, permitting the carriage of certain network programs (section represented the station represented the station representing the stations carried by your cable system on a substitute program basis, as explained in the next paragraph C Substitute Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph C No not list the station one any pasce (-)—but to any distant stations, see page (v) of the general instructions locater in the paper SA3 form. Do not list the station one associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station assigned to the television station for broadcasting over-the-air it to comunity of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station. Colum 4: (for network multicast), T ⁻¹ (for independent), T-M Channel indicate in each on-the station is a network station, an independent station, or an oncommerciz educational station on your busis de holocal service area, see page (v) of the general instructions located in the paper SA3 form. Colum 6: (for noncommercial educational multicast), T ⁻¹ (for independent station on a part-time basis because of lack of activated channel capacity For the ensamily of these terms, see page (v) of | NEMONT COM | IMUNICATIO | NS, INC. | | | 63540 | Name |
| Carried by your cable system during the accounting period except (1) stations carried only on a part-line basis under proceeding of the regulations in effect on June 24.1891, permitting the carried 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 Primary Transmitters: Transmitters: Transmitters: To levision 50 bot tilts the station here, and also in space (- but do list it in space I) (the Special Statement and Program Log)—if the station scarried by the station scarried only on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Colum 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify eact multicast stream such as the reported in column 1 (list each stream separately; for example (WETA-simulcast). Colum 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-ari in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Colum 3: I findicate in each set whether the station is a network station, an independent station, or a noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Colum 6: If the station soutide the local service area, (e. 'distart'), enter 'No'. For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form | PRIMARY TRANSMIT | TERS: TELEVISI | ON | | | | |
| 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. Television basis under specific FCC rules, regulations, or authorizations. Television > Do not list the station here; and also in space I, the space I (the Special Statement and Program Log)—if the station was carried both on a substitute basis and also on some othe 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 stream subcated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air it its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "1" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No", For an explanation of local service area, (i.e. "distant"), enter "Yes". If not, enter "No", For an explanation of local serice area, see page (v) of the general instructions loc | carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 | system during t ations in effect o 76.61(e)(2) and | the accountin n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | stations carrie he carriage of cer | ed only on a part-time basis under tain network programs [section: | Primary |
| 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream associated with a station according to its over-the-air designation. For example, report multicast stream services. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational multicast), "E" (for noncommercial educational multicast), "E" (for independent multicast), "E" (for independent multicast), "E" (for solumn 4, you must complete column 5, stating the basis on which you cable system carried the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if you cable system carried the distant station. Column 4, you must complete column 5, stating the basis, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: Gistant "This and that | | | | | s carried by your | cable system on a substitute progran | Television |
| 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. Identifi- each multicast stream associated with a station according to its over-the-air designation. For example, report multi- cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air if its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "-I-M (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, lee, "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a wr | Do not list the station station was carried | n here in space d only on a subs | G—but do lis stitute basis | st it in space I (tl | | | |
| each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three | basis. For further i in the paper SA3 f | information con- | cerning substi | itute basis statio | ons, see page (v) | of the general instructions located | |
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| educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the station is identified NEC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Net: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL SIGN 2. B'CAST CHANNEL 0F 4. DISTANT? 5. BASIS OF CHARNEL 6. LOCATION OF STATION | Column 2: Give the its community of licer | nse. For exampl | e, WRC is Ch | - | | - | |
| Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. NOTE: CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST CHANNEL 0. F 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION <td>educational station, b (for independent mult</td> <td>y entering the le ticast), "E" (for n</td> <td>etter "N" (for r ioncommercia</td> <td>network), "N-M" al educational), o</td> <td>(for network multi or "E-M" (for nonc</td> <td>cast), "I" (for independent), "I-M ommercial educational multicast)</td> <td></td> | educational station, b (for independent mult | y entering the le ticast), "E" (for n | etter "N" (for r ioncommercia | network), "N-M" al educational), o | (for network multi or "E-M" (for nonc | cast), "I" (for independent), "I-M ommercial educational multicast) | |
| cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable systercarried the distant station on a part-time basis because of lack of activated channel capacityFor the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjecof a written agreement entered into on or before June 30, 2009, between a cable system or an association representinthe cable system and a primary transmitter or an association representing the primary transmitter, enter the designato imary transmitter or an association representing the primary transmitter, enter the designato imary transmitter or an association representing the channel on any other basis, enter "0." For a furthecolspan="2">expanse the location of each station. For U.S. stations, list the community to which the station is licensed by theFor Mexican or Canadian stations, if any, give the name of the community with which the station is identifiedNote: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.CHANNEL LINE-UP AB1. CALL2. B'CAST3. TYPE4. DISTANT?5. BASIS OF CARRIAGE6. LOCATION OF STATION | Column 4: If the s | station is outside vice area, see p | e the local ser age (v) of the | rvice area, (i.e. " general instruc | distant"), enter "Y tions located in th | es". If not, enter "No". For an ex e paper SA3 form | |
| of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) 5. BASIS OF CHANNEL OF CARRIAGE | cable system carried carried the distant sta | the distant stati ation on a part-ti | on during the me basis bec | accounting peri ause of lack of | iod. Indicate by er activated channel | ntering "LAC" if your cable syster capacity | |
| explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AB 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) 5. BASIS OF CARRIAGE 6. LOCATION OF STATION | of a written agreemen the cable system and | nt entered into c l a primary trans | on or before Jo smitter or an a | une 30, 2009, b association repre | etween a cable sy esenting the prima | stem or an association representin ary transmitter, enter the designa | |
| CHANNEL LINE-UP AB 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | explanation of these the column 6: Give the | three categories ne location of ea | s, see page (v ach station. Fo | of the general or U.S. stations, | instructions locat list the communit | ed in the paper SA3 form ty to which the station is licensed by the | |
| SIGN CHANNEL OF (Yes or No) CARRIAGE | Note: If you are utiliz | ing multiple cha | • | • | • | n channel line-up. | |
| Image: section of the section of th | | CHANNEL | OF | (Yes or No) | CARRIAGE | 6. LOCATION OF STATION | |
| Image: Second | | | | | | | |
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| NEMONT CO | WNER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|--|---|--|--|--|--|--------------------------------------|
| | MMUNICATIO | NS, INC. | | | 63540 | Name |
| PRIMARY TRANSM | TTERS: TELEVISI | ON | | | | |
| carried by your cab FCC rules and regu | le system during f Ilations in effect o , 76.61(e)(2) and (| the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | stations carrie he carriage of cer | s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a | G Primary Transmitters: |
| | | | • | s carried by your | cable system on a substitute progran | Television |
| | | G-but do lis | | he Special Staten | nent and Program Log)—if the | |
| List the station he basis. For furthe in the paper SA3 | re, and also in spa r information cond 3 form. | ace I, if the sta cerning substi | itute basis statio | ons, see page (v) | itute basis and also on some othe of the general instructions located | |
| each multicast strea cast stream as "WE | am associated wit | h a station ac | cording to its ov | /er-the-air design | es such as HBO, ESPN, etc. Identif <u>,</u> ation. For example, report multi ch stream separately; for example | |
| | | | - | | tion for broadcasting over-the-air ir a may be different from the channe | |
| | ate in each case | whether the s | | | lependent station, or a noncommercia cast), "I" (for independent), "I-M | |
| For the meaning of | these terms, see | page (v) of th | ne general instru | ictions located in | commercial educational multicast) the paper SA3 form ′es". If not, enter "No". For an ex | |
| planation of local so Column 5: If yo | ervice area, see p u have entered "Y | age (v) of the ′es" in column | general instruc n 4, you must co | tions located in th mplete column 5, | | |
| carried the distant | station on a part-ti | me basis bec | ause of lack of | activated channel | | |
| of a written agreem | ent entered into o | n or before J | une 30, 2009, b | etween a cable sy | ystem or an association representin ary transmitter, enter the designa | |
| tion "E" (exempt). F | or simulcasts, als | o enter "E". If | you carried the | channel on any o | other basis, enter "O." For a furthe ed in the paper SA3 form | |
| Column 6: Give | the location of ea | ach station. Fo | or U.S. stations, | list the communi | ty to which the station is licensed by the | |
| FCC. For Mexican Note: If you are uti | | | | | th which the station is identifed | |
| | | 1, | | space G for each | n channel line-up. | _ |
| | | | EL LINE-UP | • | n channel line-up. | - |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | | 4. DISTANT? (Yes or No) | • | 6. LOCATION OF STATION | - |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | - |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
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| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |
| | CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | AC 5. BASIS OF CARRIAGE | | |

| NEMONT COMMUNICATIONS, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television static carried by your cable system during the accounting period except (1) stations carried only on a part-time basis un FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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 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 or basis. For further information concerning substitute basis stations, see page (v) of the general instructions local basis. | dei n: d on a rogran | Name G Primary Transmitters: Television |
|---|-------------------------------|---|
| In General: In space G, identify every television station (including translator stations and low power television static carried by your cable system during the accounting period except (1) stations carried only on a part-time basis un FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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 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 p 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 of the station here. | dei n: d on a rogran | Primary Transmitters: |
| carried by your cable system during the accounting period except (1) stations carried only on a part-time basis un FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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 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 p basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some of the station here. | dei n: d on a rogran | Primary Transmitters: |
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| 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 compared both. | 41 | |
| , | 41 | |
| in the paper SA3 form. | | |
| Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. lo | • | |
| each multicast stream associated with a station according to its over-the-air designation. For example, report mult cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exam WETA-simulcast). | | |
| Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the- its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the cha 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 noncom educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-N | N | |
| (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multica For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an educational for the station is outside the local service area, (i.e. "distant"), enter "Yes". | , | |
| planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system | | |
| carried the distant station on a part-time basis because of lack of activated channel capacity | .01 | |
| For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the su | | |
| of a written agreement entered into on or before June 30, 2009, between a cable system or an association repres the cable system and a primary transmitter or an association representing the primary transmitter, enter the desig | | |
| tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a fur | | |
| explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licens | ed by the | |
| FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified | - | |
| Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. | | |
| CHANNEL LINE-UP AD | | |
| 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE | | |
| NUMBER STATION (If Distant) | | |
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| LEGAL NAME OF C | | | | | SYSTEM ID# | Name |
|--|--|--|--|---|---|--|
| NEMONT CO | OMMUNICATIO | NS, INC. | | | 63540 | |
| RIMARY TRANSM | IITTERS: TELEVISI | ON | | | | |
| RIMARY TRANSM In General: In spa carried by your cat CC rules and reg (6.59(d)(2) and (4) substitute program Substitute program Substitute Bas vasis under specife Do not list the sta station was carr List the station he basis. For furthe in the paper SA Column 1: List each multicast stree ast stream as "WI VETA-simulcast). Column 2: Gives is community of lice on which your cable Column 3: Individuational station for independent m for independent m for the meaning of Column 4: If the blanation of local so Column 5: If you cable system carried the distant For the retransm | ITTERS: TELEVISION ITTERS: TELEVISION ITTERS: TELEVISION Interest of the system during the Interest of the system carried the Interest of | ON y television si the accounting n June 24, 19 (4), or 76.63 (ed in the next respect to an ations, or auth G—but do liss stitute basis ace I, if the st cerning substi sign. Do not th a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s page (v) of the ces" in column on during the me basis bec t multicast str | g period except 981, permitting ti (referring to 76.6 paragraph y distant station horizations: st it in space I (th ation was carrie itute basis static report originatio ccording to its ov it be reported in has assigned to hannel 4 in Wasl station is a networ he general instruc- vice area, (i.e. " a general instruc- a 4, you must co accounting peri- cause of lack of a general is to to accounting peri- cause of lack of a period except to the station period except to the station to the station is a networ to accounting peri- period except to the station to accounting peri- period except to the station to the station is a network to account the station of the station to account the station of the station to account the station of the station of the station of the station the station of the station of th | (1) stations carrie he carriage of cer 51(e)(2) and (4))]; s carried by your he Special Staten d both on a subst ons, see page (v) on program service ver-the-air design column 1 (list eac the television stat hington, D.C. This ork station, an ind (for network multi or "E-M" (for non- cictions located in distant"), enter "Y tions located in th implete column 5, iod. Indicate by er activated channel subject to a royali | Is and low power television stations) ad only on a part-time basis under tain network programs [section: and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi ch stream separately; for example titon for broadcasting over-the-air ir is may be different from the channe lependent station, or a noncommercia cast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form 'es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you intering "LAC" if your cable syster | G Primary Transmitters Television |
| ne cable system a on "E" (exempt). I | and a primary trans For simulcasts, als | smitter or an a o enter "E". If | association repre f you carried the | esenting the prima channel on any o | ary transmitter, enter the designa other basis, enter "O." For a furthe | |
| he cable system a ion "E" (exempt). I explanation of thes Column 6: Give FCC. For Mexican Note: If you are ut | and a primary trans For simulcasts, als se three categories e the location of ea | smitter or an a so enter "E". If s, see page (v ach station. Fo ons, if any, giv nnel line-ups, | association repre f you carried the /) of the general or U.S. stations, ve the name of t | esenting the prime channel on any of instructions locat list the communit the community with space G for each | ary transmitter, enter the designa other basis, enter "O." For a furthe red in the paper SA3 form ty to which the station is licensed by the th which the station is identifec | |
| ne cable system a on "E" (exempt). I xplanation of thes Column 6: Give 'CC. For Mexican lote: If you are ut | and a primary trans For simulcasts, als se three categories e the location of ea or Canadian static ilizing multiple cha | smitter or an a to enter "E". If s, see page (v ach station. Fo ons, if any, giv nnel line-ups, CHANN 3. TYPE | association repre- f you carried the r) of the general or U.S. stations, we the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No) | esenting the prime channel on any of instructions locat list the communit the community with space G for each AE 5. BASIS OF | ary transmitter, enter the designa other basis, enter "O." For a furthe red in the paper SA3 form ty to which the station is licensed by the th which the station is identifec h channel line-up. | |
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| LEGAL NAME OF OV | VNER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|--|---|--|---|---|---|--------------------------------------|
| NEMONT CO | MMUNICATIO | NS, INC. | | | 63540 | Name |
| PRIMARY TRANSMIT | TERS: TELEVISI | ON | | | | |
| carried by your cable FCC rules and regul | e system during t lations in effect o 76.61(e)(2) and (| the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t referring to 76.6 | stations carrie he carriage of cer | s and low power television stations) d only on a part-time basis under tain network programs [section: and (2) certain stations carried on a | G Primary Transmitters: |
| | | | - | s carried by your | cable system on a substitute progran | Television |
| basis under specifc Do not list the stati station was carried | on here in space | G-but do lis | | he Special Statem | nent and Program Log)—if the | |
| List the station her basis. For further in the paper SA3 | e, and also in spa information cond form. | ace I, if the sta cerning substi | itute basis static | ons, see page (v) | itute basis and also on some othe of the general instructions located | |
| each multicast strea | m associated wit | h a station ac | cording to its ov | /er-the-air designa | es such as HBO, ESPN, etc. Identifi ation. For example, report multi ch stream separately; for example | |
| WETA-simulcast). | | | | , | | |
| | ense. For example | e, WRC is Ch | - | | tion for broadcasting over-the-air ir may be different from the channe | |
| Column 3: Indica | ate in each case | whether the s | | | ependent station, or a noncommercia cast), "I" (for independent), "I-M | |
| · · | <i>,,</i> (| | <i>,,</i> | `` | ommercial educational multicast) | |
| For the meaning of t Column 4: If the | | | | | the paper SA3 form es". If not, enter "No". For an ex | |
| planation of local se | rvice area, see p | age (v) of the | general instruc | tions located in th | e paper SA3 form | |
| | | | | • | stating the basis on which you ntering "LAC" if your cable syster | |
| carried the distant s | tation on a part-ti | me basis bec | ause of lack of | activated channel | capacity | |
| | | | | | y payment because it is the subjec /stem or an association representin | |
| - | | | | | ary transmitter, enter the designa | |
| tion "E" (exempt). Fo | or simulcasts, als | o enter "E". If | you carried the | channel on any c | other basis, enter "O." For a furthe | |
| | | | | | ed in the paper SA3 form y to which the station is licensed by the | |
| | | | | | h which the station is identifed by the | |
| Note: If you are utili | zing multiple cha | | • | • | n channel line-up. | |
| 1. CALL | 2. B'CAST | 3. TYPE | 4. DISTANT? | 5. BASIS OF | 6. LOCATION OF STATION | |
| SIGN | CHANNEL | OF STATION | (Yes or No) | CARRIAGE (If Distant) | 0. LOCATION OF STATION | |
| | NOMBER | UTATION | | (ii Distant) | | |
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| LEGAL NAME OF C | OWNER OF CABLE SY | STEM: | | | 5 | YSTEM ID# | Nome |
|---|--|---|---|--|---|--|-------------------------------|
| NEMONT CO | OMMUNICATIO | NS, INC. | | | | 63540 | Name |
| PRIMARY TRANSM | ITTERS: TELEVISIO | ON | | | | | |
| carried by your cat FCC rules and reg | ble system during t ulations in effect of), 76.61(e)(2) and (| the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | stations carrie he carriage of cer | s and low power television sta d only on a part-time basis ur tain network programs [sectio and (2) certain stations carrie | ndei in: | G Primary Transmitters: |
| | | | • | s carried by your | cable system on a substitute | progran | Television |
| | | G-but do lis | | he Special Statem | ent and Program Log)—if the | | |
| List the station he | ere, and also in spa er information conc | ace I, if the sta | | | itute basis and also on some of the general instructions loc | | |
| each multicast stre | am associated wit | h a station ac | cording to its ov | /er-the-air designa | es such as HBO, ESPN, etc. I ation. For example, report mu ch stream separately; for exar | lti | |
| | | | - | | tion for broadcasting over-the may be different from the ch | | |
| on which your cabl | e system carried tl | he station | | C I | ependent station, or a noncor | | |
| (for independent m | ulticast), "E" (for n | oncommercia | al educational), | or "E-M" (for nonc | cast), "I" (for independent), "I- ommercial educational multic :he paper SA3 form | | |
| Column 4: If the planation of local s | e station is outside ervice area, see p | e the local ser age (v) of the | vice area, (i.e. " general instruc | distant"), enter "Y tions located in th | es". If not, enter "No". For an e paper SA3 form | | |
| cable system carrie | | on during the | accounting per | iod. Indicate by er | stating the basis on which yo tering "LAC" if your cable sys | | |
| | | | ause of lack of | | capacity | | |
| For the retransm | nission of a distant | t multicast str | | | y payment because it is the s vstem or an association repres | | |
| For the retransr of a written agreen the cable system a | nission of a distant nent entered into o Ind a primary trans | t multicast stro n or before Ju mitter or an a | une 30, 2009, b association repre | etween a cable sy esenting the prima | vstem or an association repre- ary transmitter, enter the desig | sentin gna | |
| For the retransr of a written agreen the cable system a tion "E" (exempt). I explanation of thes | nission of a distant nent entered into o nd a primary trans For simulcasts, als se three categories | t multicast stro on or before Ju omitter or an a o enter "E". If s, see page (v | une 30, 2009, b association repro f you carried the r) of the general | etween a cable sy esenting the prima channel on any c instructions locat | stem or an association repre- ary transmitter, enter the design ther basis, enter "O." For a fu ed in the paper SA3 form | sentin gna ırthe | |
| For the retransm of a written agreen the cable system a tion "E" (exempt). F explanation of thes Column 6: Give | nission of a distant nent entered into o and a primary trans For simulcasts, als the three categories the location of ea or Canadian static | t multicast stru n or before Ju mitter or an a o enter "E". If s, see page (v ach station. Fo ons, if any, giv | une 30, 2009, b association repre- you carried the or the general or U.S. stations, ve the name of t | etween a cable sy esenting the prima channel on any c instructions locat list the communit he community wit | rstem or an association repre- ary transmitter, enter the design ther basis, enter "O." For a fu- ed in the paper SA3 form y to which the station is licens h which the station is identifed | sentin gna irthe sed by th | |
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| For the retransm of a written agreen the cable system a tion "E" (exempt). F explanation of thes Column 6: Give FCC. For Mexican | nission of a distant nent entered into o and a primary trans For simulcasts, als the three categories the location of ea or Canadian static | t multicast stru on or before Ju smitter or an a o enter "E". If s, see page (v ach station. Fo ons, if any, giv nnel line-ups, | une 30, 2009, b association repre- i you carried the c) of the general or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No) | etween a cable sy esenting the prima channel on any c instructions locat list the communit the community wit space G for each AG 5. BASIS OF CARRIAGE | rstem or an association repre- ary transmitter, enter the design ther basis, enter "O." For a fu- ed in the paper SA3 form y to which the station is licens h which the station is identifed | sentin gna lirthe sed by thi c | |
| For the retransm of a written agreen the cable system a tion "E" (exempt). I explanation of thes Column 6: Give FCC. For Mexican Note: If you are uting 1. CALL | nission of a distant nent entered into o nd a primary trans For simulcasts, als se three categories e the location of ea or Canadian static ilizing multiple chai 2. B'CAST CHANNEL | t multicast stru n or before Ju mitter or an a o enter "E". If s, see page (v ach station. Fc ons, if any, giv nnel line-ups, CHANNI 3. TYPE OF | une 30, 2009, b association repre- i you carried the c) of the general or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No) | etween a cable sy esenting the prima channel on any c instructions locat list the communit the community wit space G for each AG 5. BASIS OF | stem or an association repre- ary transmitter, enter the design other basis, enter "O." For a fu- ed in the paper SA3 form y to which the station is licens h which the station is identifed h channel line-up. | sentin gna lirthe sed by thi c | |
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| LEGAL NAME OF OWN | IER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|--|--|---|--|---|--|--------------------------------------|
| NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| PRIMARY TRANSMITT | ERS: TELEVISI | ON | | | | |
| carried by your cable s FCC rules and regulat | system during t ions in effect o 5.61(e)(2) and t | the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | stations carrie he carriage of cer | s and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a | G Primary Transmitters: |
| | | | | s carried by your | cable system on a substitute progran | Television |
| station was carried | here in space only on a subs | G—but do lis stitute basis | st it in space I (tl | | nent and Program Log)—if the itute basis and also on some othe | |
| basis. For further in in the paper SA3 fo | nformation concorn | cerning substi | itute basis statio | ons, see page (v) | of the general instructions located | |
| each multicast stream | associated wit | h a station ac | cording to its ov | /er-the-air designa | ation. For example, report multi ch stream separately; for example | |
| Column 2: Give the | se. For exampl | e, WRC is Ch | - | | tion for broadcasting over-the-air ir s may be different from the channe | |
| Column 3: Indicate educational station, by | e in each case / entering the le | whether the s etter "N" (for n | network), "N-M" | (for network multi | ependent station, or a noncommercia cast), "I" (for independent), "I-M ommercial educational multicast) | |
| For the meaning of the | ese terms, see ation is outside | page (v) of th the local ser | ne general instru vice area, (i.e. " | ictions located in distant"), enter "Y | , fes". If not, enter "No". For an ex | |
| Column 5: If you h | ave entered "Y he distant stati | es" in column | 4, you must co accounting per | mplete column 5, iod. Indicate by er | stating the basis on which you ntering "LAC" if your cable syster | |
| For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For | sion of a distan t entered into o a primary trans simulcasts, als | t multicast str on or before Ju smitter or an a so enter "E". If | eam that is not une 30, 2009, b association repro | subject to a royal etween a cable sy esenting the prima channel on any c | y payment because it is the subjec stem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form | |
| | Canadian statio | ons, if any, giv nnel line-ups, | ve the name of t , use a separate | he community wit space G for each | ty to which the station is licensed by the h which the station is identifec h channel line-up. | |
| | | CHANN | EL LINE-UP | AH | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| LEGAL NAME OF O | | | | | SYSTEM ID# | |
|---|---|---|--|---|---|---|
| NEMONT CO | MMUNICATIO | NS, INC. | | | 63540 | Name |
| RIMARY TRANSMI | TTERS: TELEVISIO | ON | | | | |
| carried by your cable FCC rules and regu 76.59(d)(2) and (4), substitute program I Substitute Basi basis under specific Do not list the stat station was carrie List the station here basis. For further in the paper SA3 Column 1: List e each multicast streat ast stream as "WE WETA-simulcast). Column 2: Give ts community of lice on which your cable Column 3: Indic | e G, identify ever e system during t lations in effect of 76.61(e)(2) and (basis, as explained s Stations: With FCC rules, regula- ion here in space ed only on a subs- re, and also in spac- information cond- form. each station's call am associated wit TA-2". Simulcast the channel numi- ense. For example e system carried that ate in each case | y television st he accounting n June 24, 19 (4), or 76.63 (ed in the next respect to any ations, or auti G—but do lis titute basis ace I, if the sta cerning substi sign. Do not h a station ac streams mus ber the FCC H e, WRC is Ch he station whether the s | g period except 981, permitting t (referring to 76.6 paragraph y distant station horizations: st it in space I (th ation was carried itute basis static report originatic coording to its out t be reported in has assigned to hannel 4 in Was station is a netw | (1) stations carrie the carriage of cer 61(e)(2) and (4))]; as carried by your the Special Statem ed both on a subst ons, see page (v) on program service ver-the-air designa column 1 (list eac the television stat hington, D.C. This ork station, an ind | s and low power television stations) d only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program tent and Program Log)—if the itute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identifi- ation. For example, report multi the stream separately; for example tion for broadcasting over-the-air ir may be different from the channe ependent station, or a noncommercia | G Primary Transmitters: Television |
| for independent mu | ulticast), "E" (for n | oncommercia | al educational), | or "E-M" (for nonc | cast), "I" (for independent), "I-M ommercial educational multicast) he paper SA3 form | |
| Column 4: If the planation of local se Column 5: If you | station is outside ervice area, see pa a have entered "Y | the local ser age (v) of the es" in column | vice area, (i.e. ' general instruc 4, you must co | 'distant"), enter "Y ctions located in th omplete column 5, | es". If not, enter "No". For an ex e paper SA3 form stating the basis on which you | |
| cable system carrie carried the distant s | | | | | itering "LAC" if your cable syster capacity | |
| Ear the retransm | 1 | | eam that is not | subject to a rovalt | y payment because it is the subjec | |
| | | | | | etem or an accordition representin | |
| of a written agreem | ent entered into o | n or before Ju | une 30, 2009, b | etween a cable sy | rstem or an association representin ary transmitter, enter the designa | |
| of a written agreem the cable system ar tion "E" (exempt). F | ent entered into o nd a primary trans or simulcasts, als | n or before Ju mitter or an a o enter "E". If | une 30, 2009, b association repr you carried the | etween a cable sy esenting the prima e channel on any c | ary transmitter, enter the designa ther basis, enter "O." For a furthe | |
| of a written agreem the cable system ar tion "E" (exempt). F explanation of these | ent entered into o nd a primary trans or simulcasts, als e three categories | n or before Ju mitter or an a o enter "E". If , see page (v | une 30, 2009, b association repr f you carried the r) of the general | etween a cable sy esenting the prima channel on any c instructions locat | ary transmitter, enter the designa | |
| of a written agreem the cable system ar tion "E" (exempt). F explanation of these Column 6: Give FCC. For Mexican of | ent entered into o nd a primary trans or simulcasts, als e three categories the location of ea or Canadian static | n or before Ju mitter or an a o enter "E". If , see page (v och station. Fo ons, if any, giv | une 30, 2009, b association repre- you carried the or the general or U.S. stations, ve the name of t | etween a cable sy esenting the prima e channel on any c instructions locat list the communit the community wit | ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form y to which the station is licensed by the h which the station is identifec | |
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| of a written agreeme the cable system ar tion "E" (exempt). F explanation of these Column 6: Give FCC. For Mexican of Note: If you are utili | ent entered into o nd a primary trans or simulcasts, als e three categories the location of ea or Canadian static | n or before Ju mitter or an a o enter "E". If , see page (v ich station. Fo ons, if any, giv nnel line-ups, | une 30, 2009, b association repri- you carried the yof the general or U.S. stations, ye the name of the use a separate | etween a cable sy esenting the prima e channel on any c instructions locat list the communit the community wit e space G for each | ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form y to which the station is licensed by the h which the station is identifec | |
| of a written agreeme the cable system ar tion "E" (exempt). Fr explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilitien 1. CALL | ent entered into o ad a primary trans or simulcasts, als e three categories the location of ea or Canadian static izing multiple chai 2. B'CAST CHANNEL | n or before Ju mitter or an a o enter "E". If , see page (v ich station. Fo ons, if any, giv nnel line-ups, CHANN 3. TYPE OF | une 30, 2009, b association repri- you carried the or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? | etween a cable sy esenting the prima e channel on any c instructions locat list the communit the community wit e space G for each AI 5. BASIS OF CARRIAGE | ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form y to which the station is licensed by the h which the station is identifec o channel line-up. | |
| of a written agreem the cable system ar ion "E" (exempt). F explanation of these Column 6: Give FCC. For Mexican of Note: If you are util | ent entered into o ad a primary trans or simulcasts, als e three categories the location of ea or Canadian static izing multiple chai 2. B'CAST CHANNEL | n or before Ju mitter or an a o enter "E". If , see page (v ich station. Fo ons, if any, giv nnel line-ups, CHANN 3. TYPE OF | une 30, 2009, b association repri- you carried the or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? | etween a cable sy esenting the prima e channel on any c instructions locat list the communit the community wit e space G for each AI 5. BASIS OF CARRIAGE | ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form y to which the station is licensed by the h which the station is identifec o channel line-up. | |
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| of a written agreeme the cable system ar tion "E" (exempt). Fr explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilitien 1. CALL | ent entered into o ad a primary trans or simulcasts, als e three categories the location of ea or Canadian static izing multiple chai 2. B'CAST CHANNEL | n or before Ju mitter or an a o enter "E". If , see page (v ich station. Fo ons, if any, giv nnel line-ups, CHANN 3. TYPE OF | une 30, 2009, b association repri- you carried the or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? | etween a cable sy esenting the prima e channel on any c instructions locat list the communit the community wit e space G for each AI 5. BASIS OF CARRIAGE | ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form y to which the station is licensed by the h which the station is identifec o channel line-up. | |
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| LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|--|---|--|--|---|--|--------------------------------------|
| NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| PRIMARY TRANSMITT | ERS: TELEVISI | ON | | | | |
| carried by your cable s FCC rules and regulat | system during t ions in effect o 6.61(e)(2) and t | the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | (1) stations carrie he carriage of cer | s and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a | G Primary Transmitters: |
| | | | | s carried by your | cable system on a substitute progran | Television |
| station was carried | here in space only on a subs | G—but do lis stitute basis | st it in space I (tl | | nent and Program Log)—if the litute basis and also on some othe | |
| in the paper SA3 fo | orm. | Ū | | | of the general instructions located | |
| each multicast stream cast stream as "WETA | associated wit | h a station ac | cording to its ov | ver-the-air design | es such as HBO, ESPN, etc. Identif ation. For example, report multi ch stream separately; for example | |
| | | | - | | tion for broadcasting over-the-air ir s may be different from the channe | |
| | e in each case | whether the s | | | lependent station, or a noncommercia cast), "I" (for independent), "I-M | |
| (for independent multi For the meaning of the | cast), "E" (for n ese terms, see | oncommercia page (v) of th | al educational), ne general instru | or "E-M" (for nonc uctions located in | commercial educational multicast) the paper SA3 form | |
| planation of local serv | ice area, see p | age (v) of the | general instruc | tions located in th | ′es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you | |
| carried the distant stat | tion on a part-ti | me basis bec | ause of lack of | activated channel | | |
| of a written agreemen | t entered into o | on or before Ju | une 30, 2009, b | etween a cable sy | ty payment because it is the subjec ystem or an association representin ary transmitter, enter the designa | |
| tion "E" (exempt). For explanation of these the | simulcasts, als nree categories | o enter "E". If s, see page (v | you carried the) of the general | channel on any o instructions locat | other basis, enter "O." For a furthe ed in the paper SA3 form | |
| | Canadian statio | ons, if any, giv | ve the name of t | the community wit | ty to which the station is licensed by the th which the station is identifec | |
| | | | EL LINE-UP | • | n channer inte-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| NEMONT COMMUNICATIONS, INC. 63540 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 [section: 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 part television station and the programs [section: Primary | LEGAL NAME OF OWN | IER OF CABLE SY | STEM: | | | SYSTEM ID# | Nama |
|--|---|---|---|--|---|--|------------|
| 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 ffect on June 24, 1981, permitting the carriage of certain network programs [section: 16,59(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 raubstitute program basis under specific FCC rules, regulations, or authorizations: Primary Transmittere Target and 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: Primary Transmittere Target and the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifices at stream as with a station according to its over-the-air designation. For example, report multicast stream save acrifed the the station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast atterwards. Column 3: Indicate in eact ase whether the station is a network station, an independent from the channe and which your cable system carried the distant station action is a network station, and independent), "-M M (for network multicast), "To (for independent), "-M M (for network multicast), "To (for independent), "-M Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station on a part-time basis because of lack of activated channel capacity <th>NEMONT COM</th> <th>MUNICATIO</th> <th>NS, INC.</th> <th></th> <th></th> <th>63540</th> <th>Name</th> | NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under CC CC rules and regulations in effect on June 24. 1981, permitting the carriage of certain network programs [section: A CS s0(d)(2) and (4), 76.616(e)(2) and (4), or 76.63 (referring to 76.616(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Primary Transmitters 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 (-but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis stations locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identified each multicast stream associated with a station according to its over-the-air designation. For example, report multific cast stream associated with a station according to its over-the-air designation. For example, wreparately: for example Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, wrep (for network), "N-M" (for network, multicast), "T (for independent), "-M Kor independent multicast), "E' (for noncommercial educational stations carried the station or a noncommercial educational station, or a noncommercial educational station or a part-time basis because of lass of airstructions located in the paper SA3 form Column 4: If the station during the accounting period. Indica | PRIMARY TRANSMITT | ERS: TELEVISI | ON | | | | |
| basis under specif: 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 vas 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identificant stream associated with a station according to its over-the-air designation. For example, report multi cast stream as wETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational, or "E" (for noncommercial educational). (for independent multicast). "E" (for noncommercial educational). (for independent multicast). "E" (for noncommercial educational). (for independent multicast). "I.M. the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distart"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructio | carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 | system during t ions in effect o 5.61(e)(2) and t | the accountin n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | (1) stations carrie he carriage of cer | ed only on a part-time basis unde tain network programs [section: | |
| • Do not list the station here in space G—but do list it in space 1 (the Special Statement and Program Log)—If the station was carried only on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identificers and sweet and see the station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report 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 channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "I for independent), "I-M (for independent multicast), "E" (for noncommercial educational multicast), "Er (for noncommercial educational multicast), "I for the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity. For four the returnamistics on a subject or any other basis, enter "O." For an ex planation of local service area, see page (v) of | | | - | • | is carried by your | cable system on a substitute progran | Television |
| 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. Identifi- each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "for (for independent)," I-M (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station out profere June 30, 2009, between a cable system or anasociation representing the cable system and a primary transmitter or an association representing the primary transmitter or an association representing the station is identified to "Gewempt I.For simulcasts, also enter "E". If you carried the channel on any other | Do not list the station | here in space | G-but do lis | | he Special Staten | nent and Program Log)—if the | |
| each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network). "N-M" (for network multicast), "I" (for independent). "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station outring the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, neter "O." For a furthe explanation of t | basis. For further in | nformation cond | , | | | | |
| cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent, "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "I" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on or before June 30, 2009, between a cable system or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furth explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community the which the station is licensed by the FCC. For Mexican or Canadian stations. If any, give the name of the community to which the station i | | | - | | | - | |
| its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, netr "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give t | cast stream as "WETA WETA-simulcast). | A-2". Simulcast | streams mus | t be reported in | column 1 (list eac | ch stream separately; for example | |
| Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Chandian stations, if any, give the nam | its community of licen | se. For exampl | e, WRC is Ch | - | | - | |
| For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | educational station, by | / entering the le | etter "N" (for r | network), "N-M" | (for network multi | cast), "I" (for independent), "I-M | |
| Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | For the meaning of the | ese terms, see | page (v) of th | ne general instru | uctions located in | the paper SA3 form | |
| carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 0. F 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | Column 5: If you h | ave entered "Y | es" in columr | n 4, you must co | mplete column 5, | stating the basis on which you | |
| of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? SIGN 4. DECAST (Yes or No) 5. BASIS OF CHANNEL OF 4. DISTANT? | | | | | | | |
| the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL SIGN 2. B'CAST OF 4. DISTANT? S. BASIS OF CHANNEL OF 5. BASIS OF CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE | - | | | | | · · | |
| Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | · · / | | | | | | |
| Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| Image: Construction of the second | FCC. For Mexican or | Canadian statio | ons, if any, giv | ve the name of t | the community wit | th which the station is identifec | |
| 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | Note: If you are utilizin | ng multiple cha | • | • | | h channel line-up. | |
| SIGN CHANNEL OF (Yes or No) CARRIAGE | | | | | | | |
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| NEMONT CO | WNER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|--|---|--|--|---|--|-------------------------------|
| | | | | | 63540 | Name |
| PRIMARY TRANSMI | TTERS: TELEVISI | ON | | | | |
| carried by your cab FCC rules and regu | le system during f Ilations in effect o , 76.61(e)(2) and (| the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | (1) stations carrie he carriage of cer | s and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a | G Primary Transmitters: |
| | | | • | s carried by your | cable system on a substitute progran | Television |
| | | G-but do lis | | he Special Staten | nent and Program Log)—if the | |
| List the station he basis. For furthe in the paper SA3 | re, and also in spa r information cond 3 form. | ace I, if the sta cerning substi | itute basis statio | ons, see page (v) | titute basis and also on some othe of the general instructions located | |
| each multicast strea cast stream as "WE | am associated wit | h a station ac | cording to its ov | ver-the-air design | es such as HBO, ESPN, etc. Identif <u>,</u> ation. For example, report multi ch stream separately; for example | |
| | | | - | | tion for broadcasting over-the-air ir s may be different from the channe | |
| | ate in each case | whether the s | | | lependent station, or a noncommercia cast), "I" (for independent), "I-M | |
| (for independent m For the meaning of | ulticast), "E" (for n these terms, see | oncommercia page (v) of th | al educational), ne general instru | or "E-M" (for nonc actions located in | commercial educational multicast) the paper SA3 form | |
| planation of local se | ervice area, see p | age (v) of the | general instruc | tions located in th | ′es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you | |
| carried the distant s | station on a part-ti | me basis bec | ause of lack of | activated channel | | |
| | | | | | ty payment because it is the subjec ystem or an association representin | |
| , | | | • | . | ary transmitter, enter the designa other basis, enter "O." For a furthe | |
| | | | | | ed in the paper SA3 form ty to which the station is licensed by the | |
| FCC. For Mexican | or Canadian statio | ons, if any, giv | | | | |
| Note: Il you are util | | | una a concrete | | th which the station is identifed | |
| | | | • | e space G for eacl | th which the station is identifed h channel line-up. | - |
| 1 CALL | | CHANN | EL LINE-UP | e space G for each | h channel line-up. | - |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | | 4. DISTANT? (Yes or No) | e space G for eacl | | - |
| | 2. B'CAST CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | e space G for each AL 5. BASIS OF CARRIAGE | h channel line-up. | |
| | 2. B'CAST CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | e space G for each AL 5. BASIS OF CARRIAGE | h channel line-up. | |
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| | 2. B'CAST CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | e space G for each AL 5. BASIS OF CARRIAGE | h channel line-up. | |
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| | 2. B'CAST CHANNEL | CHANN 3. TYPE OF | 4. DISTANT? (Yes or No) | e space G for each AL 5. BASIS OF CARRIAGE | h channel line-up. | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# | | | | | | |
|--|--|---|---|---|---|---|
| NEMONT CO | MMUNICATIO | NS, INC. | | | 63540 | Name |
| | TERS: TELEVISI | ON | | | | |
| carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute program b Substitute program b Substitute Basis basis under specifc Do not list the stati station was carrie List the station her basis. For further in the paper SA3 Column 1: List e each multicast strea cast stream as "WE" WETA-simulcast). Column 2: Give ts community of lice on which your cable Column 3: Indica educational station, | e G, identify ever e system during f lations in effect o 76.61(e)(2) and of asis, as explaine s Stations: With FCC rules, regul- ion here in space ed only on a subs e, and also in spa- information cond form. ach station's call im associated with TA-2". Simulcast the channel num ense. For exampli- system carried t ate in each case by entering the le | y television sinthe accounting n June 24, 19 (4), or 76.63 (ed in the next respect to an ations, or auth G—but do liss stitute basis ace I, if the st cerning substi- sign. Do not th a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s etter "N" (for r | g period except 981, permitting t referring to 76.6 paragraph y distant station norizations: st it in space I (ti ation was carried itute basis static report originatic coording to its out t be reported in has assigned to nannel 4 in Was tation is a netw network), "N-M" | (1) stations carrie the carriage of cer 61(e)(2) and (4))]; as carried by your the Special Statem ed both on a subst ons, see page (v) on program service ver-the-air designa column 1 (list eac the television stat hington, D.C. This ork station, an ind (for network multi | s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program ment and Program Log)—if the itute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi est stream separately; for example tion for broadcasting over-the-air ir a may be different from the channe ependent station, or a noncommercia cast), "I" (for independent), "I-M ommercial educational multicast) | G Primary Transmitters: Television |
| Column 4: If the blanation of local se Column 5: If you cable system carried carried the distant si For the retransmi of a written agreeme he cable system an ion "E" (exempt). For explanation of these Column 6: Give | station is outside rvice area, see p have entered "Y d the distant stati tation on a part-ti ission of a distan ent entered into o d a primary trans or simulcasts, als three categories the location of ea | e the local ser age (v) of the 'es" in column on during the me basis bec t multicast str on or before Ju smitter or an a so enter "E". If s, see page (v ach station. Fo | vice area, (i.e. ' general instruct a 4, you must co accounting per ause of lack of eam that is not une 30, 2009, b association repri- you carried the c) of the general or U.S. stations, | 'distant"), enter "Y tions located in the proplete column 5, iod. Indicate by er activated channel subject to a royalt etween a cable sy esenting the prima channel on any c instructions locat , list the communit | stating the basis on which you ntering "LAC" if your cable syster capacity y payment because it is the subjec ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form y to which the station is licensed by the | |
| Note: If you are utili | | nnel line-ups, | use a separate | e space G for each | h which the station is identifec n channel line-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| Network COMMUNICATIONS, INC. CRANE PRMARY TRANSMITTER: TELEVISION In Genera: In gase G, Genthy every television station (including translator stations and low power television stations) carried by your cable system during the acounting period accept (1) stations carried only on a part-time basis under FCC Nets and regulations in effort on the 2, 1981, permitting the carriage of carried network programs (section TCS 59(10)) and (2), or 7855 stations carried by your cable system on a substitute program has basis and are peords FCC Nets, engulations, or authorizations: Certain access (programs (pector) in the forther program has basis and are peords FCC Nets, engulations, or authorizations: Television > Do not list the station here in space C = build obtain the sation carried by your cable system and a substitute basis stations, see page (v) of the general instructions located to basis. For further information concerning substitute basis stations, see page (v) of the general instructions located to basis. For further information concerning substitute basis stations, providences such as HSO (Section Station Carried Delt). The sation has the about the sation and the post station or a substitute basis station or concerning substitute basis stations are page (v) of the general instructions located in the base of the station or a substitute basis and also on a substitute basis and also on a substitute basis or the station or concerning substitute basis station or concerning substitute basis and also on a substitute basis and also on alsot bate table on a substitute bas | LEGAL NAME OF OW | NER OF CABLE SY | STEM: | | | SYSTEM ID# | Nama |
|---|---|--|--|--|---|--|------------|
| 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 on on a part-time basis under FCC rules and regulations in referst on June 24, 1981, permitting the carriage of certain network programs [section: 159(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 i substitute program basis, as explained in the next paragraph Primary Transmitters: Television Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under space G—but do list it in space (1) (by council basis carried only on a substitute basis Primary Transmitters: Television 10 on otil state station here, and also in space (1) the station was carried by our cable system on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 5: 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 size with the reported in column 1 (list each stream separately; for example with your cable system carried the station. Colum 3: If dicate in each case whether the station is a network station, an independent station, or a noncommercia educational withicast). T ⁻¹ (for network multicast), T ⁻¹ (for independent), T ⁻¹ M (for retwork), N-M" (for network multicast), T ⁻¹ (for independent), T ⁻¹ M (for independent station during the accounting), or E-M" (for on conmericial education and withicast) and call ne | NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| 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 carringe of cartain network programs [section; 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 pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Primary Transmitters: Television • 0. not list the station here, and also in space (1) the station was carried by our cable system on a substitute program station was carried only on a substitute basis • 1. List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi- each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Ide ach station is call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi- each multicast, include in each case whether the station is a network station, an independent station, or a noncommercize educational station, by entering the letter 'N' (for network), 'N-M' (for network multicast), 'T' (for independent multicast); for the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered 'Yes' in column 4, you must complete columns 5, stating the basis on which you cable system carried the distant station during the accounting the primary transmitter, enter the designation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered 'Yes' in co | PRIMARY TRANSMITT | ERS: TELEVISI | ON | | | | |
| 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 both on a substitute basis and also on some othe 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. Identifieach multicast stream ascidated with a station according to its over-the-air designation. For example, report multicast stream ascidated with a station according to its over-the-air designation. For example, report multicast stream ascidated with a station according to its over-the-air designation. For example, report multicast stream ascidated with a station according to its over-the-air designation. For example, report multicast stream ascidated with a station according to its over-the-air designation. For example, report multicast stream ascidate in the DC has assigned to the television station for broadcasting over-the-air if its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station. Column 2: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational autilicast). To (for independent multicast). The (for independent multicast). The (for independent multicast)) for the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. distant'), enter "Yee". If not, enter "No". For an explanation of local service area, (i.e. distant'), enter "Yees". If not, enter "No". For an explanation of local s | carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 | system during t tions in effect o 6.61(e)(2) and | the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | (1) stations carrie he carriage of cer | ed only on a part-time basis unde tain network programs [section: | Primary |
| 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream associated with a station according to its over-the-air designation. For example, WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational station, by entring the letter 'N'' (for network multicast). "If (for independent), "I-M (for independent multicast), "Er (for noncommercial educational instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the cloal service area, (i.e. "distant"), enter "Yes". If not, enter "No." For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station or perfore June 30, 2009, between a cable system or an association represen | | | | • | is carried by your | cable system on a substitute progran | Television |
| basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identified each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcasts, 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 channe 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 noncommercia educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) and licitast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, let, "distant"), enter "Yes". If out, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into o | Do not list the statio | n here in space | G-but do lis | | he Special Staten | nent and Program Log)—if the | |
| each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for not context), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network), enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station an apart-time basis because of | basis. For further i | nformation cond | , | | | | |
| cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 3: If you have entered "Yes" in column 4, you must complete column 6, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station or before June 30, 2009, between a cable system or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location or each station. For U.S. stations, list the community with which the station is identified by the FCC. For Mexican or Canadian station, you carided the channel on any other basis, enter "O. | | | - | | | - | |
| its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). | cast stream as "WET | | | • | • | • • • | |
| Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the station is identified explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the stat | its community of licen | se. For example | e, WRC is Ch | - | | - | |
| For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cate and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identified. Rote: If you are utillizing multiple channel line-ups, use a s | Column 3: Indicat educational station, b | e in each case y entering the le | whether the s etter "N" (for n | network), "N-M" | (for network multi | cast), "I" (for independent), "I-M | |
| Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa to "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AN 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | For the meaning of th | ese terms, see | page (v) of th | ne general instru | uctions located in | the paper SA3 form | |
| carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 0.F 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | Column 5: If you h | nave entered "Y | es" in column | n 4, you must co | mplete column 5, | stating the basis on which you | |
| of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AN 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF 6. LOCATION OF STATION (Yes or No) | | | | | | | |
| the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AN 1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? SIGN 6. LOCATION OF STATION CARRIAGE | | | | | | | |
| tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AN 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CARRIAGE | - | | | | | · · | |
| Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AN 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | tion "E" (exempt). For | simulcasts, als | o enter "E". If | you carried the | channel on any o | other basis, enter "O." For a furthe | |
| FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AN 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| I. CALL SIGN 2. B'CAST CHANNEL 3. TYPE OF 4. DISTANT? (Yes or No) 5. BASIS OF CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | Note: If you are utilizi | ng multiple cha | | • | | h channel line-up. | |
| SIGN CHANNEL OF (Yes or No) CARRIAGE | | | | | | | |
| | | - | - | | | 6. LOCATION OF STATION | |
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| Number Observe Observe <th< th=""><th>LEGAL NAME OF OWN</th><th>ER OF CABLE SY</th><th>STEM:</th><th></th><th></th><th>SYSTEM ID#</th><th>Nama</th></th<> | LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Nama |
|--|--|-------------------------------------|-------------------------------|--------------------------------------|---|---|------------|
| 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 refect on June 24 (1981, permitting the carriage of certain network programs (section) as usbittute program basis, as explained in the next paragraph Image: Content of the station here in the space G-but to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph Image: Content of the station here, and also in space (-1) the station was carried by on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Image: Content of the station here, and also in space (-1) the station was carried to in column 1 (list each stream separately; for example, WEC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station. Image: Content in the station is a network station, an independent station, or a noncommercize educational station, by entering the letter 'N' (for network multicast). 'T' (for independent), 'I-M (for independent multicast), 'E' (for noncommercial educational multicast), 'E' (for noncommercial educational multicast), 'E' (for noncommercial educational multicast). 'E' (for noncommercial education representing the statem the station on a part-time basis because of lack of activated channel capacity.'' For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered 'Yes' in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station on the pereformal statio | NEMONT COM | | NS, INC. | | | 63540 | Name |
| carried by your cable system during the accounting period except (1) stations carried only on a part-line basis under program basis under specific P(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)); and (2) certain stations carried on substitute program basis under specific PCC rules, regulations, or authorizations: Primary Transmitters: Television 0.0 not list the Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific PCC rules, regulations, or authorizations: Primary Transmitters: Television 0.0 not list the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater 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 subcast streams must be reported in column 1 (list each stream separately; for example wETA-simulcast). Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational multicast). The meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yees" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during period. This paynent because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system care asolation representin the cable system carried the distant station. | PRIMARY TRANSMITT | ERS: TELEVISIO | NC | | | | |
| Substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specif FCC rules, regulations, or authorizations: Teamstitutes: • On tot 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 stations, see page (v) of the general instructions locater in the paper SA3 form. Teamstitutes: • Outmont 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identificeach multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as wETA-2: Simulcast streams must be reported in column 1 (list each stream); or a noncommercie educational station, by entering the letter 'N' (for network multicast); "I (for independent); 'I-M (for independent multicast); 'I' (for i | carried by your cable s FCC rules and regulat | system during t ions in effect o | he accountin n June 24, 19 | g period except 981, permitting t | (1) stations carrie he carriage of cer | ed only on a part-time basis under tain network programs [section: | - |
| basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space 1 (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 othe 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 associated with a station according to its over-the-air designation. For example, WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational, or "E" (for noncommercial educational) multicast). Column 4: If the station is outside the local service area, (i.e. "distat"), enter "Yes". If not, enter "No", For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried into no a potrime basis becaus | substitute program bas | sis, as explaine | ed in the next | paragraph | | | • |
| - 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify, each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream associated with a station according to its over-the-air designation. For example, report multi acast stream as wUETA-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 i tis community of license. For example, MRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational station, by entring the letter 'N' (for network multicast), "1" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network multicast), "1" (tor independent), "I-M (for independent multicast), "E" (for on commercial educational), or "E-M" (for network multicast), "1" (tor independent), "I-M (for independent multicast), "E" (for network multicast), "1" (tor independent), "I-M (for independent multicast), "E" (for oncommercial educational station, by entering the letter 'N' (for network multicast), and the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable | | | | • | is carried by your | cable system on a substitute progran | Television |
| - List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identified act stream aswociated with a station according to its over-the-air designation. For example, report multi cast stream as WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity "Location terpersenting the externamismism of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: distant station on a part-time basis because of | Do not list the station | here in space | G-but do lis | | he Special Staten | nent and Program Log)—if the | |
| Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Chanel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network multicast). "If (for independent multicast)." Er (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system or an association representing the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form <td> List the station here, basis. For further in </td> <td>and also in spa formation cond</td> <td>ace I, if the st</td> <td></td> <td></td> <td></td> <td></td> | List the station here, basis. For further in | and also in spa formation cond | ace I, if the st | | | | |
| cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station as whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community of the self or a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Given the location of each station. For U.S. stations, list the community to which the station is placed to the column 5. To a furthe explanation of these three categories, see page (v) and support and support and support and support and support and support and suppo | Column 1: List eac | ch station's call | - | | | | |
| its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. 1. CALL SIGN 2. B'CAST CHANNEL 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6 | cast stream as "WETA WETA-simulcast). | -2". Simulcast | streams mus | t be reported in | column 1 (list eac | ch stream separately; for example | |
| educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO 1. CALL SIGN 2. B'CAST CHANNEL 1. OF 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION | its community of licens on which your cable sy | se. For example ystem carried t | e, WRC is Ch he station | nannel 4 in Was | hington, D.C. This | s may be different from the channe | |
| For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel lin | | | | | | | |
| Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO AO 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 6. LOCATION OF STATION SIGN 2. B'CAST OF 4. DISTANT? CARRIAGE 6. LOCATION OF STATION | N | <i>//</i> | | , · | · · | , | |
| Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifec Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. Image: CHANNEL LINE-UP AO 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | | | | | | | |
| cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is ilcensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 0. G. CARRIAGE 6. | | | | | | | |
| For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | cable system carried t | he distant stati | on during the | accounting per | iod. Indicate by er | ntering "LAC" if your cable syster | |
| of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF 4. DISTANT? 5. BASIS OF CARRIAGE | | | | | | | |
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| explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE | | | | • | • • | | |
| FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AO 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | • | | |
| SIGN CHANNEL OF (Yes or No) CARRIAGE | | | CHANN | EL LINE-UP | AO | | |
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| NEMONT COMMUNICATIONS, INC. 63540 PRIMARY TRANSMITTERS: TELEVISION no. no General: In space G, identify every television station (including translator stations carried only on a part-lime basis under Schold (A), 765 (16(2)) and (A), 765 (63(2)) and (A), 765 (63(2)) and (A), 765 (61(2)) and (A)); 76 (65 (16)) and (A)); and (C) certain stations carried on a substitute program basis, as explained in the next paragraph. G Substitute Basis Stations; With respect to any distant stations carried by your cable system on a substitute paragraph. Timasmitters: Television Substitute Basis Stations; With respect to any distant stations carried by your cable system on a substitute basis. Finamenitters: Television List the station here in space G —buit do list it in space I (the Special Statement and Program Log)—If th station was carried both on a substitute basis and also on some othe basis. Fort inther 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 for the community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station. The channel number the FCC has assigned to the television station for broadcasting over-the-air it for independent multicast). Column 1: Indicate in each case whether the station is a network multicast), T'' (for independent), "I-M for independent multicast), Te' (for network), "N-M' (for network multicast), T'' (for independent), "I-M for independent station is substitute basis because of lack | LEGAL NAME OF OWN | IER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|---|---|---|---|---|---|--|------------|
| An General: In space G, identify every television station (including translator stations and low power television stations) arried by your cable system during the accounting period except (1) stations carried only on a part-time basis under 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 yon a part-time basis stations: With respect to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph C Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis. See chose to do list it in space 1 (the Special Statement and Program Log)—if the station here, and also in space 1, if the station was carried only on a substitute basis. Financy Tamemitters: Talevision • Do not list the station is pape 1, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air i to somunity of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe number the FCC has assigned to the television station for noncommercial educational station, by entering the letter 'N' (or network station, an independent station representing the station for independent nutlicast). "C (for noncommercial educational station, by outside the local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered 'Yes' in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station on a pert-time | NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| parried by your cable system during the accounting period except (1) stations carried only on a part-line basis under regulations in effect on June 24. 1981, permitting the carriage of ordian network programs (section: 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. and explane to any distant stations carried by your cable system on a substitute program basis. Station space (– but do list it in space I) (the Special Statement and Program Log)—if 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 locater in the paper SA3 form. Colum 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify eact multicast stream sus to the reported in column 1 (list each stream separately; for example, teport multi ast streams will be station. Colum 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in the community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Colum 3: I indicate in eact oase whether the station is a network station, an independent station, or a noncommercia educational multicast). Tore in dispendent multicast). Colum 6: I the station outside the bodies service area, (e. "distart"), enter "No". For an ex obtained bino disterit withous outside the bodies service area, s | PRIMARY TRANSMITT | ERS: TELEVISI | ON | | | | |
| aais under specific FCC rules, regulations, or authorizations: Do not list the station here in space 0,—but do list it in space 1 (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space 1, if the station was carried both on a substitute basis and also on some othe 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. Identificanch multicast stream as "WETA-2". Simulcast stream subte 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 ir ts community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational station, by entering the letter 'N' (for network multicast). "If (ori independent), 'I-M for independent multicast), "E' (for noncommercial educational), or "E-M" (for noncommercial educational multicast) for for independent multicast)." For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 3: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system can association representing the primary transm | carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 | system during t ions in effect o 5.61(e)(2) and t | the accountin n June 24, 19 (4), or 76.63 (| g period except 981, permitting t referring to 76.6 | stations carrie he carriage of cer | ed only on a part-time basis under tain network programs [section: | Primary |
| 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi reast stream as "WETA-2". Simulcast streams and "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 it to community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia ducational station, by entering the letter "N" (for network multicast), "T (for independent), "I-M for independent multicast), "E" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station. The during the accounting period. Indicate by entering "LAC" if your | | | | | s carried by your | cable system on a substitute progran | Television |
| basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Colum 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi ast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Colum 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir ts community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Colum 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational or noncommercial educational station, by entering the letter enter (to retwork), "N-M" (for network multicast), "In out, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec 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 oran association representing the primary transmitter, enter the des | Do not list the station station was carried | here in space only on a subs | G—but do lis stitute basis | st it in space I (tl | | | |
| each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in ts community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) = or the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex solanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa to or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa to not before June 30, 200 | basis. For further in in the paper SA3 fo | nformation conc orm. | cerning substi | itute basis statio | ons, see page (v) | of the general instructions located | |
| Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in the channee on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex class system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin he cable system and a primary transmitter or an association representing the primary transmitter, enter the designa no "E". If you are utilizing multiple channel instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the cable system and a primary transmitter or an association representin the cable system or an association representin the e | each multicast stream cast stream as "WETA | associated wit | th a station ac | cording to its ov | /er-the-air designa | ation. For example, report multi | |
| Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the primary transmitter, enter the designa ion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the station is identified Column 6: Give the location of each station. For U.S. stations, list the community with which the station is identified Column 6: Give the location of each station. Sident is paper SA3 form <t< td=""><td>Column 2: Give the its community of license</td><td>se. For exampl</td><td>e, WRC is Ch</td><td>-</td><td></td><td>-</td><td></td></t<> | Column 2: Give the its community of license | se. For exampl | e, WRC is Ch | - | | - | |
| Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you bable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the explanation of these three categories, if any, give the name of the community with which the station is identified to be a separate space G for each channel line-up. CHANNEL LINE-UP AP 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 0. 0. CARRIAGE 6. LOCATION OF STATION <td>educational station, by (for independent multi</td> <td>/ entering the le cast), "E" (for n</td> <td>etter "N" (for r ioncommercia</td> <td>network), "N-M" al educational),</td> <td>(for network multi or "E-M" (for nonc</td> <td>cast), "I" (for independent), "I-M commercial educational multicast)</td> <td></td> | educational station, by (for independent multi | / entering the le cast), "E" (for n | etter "N" (for r ioncommercia | network), "N-M" al educational), | (for network multi or "E-M" (for nonc | cast), "I" (for independent), "I-M commercial educational multicast) | |
| cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa ion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community with which the station is licensed by the explanation or Canadian stations, if any, give the name of the community with which the station is dentifec Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AP 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | Column 4: If the st planation of local serv | ation is outside ice area, see p | e the local ser age (v) of the | vice area, (i.e. " general instruc | distant"), enter "Y tions located in th | ′es". If not, enter "No". For an ex le paper SA3 form | |
| of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AP 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F 4. DISTANT? CARRIAGE 6. LOCATION OF STATION | cable system carried t carried the distant stat | he distant stati tion on a part-ti | on during the me basis bec | accounting per ause of lack of | iod. Indicate by er activated channel | ntering "LAC" if your cable syster capacity | |
| Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. CC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AP 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | of a written agreemen the cable system and tion "E" (exempt). For | t entered into o a primary trans simulcasts, als | on or before J smitter or an a so enter "E". If | une 30, 2009, b association repre you carried the | etween a cable sy esenting the prima channel on any c | stem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe | |
| 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | Column 6: Give the FCC. For Mexican or (| e location of ea Canadian static | ach station. Fo | or U.S. stations, ve the name of t | list the communit | ty to which the station is licensed by the the which the station is identifec | |
| SIGN CHANNEL OF (Yes or No) CARRIAGE | | | CHANN | EL LINE-UP | AP | | |
| Image: second | 1. CALL SIGN | CHANNEL | OF | | CARRIAGE | 6. LOCATION OF STATION | |
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| Network COMMUNICATIONS, INC. Calibration PRIMARY TRANSMITTERS. TELEVISION In Generat: Inspace G, Clenthy very television station (including translator stations and low power television stations) carried by your cable system during the accounting parted except (1) stations carried only on a part-time basis under FCD. Use and regulators in effect on Jone 24, 1861, permitting the carring of carried by your cable system on a substitute program. Calibratic direction of the carried only on a part-time basis under FCD. These, regulators in effect on Jone 24, 1861, permitting the carring of carried by your cable system on a substitute program. Calibratic direction of the calibratic basis. Calibratic direction of the calibratic basis. Primary Television Do not lat the station here in space C -bud do lit it in space 1 (the Special Statement and Program Log).—If the station was carried only on a substitute basis stations. Since exceed the system on a substitute basis attains. Calibratic direction on comming a usatutue basis stations, per applicit (or grample, report multi cast stram associated with a station accounting to lis over-the-aid disgnation, can another the calibratic basis attains attain for transdating over-the air is to community of license. For example, WICE is Channel 4 in Washington, DC. This may be different from the channel multi-static disgnation for the station or an example. Column 1: Use the channel multi-static disgnation can be dissistem and the station accounting the calibratic diserse disting. Calibratic diserse disting discrete dis disting discrete disting discrete discrete disting disc | LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | Nama |
|--|---|---|--|--|--|---|------------|
| 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 refect on June 24, 1981, permitting the carriage of certain network program (section) as ubstitute program basis, as explained in the next paragraph Charnel Control Contrel Contrel Control Control Control Control Control Cont | NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| carried by your cable system during the accounting period except (1) stations carried only on a part-line basis under FCC rules and feet on June 24, 1981, permitting the carried only on a part-line basis under specifon: 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 Primary Transmitters: Totelevision stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Primary Transmitters: Totelevision stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Primary Transmitters: Totelevision station carried by your cable system on a substitute basis and also on some other station was on space I. 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 locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (List each stream separately; for example WETA-simulcast). Totum 2: Tota Column 2: Tota Column 2: Tota Column 2: Tota Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational multicast). Column 5: If the station is outside the local service area, see page (v) of the general instructions located in the paper SA3 form Column 6: If the station is outside the local service area, (i.e. "distarin", 14. (or insummiter, enter the designation of loc | PRIMARY TRANSMITT | ERS: TELEVISI | ON | | | | |
| basis under specif: FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space 1 (the Special Statement and Program Log)—if the station was carried only on a substitute basis • List the station here, and also in space 1, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identificeach stream as "WETA-2". Simulcast stream asciciated with a station according to its over-the-air designation. For example, report multicast stream asciciated with a station according to its over-the-air designation. For example, the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational, or "E-M" (for noncommercial educational multicast). Column 3: Indicate in each case whether the station is a network station, so and the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "No". For an explanation of local service area, (i.e. "distant"), enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if you | carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 | system during t ions in effect o δ.61(e)(2) and t | the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | stations carrie he carriage of cer | ed only on a part-time basis under tain network programs [section: | Primary |
| - 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identificant stream associated with a station according to its over-the-air designation. For example, report multi cast stream as wWETA-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 channe on which your cable system carried the station is a network station, an independent station, or a noncommercial educational station, by entring the letter '1%' (for network multicast), '1' (for independent), '1-M (for independent multicast), 'E'' (for noncommercial educational calced in the paper SA3 form Column 3: If the station is outside the local service area, (i.e. "distant"), enter 'Yes'. If not, enter 'No'. For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered 'Yes' in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station or a part-time basis because of lack of activated channel capacity For the transmission of a distant multicast, see page (v) of the general instructions located in the paper SA3 form Column 5: Given theread 'Yes' in column 1, sou carried the channel o | | | | • | s carried by your | cable system on a substitute progran | Television |
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| Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. 'distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is licensed by the FCC. For Mexican or | its community of licens | se. For example | e, WRC is Ch | - | | - | |
| For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is ilcensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE | Column 3: Indicate educational station, by | e in each case e entering the le | whether the s etter "N" (for n | network), "N-M" | (for network multi | cast), "I" (for independent), "I-M | |
| Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 3. TYPE 4. DISTANT? CARRIAGE 6. LOCATION OF STATION | For the meaning of the | ese terms, see | page (v) of th | ne general instru | ictions located in | , the paper SA3 form | |
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| For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 0.F 4. DISTANT? CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION | For the retransmiss | ion of a distan | t multicast str | eam that is not | subject to a royalt | y payment because it is the subjec | |
| tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION | - | | | | | - | |
| Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | • | U . | , | |
| FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | | | |
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| | OWNER OF CABLE SY | | | | SYSTEM ID# | Name |
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| NEMONT C | OMMUNICATIO | NS, INC. | | | 63540 | |
| RIMARY TRANSI | MITTERS: TELEVISI | NO | | | | |
| PRIMARY TRANSI In General: In sp. carried by your ca FCC rules and re- Concentration of the second caubstitute program Substitute program Substitute Ba pasis under speci Do not list the st station was ca List the station h basis. For furth in the paper S. Column 1: List each multicast str cast stream as "W VETA-simulcast str column 2: Given to which your cat Column 3: Ince ducational station for independent of column 4: If the basis system carri- column 5: If y cable system carri- cor the retranse | MITTERS: TELEVISION mace G, identify ever able system during to agulations in effect of 4), 76.61(e)(2) and m basis, as explaine asis Stations: With ifc FCC rules, regul- tation here in space with the formation control A3 form. ast each station's call ream associated with VETA-2". Simulcast ble system carried to dicate in each case on, by entering the le multicast), "E" (for m of these terms, see hes tation is outside service area, see p you have entered "Y ried the distant stati to station on a part-ti | DN y television si the accounting n June 24, 19 (4), or 76.63 (ed in the next respect to an ations, or autil G—but do lis stitute basis ace I, if the st cerning substi sign. Do not h a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s etter "N" (for r oncommercia page (v) of the the local ser age (v) of the ces" in column on during the me basis bec | g period except 981, permitting ti (referring to 76.6 paragraph y distant station horizations: st it in space I (th ration was carrie itute basis static report originatio ccording to its ov st be reported in has assigned to hannel 4 in Wasl station is a network), "N-M" al educational), "N-M" al educational), "in-general instru- rvice area, (i.e." e general instruct h 4, you must co accounting peri- cause of lack of a | (1) stations carrie he carriage of cer 51(e)(2) and (4))]; s carried by your he Special Staten d both on a subst ons, see page (v) on program service ver-the-air design column 1 (list eac the television stathington, D.C. This ork station, an indi- (for network multi or "E-M" (for nonc- ictions located in distant"), enter "Y tions located in thom plete column 5, iod. Indicate by er activated channel | Is and low power television stations) ad only on a part-time basis under tain network programs [section: and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi ch stream separately; for example titon for broadcasting over-the-air ir is may be different from the channe lependent station, or a noncommercia cast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form (es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you intering "LAC" if your cable syster | G Primary Transmitters Television |
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| NEMONT COMMUNICATIONS, INC. 63540 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Frimary 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify. each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example) | LEGAL NAME OF OWN | ER OF CABLE SY | STEM: | | | SYSTEM ID# | |
|---|---|---|--|--|--|---|------------|
| 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 reflect on June 24, 1981, permitting the carriage of certain network programs [section representing the part Stations]. Substitute Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph. CB Substitute Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph. CB On ont list the station here, and also in space (-) the do list it in space 1 (the Special Statement and Program Log)—if the station was carried only on a substitute basis stations: in space (-) the do list it in space 1 (the Special Statement and Program Log)—if the station here, and also in space (-) the the station is call sign. Do not report origination program services such as HBO, ESPN, etc. Identify. Identify also also accounting the station accounting to its over-the-air designation. For example, report multi cast stream associated with a station accounting to its over-the-air designation. For example, report multicast, ST (for independent station, you reable system carried the station. Colum 3: CB (CB we channel number the FCC has assigned to the television station for broadcasting over-the-air in tis community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which you cable system carried the distant station counce also explexes reported in column 1. (its each stream south set station a substitute basis and explexes the statin the counting peridol. Indicate in each active the station is on | NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
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| basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space 1 (the Special Statement and Program Log)—if the station was carried only on a substitute basis • List the station here, and also in space 1, if the station was carried both on a substitute basis and also on some othe 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. Identifice each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, the channel number the FCC has assigned to the television station for broadcasting over-the-air in tits community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station. Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in tits community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational multicast). "E" (for noncommercial educational, or "E-M" (for noncommercial educational multicast) for the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. 'distant'), enter "Yes". If not, enter "No". For an explan | carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 | system during t ions in effect o δ.61(e)(2) and t | the accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t (referring to 76.6 | stations carrie he carriage of cer | ed only on a part-time basis under tain network programs [section: | Primary |
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| 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 channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for noncommercial educational), or "E-M" (for noncommercial educational), the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form <td>each multicast stream</td> <td>associated wit</td> <td>h a station ac</td> <td>cording to its ov</td> <td>/er-the-air designa</td> <td>ation. For example, report multi</td> <td></td> | each multicast stream | associated wit | h a station ac | cording to its ov | /er-the-air designa | ation. For example, report multi | |
| its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furth explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community to which the station is identiffec Note: If you are utilizing multiple channel line-ups, use a | WETA-simulcast). | | Streams mus | t be reported in | column 1 (list cat | in stream separately, for example | |
| Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster Carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the explanatin diverses, also | its community of licens | se. For example | e, WRC is Ch | - | | - | |
| For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line- | Column 3: Indicate educational station, by | e in each case e entering the le | whether the s etter "N" (for n | network), "N-M" | (for network multi | cast), "I" (for independent), "I-M | |
| planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION | For the meaning of the | ese terms, see | page (v) of th | ne general instru | ictions located in | , the paper SA3 form | |
| carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 0. F 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | Column 5: If you h | ave entered "Y | es" in column | n 4, you must co | mplete column 5, | stating the basis on which you | |
| For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 2. B'CAST 0. F 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION | | | | | | | |
| the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) 5. BASIS OF CARRIAGE | For the retransmiss | ion of a distan | t multicast str | eam that is not | subject to a royalt | y payment because it is the subjec | |
| tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT? (Yes or No) 5. BASIS OF CARRIAGE | - | | | | | - | |
| Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | • | | | • | U . | , | |
| FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN 0F (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | | | | | |
| Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AS 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CHARRIAGE 6. LOCATION OF STATION | | | | | | | |
| 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN OF (Yes or No) CARRIAGE 6. LOCATION OF STATION | | | nnel line-ups, | , use a separate | space G for each | | |
| SIGN CHANNEL OF (Yes or No) CARRIAGE | | | | | | | |
| Image: Second | | CHANNEL | OF | (Yes or No) | CARRIAGE | 6. LOCATION OF STATION | |
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| LEGAL NAME OF OWN | NER OF CABLE SY | STEM: | | | SYSTEM ID# | Nama |
|---|-------------------|------------------|-------------------|--------------------------|---|--------------------------|
| NEMONT COM | MUNICATIO | NS, INC. | | | 63540 | Name |
| PRIMARY TRANSMITT | ERS: TELEVISIO | ON | | | | |
| carried by your cable | system during t | he accountin | g period except | (1) stations carrie | s and low power television stations) ed only on a part-time basis under tain network programs [section: | G |
| 76.59(d)(2) and (4), 7 substitute program ba | | . , | | 61(e)(2) and (4))]; | and (2) certain stations carried on a | Primary Transmitters: |
| Substitute Basis | Stations: With | respect to an | y distant station | s carried by your | cable system on a substitute progran | Television |
| basis under specifc FDo not list the station | | | | he Special Staten | nent and Program Log)—if the | |
| station was carried | • | | ation was carrie | d both on a subst | titute basis and also on some othe | |
| | nformation cond | | | | of the general instructions located | |
| | | - | | | es such as HBO, ESPN, etc. Identify ation. For example, report multi | |
| | | | 0 | • | ch stream separately; for example | |
| its community of licen | se. For example | e, WRC is Ch | - | | tion for broadcasting over-the-air ir s may be different from the channe | |
| on which your cable s Column 3: Indicate | | | station is a netw | ork station. an ind | lependent station, or a noncommercia | |
| educational station, by | y entering the le | etter "N" (for r | network), "N-M" | (for network multi | cast), "I" (for independent), "I-M | |
| For the meaning of th | <i>//</i> | | , · | · · | commercial educational multicast) the paper SA3 form | |
| Column 4: If the s planation of local serve | | | • | , | res". If not, enter "No". For an ex | |
| Column 5: If you h | nave entered "Y | es" in columr | n 4, you must co | mplete column 5, | stating the basis on which you | |
| cable system carried the distant sta | | | | | ntering "LAC" if your cable syster | |
| For the retransmis | sion of a distan | t multicast str | eam that is not | subject to a royal | ty payment because it is the subjec | |
| - | | | | | ystem or an association representin ary transmitter, enter the designa | |
| tion "E" (exempt). For | simulcasts, als | o enter "E". If | f you carried the | channel on any o | other basis, enter "O." For a furthe | |
| | | | | | ted in the paper SA3 form ty to which the station is licensed by the | |
| | | | | | th which the station is identifec | |
| Note: If you are utilizi | ng multiple cha | • | , use a separate | • | h channel line-up. | |
| 1. CALL | 2. B'CAST | 3. TYPE | 4. DISTANT? | 5. BASIS OF | 6. LOCATION OF STATION | |
| SIGN | CHANNEL | OF STATION | (Yes or No) | CARRIAGE (If Distant) | U. LOCATION OF STATION | |
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| LEGAL NAME OF OV | VNER OF CABLE SY | STEM: | | | SYSTEM ID# | Nama |
|--|--|---|---|--|--|--------------------------------------|
| NEMONT CO | MMUNICATIO | NS, INC. | | | 63540 | Name |
| PRIMARY TRANSMIT | TERS: TELEVISI | ON | | | | |
| carried by your cable FCC rules and regul | e system during t ations in effect o 76.61(e)(2) and | the accountin n June 24, 19 (4), or 76.63 (| g period except 981, permitting t referring to 76.6 | stations carrie he carriage of cer | s and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a | G Primary Transmitters: |
| | | - | - | s carried by your | cable system on a substitute progran | Television |
| basis under specifc Do not list the stati station was carried | on here in space | G-but do lis | | he Special Staten | nent and Program Log)—if the | |
| List the station her basis. For further in the paper SA3 | e, and also in spa information cond form. | ace I, if the st cerning substi | itute basis statio | ons, see page (v) | titute basis and also on some othe of the general instructions located | |
| each multicast strea | m associated wit | th a station ac | cording to its ov | /er-the-air design | es such as HBO, ESPN, etc. Identifi ation. For example, report multi ch stream separately; for example | |
| | | | - | | tion for broadcasting over-the-air ir | |
| its community of lice on which your cable | | | annel 4 in Was | hington, D.C. This | s may be different from the channe | |
| Column 3: Indica educational station, | ate in each case by entering the le | whether the s etter "N" (for r | network), "N-M" | (for network multi | lependent station, or a noncommercia cast), "I" (for independent), "I-M commercial educational multicast) | |
| For the meaning of t | hese terms, see | page (v) of th | e general instru | ictions located in | , | |
| planation of local se | rvice area, see p | age (v) of the | general instruc | tions located in th | e paper SA3 form | |
| | | | | • | , stating the basis on which you ntering "LAC" if your cable syster | |
| carried the distant s | tation on a part-ti | ime basis bec | ause of lack of | activated channel | capacity | |
| | | | | | ty payment because it is the subjec ystem or an association representin | |
| the cable system an | d a primary trans | smitter or an a | ssociation repre | esenting the prima | ary transmitter, enter the designa | |
| · · · / | | | | | other basis, enter "O." For a furthe red in the paper SA3 form | |
| | | | | | ty to which the station is licensed by the | |
| FCC. For Mexican on Note: If you are utili | | | | | th which the station is identifed | |
| | | • | EL LINE-UP | • | | |
| 1. CALL | 2. B'CAST | 3. TYPE | 4. DISTANT? | 5. BASIS OF | 6. LOCATION OF STATION | |
| SIGN | CHANNEL | OF | (Yes or No) | CARRIAGE | | |
| | NUMBER | STATION | | (If Distant) | | |
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| | F OWNER OF CABLE SY | | | | SYSTEM ID# | Name |
|--|---|--|---|--|--|--|
| NEMONT O | COMMUNICATIC | ONS, INC. | | | 63540 | |
| RIMARY TRANS | SMITTERS: TELEVISI | ON | | | | |
| RIMARY TRANS In General: In sp arried by your c CC rules and re 6.59(d)(2) and (ubstitute progra Substitute Ba rasis under speed Do not list the sp station was ca List the station basis. For furl in the paper S Column 1: Li- tach multicast st ast stream as "\ VETA-simuleast Column 2: G s community of in which your ca Column 3: In ducational statii for independent for independent for the meaning Column 5: If able system car arried the distar | SMITTERS: TELEVISI pace G, identify ever cable system during ' egulations in effect of (4), 76.61(e)(2) and am basis, as explaine iasis Stations : With cifc FCC rules, regul station here in space arried only on a subs here, and also in sp ther information con- SA3 form. ist each station's call tream associated wil WETA-2". Simulcast tilicense. For exampl able system carried t indicate in each case ion, by entering the li- t multicast), "E" (for r of these terms, see the station is outside al service area, see p you have entered "Y rried the distant stati nt station on a part-ti | ON y television s the accountin in June 24, 19 (4), or 76.63 (ed in the next respect to an ations, or autil e G—but do lis stitute basis ace I, if the st cerning subst l sign. Do not th a station ac streams mus ber the FCC e, WRC is Cr he station whether the s etter "N" (for r ioncommercia page (v) of the ces" in column on during the ime basis bec | g period except 981, permitting t (referring to 76.6 paragraph y distant station horizations: st it in space I (tl ation was carrie itute basis static report originatic coording to its ov st be reported in has assigned to hannel 4 in Wasi station is a netw network), "N-M" al educational), ne general instruc- vice area, (i.e. " e general instruc- n 4, you must co- accounting peri- cause of lack of | (1) stations carrie he carriage of cer 51(e)(2) and (4))]; is carried by your he Special Staten ed both on a subst ons, see page (v) on program service ver-the-air design column 1 (list eac the television stat hington, D.C. This ork station, an inc (for network multi or "E-M" (for nonc citions located in distant"), enter "Y tions located in the omplete column 5, iod. Indicate by er activated channel | as and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi ch stream separately; for example titon for broadcasting over-the-air ir s may be different from the channe dependent station, or a noncommercia iccast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form (es". If not, enter "No". For an ex he paper SA3 form , stating the basis on which you intering "LAC" if your cable syster I capacity | G Primary Transmitters Television |
| f a written agree ne cable system on "E" (exempt) | ement entered into c n and a primary trans). For simulcasts, als | on or before J smitter or an a so enter "E". If | une 30, 2009, b association repre f you carried the | etween a cable sy esenting the prima channel on any o | ty payment because it is the subjec ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe | |
| of a written agree the cable system ion "E" (exempt) explanation of th Column 6: G ECC. For Mexica lote: If you are | ement entered into c n and a primary trans). For simulcasts, als lese three categories live the location of ea | on or before J smitter or an a so enter "E". If s, see page (v ach station. Fo ons, if any, giv nnel line-ups. | une 30, 2009, b association repre f you carried the () of the general or U.S. stations, ve the name of t | etween a cable sy esenting the prime channel on any of instructions locat list the communit the community will space G for each | ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec | |
| f a written agree ne cable system on "E" (exempt) xplanation of th Column 6: G CC. For Mexica lote: If you are | ement entered into c n and a primary trans). For simulcasts, als nese three categories sive the location of ea an or Canadian statio utilizing multiple cha | on or before J smitter or an a so enter "E". If s, see page (v ach station. Fe ons, if any, giv nnel line-ups CHANN 3. TYPE | une 30, 2009, b association repri- f you carried the /) of the general or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No) | etween a cable sy esenting the prime channel on any of instructions locat list the communit the community with space G for each AV 5. BASIS OF | ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec h channel line-up. | |
| f a written agree e cable system on "E" (exempt) xplanation of th Column 6: G CC. For Mexica ote: If you are | ement entered into c n and a primary trans). For simulcasts, als nese three categories sive the location of ea an or Canadian statio utilizing multiple cha 2. B'CAST CHANNEL | on or before J smitter or an a so enter "E". If s, see page (v ach station. Fo ons, if any, giv nnel line-ups. CHANN 3. TYPE OF | une 30, 2009, b association repri- f you carried the /) of the general or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No) | etween a cable sy esenting the prime channel on any of instructions locat list the communit the community with space G for each AV 5. BASIS OF CARRIAGE | ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec h channel line-up. | |
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| NEMONT CO | OMMUNICATIO | NS, INC. | | | | 63540 | Name |
| PRIMARY TRANSM | IITTERS: TELEVISIO | ON | | | | | |
| carried by your cal FCC rules and reg 76.59(d)(2) and (4) | ble system during t ulations in effect o | he accounting n June 24, 19 (4), or 76.63 (| g period except 981, permitting t referring to 76.6 | stations carrie he carriage of cer | s and low power television statio d only on a part-time basis unde tain network programs [sections and (2) certain stations carried o | 91 | G Primary Transmitters: |
| | | | - | s carried by your | cable system on a substitute pro | gran | Television |
| Do not list the state | c FCC rules, regula ation here in space ried only on a subs | G-but do lis | | he Special Statem | nent and Program Log)—if the | | |
| List the station he | ere, and also in spa er information conc | ace I, if the sta | | | itute basis and also on some oth of the general instructions locate | | |
| each multicast stre | eam associated wit | h a station ac | cording to its ov | ver-the-air designation | es such as HBO, ESPN, etc. Ider ation. For example, report multi ch stream separately; for example | | |
| | | | - | | tion for broadcasting over-the-air | | |
| on which your cabl Column 3: Indi | le system carried tl cate in each case v | ne station whether the s | tation is a netw | ork station, an ind | ependent station, or a noncomm | | |
| (for independent m | nulticast), "E" (for n | oncommercia | al educational), | or "E-M" (for nonc | cast), "I" (for independent), "I-M ommercial educational multicast the paper SA3 form |) | |
| planation of local s | service area, see p | age (v) of the | general instruc | tions located in th | es". If not, enter "No". For an ex e paper SA3 form stating the basis on which you | | |
| , | ed the distant station | on during the | accounting per | iod. Indicate by er | ntering "LAC" if your cable syster | | |
| | | t multicast stre | eam that is not | subject to a royalt | y payment because it is the subj | | |
| - | | | | | stem or an association represen | | |
| the cable system a tion "E" (exempt). I | and a primary trans For simulcasts, als | mitter or an a o enter "E". If | ssociation repre- you carried the | esenting the prima channel on any c | ary transmitter, enter the designa other basis, enter "O." For a furth | 1 | |
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| Name | LEGAL NAME OF | | | | | | | SYSTEM ID# 63540 | |
|-----------------------------------|---|---|---|---|--|--|----------------------------------|--|--|
| Н | PRIMARY TRANSMITTERS: RADIO 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally | | | | | | | | |
| Primary Transmitters: Radio | receivable if (1 on the basis of For detailed inf located in the p Column 1: I Column 2: S Column 3: I |) it is carried b monitoring, to formation about paper SA3 forr dentify the cal State whether f the radio sta | by the system be recent ut the the m. I sign of the station tion's sign | each station carried. on is AM or FM. ynal was electronically proces k mark in the "S/D" column. | at the system's h system's FM an on this point, se | eadend, and tenna, during e page (vi) of | (2) it can certain the gen | n be expected, stated intervals. eral instructions | |
| | | | | ion (the community to which t the community with which th | | | CC or, i | n the case of | |
| | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | |
| | | 7 (10) 01 1 101 | 0,0 | | OT REL OTON | | 5,6 | | |
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| FORM SA3E. PAGE 5. ACCOUNTIN | G PERIOD: 2019/1 |
|---|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID NEMONT COMMUNICATIONS, INC. 6354 | Nama |
| SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. | Substitute |
| 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? | Carriage: Special Statement and Program Log |
| to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. | |
| stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. SUBSTITUTE PROGRAM WHEN SUBSTITUTE CARRIAGE OCCURRED FOR CARRIAGE FOR CARR | _ |
| stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. SUBSTITUTE PROGRAM WHEN SUBSTITUTE COCCURRED 7. REASON FOR | |

| | LEGAL NAME OF | OWNER OF CABLI | E SYSTEM: | | | | | | SYSTEM ID# | |
|------------------------------|--|---|---------------|--------------|------|---------------|--------|---------------|------------|--|
| Name | NEMONT CO | | TIONS, INC. | | | | | | 63540 | |
| J | In General: Th | ART-TIME CARRIAGE LOG a General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part- | | | | | | | | |
| Part-Time Carriage Log | hours your syst Column 1 (C column 5 of spa Column 2 (E curred during th • Give the mont "4/10." • State the start television statio "app." Example | ime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and nours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the elevision 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 | | | | | | | | |
| | | 1 | DAT | ES AND HOURS | OF F | PART-TIME CAF | RRIAGE | | | |
| | CALL SIGN | WHEN | I CARRIAGE OC | CURRED | | CALL SIGN | WHEN | I CARRIAGE OC | CURRED | |
| | ON LE CICIT | DATE | HC FROM | OURS TO | | of the origin | DATE | HC FROM | OURS TO | |
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| FORM | SA3E. PAGE 7. | | | | 1 |
|--|---|----------------------|-------------------------------------|------------------------|---|
| | AL NAME OF OWNER OF CABLE SYSTEM: | | | SYSTEM ID# 63540 | Namo |
| NE | MONT COMMUNICATIONS, INC. | | | 63540 | |
| Inst all a (as pag | DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's secondentifed in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts. | ondary | transmis e this arr \$ | sion service | K Gross Receipts |
| | | | (Amount C | il gross receipts) | |
| Instru Con Con If you fee If you account | (RIGHT ROYALTY FEE ctions : Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the ar from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable pa ompanying this form and attach the schedule to your statement of account. art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b | arts of t | he DSE | Schedule | L Copyright Royalty Fee |
| | k 3 below. | e enter | | | |
| | rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow. | entered | l on line | 2 in block | |
| ▶ If pa | rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below. | uld be | entered | on line | _ |
| Block 1 | MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. | e are re e is 1.0 | equired to 64 perce | o pay at ent of the | |
| | Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. | | \$ | 893,665.16 | |
| | This is your minimum fee. | \$ | | 9,508.60 | |
| Block 2 Block | DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. Did your cable system carry any distant television stations during the accounting peri Yes—Complete the DSE schedule. No—Leave block 3 below blank and content of the DSE schedule. 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 | nn 4, yo od? | ou must | check | - |
| 3 | | | | | |
| | 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 | \$ | | 12,164.92 | |
| 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 | | \$ | 12,164.92 | Cable systems |
| | Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero. | r | | 0.00 | submitting additional deposits under |
| | Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) | | | 0.00 | Section 111(d)(7) should contact the Licensing |
| | Line 4. FILING FEE | | \$ | 725.00 | additional fees. Division for the |
| | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here | \$ | | 12,889.92 | appropriate form for submitting the additional fees. |
| | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.) | See pa | ge (i) of | the | |

| ACCOUNTING PERIO | FORM SA | 3E. PAGE 8. |
|---|---|-------------------|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SY NEMONT COMMUNICATIONS, INC. | *STEM ID 63540 |
| M Channels | CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations | |
| N Individual to Be Contacted for Further Information | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) Name KRISTIN BEKKER Address PO BOX 600 (Number, street, rural route, apartment, or suite number) | |
| | SCOBEY, MT 59263 (City, town, state, zip) Email kristin.bekker@nemont.coop Fax (optional) 406-783-5283 | |
| O Certifcation | CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] | |
| | Image: Note of the image in the image i | 2" |
| form in order to proc numbers. By providi search reports prep | Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th cess your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephol ing 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 variation of 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 t fataments of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of lay | |

| FORM | SA3F | PAGE9 |
|------|------|-------|
| | | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | Name |
|--|-------------------------|---|
| NEMONT COMMUNICATIONS, INC. | 63540 | 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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the bas service of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 11 | sic le sub- | P Special Statement |
| For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in t paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmiss made by satellite carriers to satellite dish owners? | | Concerning Gross Receipts Exclusion |
| X NO | | |
| YES. Enter the total here and list the satellite carrier(s) below | | |
| Name Mailing Address Mailing Address | | |
| | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpay For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. | ment. | Q |
| Line 1 Enter the amount of late payment or underpayment | | Interest Assessment |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here | - days | |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | - | |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) | - | |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance p contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. | | |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. | | |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the or filing. | iginal | |
| 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 informatio | n (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 it may affect the legal suffciency of the fing, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical 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 account (page 3), a distant station is:

| • Independent: its type-value is | 1.00 |
|--|------|
| Network: its type-value is | 0.25 |
| Noncommercial educational: its type-value is | 0.25 |

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

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

Step 3: Multiply the result of step 1 by the result of step 2. This gives 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 particular 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 a 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, in 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, noncommercial 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 station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or 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 in 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.

DSE SCHEDULE. PAGE 11.

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.

 Identify the communities/areas represented by each subscriber group.
 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.

5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) 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

| | | Distant Stations Carried | | Identification | of Subscriber | Groups | | |
|------------------|---------------------------|---|--------------|------------------|---------------|-----------------|-----------------------------|--------------|
| In most cases | under current FCC | STATION | DSE | CITY | OUTSIDE LC | CAL | GRO | SS RECEIPTS |
| rules, all of F | airvale would be withir | A (independent) | 1.0 | | SERVICE AF | REA OF | FROM S | UBSCRIBERS |
| the local servic | e area of both stations | B (independent) | 1.0 | Santa Rosa | Stations A, B | , C, D ,E | | \$310,000.00 |
| A and C and al | I of Rapid City and Bo- | C (part-time) | 0.083 | Rapid City | Stations A an | ld C | | 100,000.00 |
| dega Bay wou | ld be within the local | D (part-time) | 0.139 | Bodega Bay | Stations A an | id C | | 70,000.00 |
| service areas of | of stations B, D, and E. | E (network) | 0.25 | Fairvale | Stations B, D | , and E | | 120,000.00 |
| | | TOTAL DSEs | 2.472 | | TOTAL GRO | SS RECEIPTS | | \$600,000.00 |
| | 1 | Minimum Fee Total Gross | Receipts | | \$600,000.00 | | | |
| Santa Rosa | Stations A and C | | • | | x .01064 | | | |
| | 35 mile zone | | | | \$6,384.00 | | | |
| | | First Subscriber Group | | Second Subso | riber Group | | Third Subscriber Group | |
| | ` ヽ _ ~` | (Santa Rosa) | | (Rapid City and | l Bodega Bay) | | (Fairvale) | |
| | Fairvale | | | | | | | |
| | | Gross receipts | \$310,000.00 | Gross receipts | | \$170,000.00 | Gross receipts | \$120,000.00 |
| Rapid City | | 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 |
| | Bodega | \$310,000 x .01064 x 1.0 = | 3,298.40 | \$170,000 x .010 | 64 x 1.0 = | 1,808.80 | \$120,000 x .01064 x 1.0 = | 1,276.80 |
| / + | Bay | \$310,000 x .00701 x 1.472 = | 3,198.80 | \$170,000 x .007 | 01 x .083 = | 98.91 | \$120,000 x .00701 x .389 = | 327.23 |
| / F | | Base rate fee | \$6,497.20 | Base rate fee | | \$1,907.71 | Base rate fee | \$1,604.03 |
| l an | ns B, D, d E e zone | Total Base Rate Fee: \$6,4 In this example, the cable s | | | - | 3, line 1 (page | 7) | |

ACCOUNTING PERIOD: 2019/1

DSE SCHEDULE. PAGE 11. (CONTINUED)

| 4 | LEGAL NAME OF OWNER OF CABLE | SYSTEM: | | | S | STEM ID |
|--------------------------------|--|--------------------------------------|-------------------------------------|--------------------|---------------------------|----------|
| 1 | NEMONT COMMUNICAT | IONS, INC. | | | | 6354 |
| | SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line | Y "O" STATION | | | 2.25 | |
| 2 | Instructions: In the column headed "Call S of space G (page 3). | Sign": list the ca | ll signs of all distant station | s identified by th | ne letter "O" in column 5 | |
| Computation of DSEs for | In the column headed "DSE" mercial educational station, giv | : for each indep e the DSE as ".2 | endent station, give the DS 25." | E as "1.0"; for e | each network or noncom- | |
| Category "O" | | | CATEGORY "O" STATIO | NS: DSEs | | |
| Stations | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
| | KRTV-DT | 0.250 | | | | |
| | KFBB-DT | 0.250 | | | | |
| | KUSM-DT | 0.250 | | | | |
| | KNDM-DT | 0.250 | | | | |
| Add rows as | KBGF-DT | 0.250 | | | | |
| Add rows as | KFBB2-DT | 0.250 | | | | |
| necessary. Remember to copy | KRTV-CW | 0.250 | | | | |
| all formula into new | KBMY-DT | 0.250 | | | | |
| rows. | KXND-DT | 0.250 | | | | |
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| | LEGAL NAME OF OWNER OF CABLE SYSTEM: | | | | | | SYSTEM ID# | |
|--|---|--|--------------------|---|---------------------------------|----------------|--------------------|--------|
| Name | NEMONT COMMUNICATIONS, INC. | | | | | | | 63540 |
| 3 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 on rounding, see page (viii) of the general instructions in the paper SA3 form. | | | | | | | |
| Capacity | | | | | | | | |
| | 1. CALL SIGN | 2. NUMBE OF HOL CARRIE SYSTEM | JRS C D BY S | IUMBER DF HOURS STATION DN AIR | 4. BASIS OF CARRIAG VALUE | 5. TYPE | 6. DSE | |
| | | | ÷ | | = | x | = | |
| | | | ÷ ÷ | | | x x | = | |
| | | | ÷ | = | | x | = | |
| | | | ÷ | | | x | = | |
| | | | ÷ ÷ | | | x x | = | |
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| | SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule, | | | | | | | |
| 4 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 | | | | | | | |
| | SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSE | | | | | | | |
| | 1. CALL | 2. NUMBER | 3. NUMBER | 4. DSE | 1. CALL | 2. NUMBER | | 4. DSE |
| | SIGN | OF PROGRAMS | OF DAYS IN YEAR | | SIGN | OF PROGRAMS | OF DAYS IN YEAR | |
| | | + | | = | | + | | |
| | | ÷ | | = | | ÷ | | |
| | | ÷ + | | = | | ÷ + | ····· | |
| | | ÷ | | = | | ÷ | | |
| | | ÷ | | = | | ÷ | = | |
| | SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule, | | | | | | | |
| 5 Total Number | TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system. 1. Number of DSEs from part 2 • | | | | | | | |
| of DSEs | | | | | | | | |
| | 3. Number of DSEs from part 4 • 0.00 | | | | | | | |
| | | | | | | | | |
| | TOTAL NUMBE | R OF DSEs | | | | | | 2.25 |

| LEGAL NAME OF OWN | | | | | | | S | YSTEM ID# | Name |
|--|--|--|--|--|---|--|-----------------------------------|------------|--|
| | | | | | | | | 63540 | |
| nstructions: Block A n block A: | | | | | | | | | 6 |
| o If your answer if "Ye schedule. | | | | of the DSE sched | lule blank and | complete part | 8, (page 16) of th | e | 0 |
| If your answer if "No | o," complete blo | | | FELEVISION M | ARKETS | | | | Computation of |
| s the cable system lo | | | | | | tion 76.5 of FC | CC rules and regul | lations in | 3.75 Fee |
| effect on June 24, 19 | | schedule—D | O NOT COMP | LETE THE REMAI | INDER OF PA | .RT 6 AND 7. | | | |
| No-Complet | e blocks B and | C below. | | | | | | | |
| | | BLOO | CK B: CARR | | MITTED DS | Es | | | |
| CALL SIGN ur in | nder FCC rules | and regulatio e DSE Scheo | ns prior to Jun lule. (Note: Th | part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.) | ther explanati | on of permittee | d stations, see the | - | |
| Column 2: Ei BASIS OF (N PERMITTED A CARRIAGE B C | nter the approprivation of the the FCC ru Stations carrie 76.61(b)(c)] Specialty statio Noncommerica | riate letter ind les and regula ed pursuant to on as defined al educationa | icating the bas ations cited be the FCC mar in 76.5(kk) (76 I station [76.59 | sis on which you ca low pertain to thos ket quota rules [76 6.59(d)(1), 76.61(e) 9(c), 76.61(d), 76.6 aph regarding sub | e in effect on 5.57, 76.59(b),)(1), 76.63(a) 3(a) referring | June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] | 6.63(a) referring to .61(e)(1) | 5 | |
| *F G | | ant to individu viously carried HF station wi | al waiver of F0 d on a part-tim thin grade-B c | e or substitute bas ontour, [76.59(d)(5 | • | | ring to 76.61(e)(5 |)] | |
| *() | | stations ider | ntified by the le | parts 2, 3, and 4 o etter "F" in column 2 | | | rksheet on page 1 | 14 of | |
| 1. CALL 2. SIGN | . PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | |
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| | | B | | MPUTATION OF | = 3 75 FFF | | | | |
| | 4-1 | | | | 0.10122 | | | | |
| ine 1: Enter the to | tal number of | DSES IIOM P | an 5 of this s | schedule | | | | | |
| ine 2: Enter the su | um of permittee | d DSEs from | i block B abo | ve | | | n | | |
| ine 3: Subtract line. (If zero, lea∖ | | | | of DSEs subject 7 of this schedule | | ate. | | | |
| ine 4: Enter gross. | receipts from | space K (pa | ge 7) | | | | x 0.03 | 375 | Do any of the DSEs represent |
| ine 5: Multiply line | 4 by 0.0375 a | and enter su | m here | | | | | | partially permited/ partially |
| _ine 6: Enter total r | number of DSE | Es from line | 3 | | | | x | | nonpermitted carriage? If yes, see part 9 instructions. |
| | | | | | | | | | |

DSE SCHEDULE. PAGE 13.

ACCOUNTING PERIOD: 2019/1

| LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# NEMONT COMMUNICATIONS, INC. 63540 | | | | | | | | | |
|---|--------------|---|---------------------------------------|-----------------------------|---|---------|--------------|--------|-------------|
| 1. CALL | 2. PERMITTED | | 1. CALL | SION MARKET 2. PERMITTED | | 1. CALL | 2. PERMITTED | 3. DSE | 6 |
| SIGN | BASIS | | SIGN | BASIS | | SIGN | BASIS | | Computation |
| | | | | | | | | | 3.75 Fee |
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| | - | | | | | DSE SCHEDULE. PAGE 14. | | | | | | |
|---|---|--|---|--|---|------------------------|--|--|--|--|--|--|
| Name | | | | | | SYSTEM ID# | | | | | | |
| | NEWIONT COW | MUNICATIONS, | INC. | | | 63540 | | | | | | |
| Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage | Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the 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. | | | | | | | | | | | |
| | | | | | ND SUBSTITUTE BASIS | | | | | | | |
| | 1. CALL | 2. PRIOR | 3. ACCOUNTING | 4. BASIS OF | 5. PRESENT | 6. PERMITTED | | | | | | |
| | SIGN | DSE | PERIOD | CARRIAGE | DSE | DSE | | | | | | |
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| 7 Computation of the | | "Yes," complete blog | cks B and C, below. | te part 8 of the DSE sche | dule. | | | | | | | |
| Syndicated | | | BLOCK A: MAJO | R TELEVISION MAR | KET | | | | | | | |
| Exclusivity | | | | | | | | | | | | |
| Surcharge | | | top 100 major television m | | 76.5 of FCC rules in effect | June 24, 1981? | | | | | | |
| | Yes—Complete | blocks B and C . | | X No—Proceed t | o part 8 | | | | | | | |
| | BLOCK B: C | arriage of VHF/Grad | e B Contour Stations | BLOCK C: Computation of Exempt DSEs | | | | | | | | |
| | Is any station listed ir commercial VHF stat or in part, over the ca | ion that places a gra | e primary stream of a de B contour, in whole | Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) | | | | | | | | |
| | | tation below with its ap and proceed to part 8. | propriate permitted DSE | | Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. | | | | | | | |
| | CALL SIGN | DSE C | ALL SIGN DSE | CALL SIGN | DSE CALL S | IGN DSE | | | | | | |
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| | | тс | TAL DSEs 0.0 | <u>)</u> | TOTAL I | DSEs 0.00 | | | | | | |
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| BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY Section 1 Enter the amount of gross receipts from space K (page 7) | SURCHARGE |
|--|-------------------------------------|
| | |
| | |
| Section 2 A. Enter the total DSEs from block B of part 7 | |
| B. Enter the total number of exempt DSEs from block C of part 7 | |
| 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. | Surcharge |
| Is any portion of the cable system within a top 50 television market as defined by the FCC? | |
| Yes—Complete section 3 below. X No—Co | Complete section 4 below. |
| SECTION 3: TOP 50 TELEVISION MARKET | |
| Section • Did your cable system retransmit the signals of any partially distant television stations during the a 3a X Yes—Complete part 9 of this schedule. No—Complete the applicable section | |
| If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. | blank. NOTE: If the DSE |
| A. Enter 0.00599 of gross receipts (the amount in section1) | |
| B. Enter 0.00377 of gross receipts (the amount in section.1) | |
| line C in section 2) and enter here | |
| E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | |
| Section 3b If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section | |
| 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 | · · · · · · · ▶ · · <mark>\$</mark> |
| 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 ac | ccounting period? |
| Section 4a X Yes—Complete part 9 of this schedule. No—Complete the applicable section | |
| If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1) | |
| B. Enter 0.00189 of gross receipts (the amount in section 1) | |
| C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here | |
| D. Multiply line B by line C and enter here | · · · · · · · · <u>\$</u> |
| 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 | |

ACCOUNTING PERIOD: 2019/1

| ACCOUNTING PERIOD: | - | | SCHEDULE. PAGE 16 | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|--|
| Name | | ME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 | | | | | | | |
| | | | | | | | | | | |
| 7 | Section 4b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. | | | | | | | | |
| Computation of the | | A. Enter 0.00300 of gross receipts (the amount in section 1) | | | | | | | | |
| Syndicated Exclusivity | | B. Enter 0.00189 of gross receipts (the amount in section 1) | | | | | | | | |
| Surcharge | | C. Multiply line B by 3.000 and enter here. | | | | | | | | |
| | | D. Enter 0.00089 of gross receipts (the amount in section 1) | | | | | | | | |
| | | section 2) and enter here. | | | | | | | | |
| | | F. Multiply line D by line E and enter here | | | | | | | | |
| | | G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) | | | | | | | | |
| | | Syndicated Exclusivity Surcharge | ······································ | | | | | | | |
| 8 Computation of Base Rate Fee | You mi 6 was o • In blo • If you • If you blank What i were lo | ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block to to to to to to to to to to | k B below | | | | | | | |
| · | | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS | | | | | | | | |
| | Did your cable system retransmit the signals of any partially distant television stations during the accounting period? | | | | | | | | | |
| | | Yes—Complete part 9 of this schedule. | | | | | | | | |
| | | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE | | | | | | | | |
| | Section 1 | Enter the amount of gross receipts from space K (page 7) 893 | 3,665.16 | | | | | | | |
| | Section 2 | Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) | 2.25 | | | | | | | |
| | Section 3 | If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A belo A. Enter 0.01064 of gross receipts | w. | | | | | | | |
| | | (the amount in section 1)▶ \$ B. Enter 0.00701 of gross receipts (the amount in section 1)▶ \$ 6,264.59 | 9,508.60 | | | | | | | |
| | | C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here | | | | | | | | |
| | | | | | | | | | | |
| | | | 7,830.74 | | | | | | | |

| LEGAL N | AME OF OWNER OF CABLE SYSTEM: SYSTEM ID# | |
|---------|--|----------------------------|
| NEMO | ONT COMMUNICATIONS, INC. 63540 | Name |
| Section | If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank. | |
| 4 | | 8 |
| | A. Enter 0.01064 of gross receipts (the amount in section 1) | Ū |
| | | |
| | B. Enter 0.00701 of gross receipts | Computation of |
| | (the amount in section 1) ► \$ | Base Rate Fee |
| | C. Multiply line B by 3.000 and enter here ▶\$ | |
| | D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$ | |
| | E. Subtract 4.000 from total DSEs | |
| | (the figure in section 2) and enter here | |
| | | |
| | F. Multiply line D by line E and enter here \$ | |
| | G. Add lines A, C, and F. This is your base rate fee | |
| | Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.00 | |
| | | |
| | TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- | |
| | Space G. | 9 |
| | eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude | Computation |
| | s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must: | of |
| | | Base Rate Fee and |
| | Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number o | Syndicated |
| DSEs a | and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. | Exclusivity Surcharge |
| | : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. | for |
| | If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. | Partially Distant |
| | er, if your cable system is wholly located outside all major television markets, complete block A only. | Stations, and |
| How to | Identify a Subscriber Group for Partially Distant Stations | for Partially Permitted |
| - | For each community served, determine the local service area of each wholly distant and each partially distant station you to that community. | Stations |
| | e for each wholly distant and each partially distant station you carried, determine which of your subscribers were located | |
| | the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.) | |
| - | Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each | |
| | ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide. | |
| - | iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups. | |
| | section: | |
| | fy the communities/areas represented by each subscriber group. | |
| subscri | he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group. | |
| • lf: | | |
| | system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or, | |
| , . | portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule. | |
| • | ne DSEs for each station. This gives you the total DSEs for the particular subscriber group. | |
| | late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions paper SA3 form. | |
| | ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding | |
| DSEs f | In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show stual calculations on the form. | |

| | LEGAL NAME OF OWNER OF CABLE SYSTEM: SY | STEM ID# |
|------|--|----------|
| Name | NEMONT COMMUNICATIONS, INC. | 63540 |
| | Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals | |
| | Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and | |
| | partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. | |
| | Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant | |
| | signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by | |
| | .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported | |
| | for each part 9 used in steps 1 and 2 must equal the amount reported in space K. | |
| | Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant | |
| | signals from step 1 that is subject to this surcharge. | |
| | Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from | |
| | a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate | • |
| | and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. | |
| | You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement | |
| | entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary | |
| | transmitter or an association representing the primary transmitter. | |
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| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
|--|--------------|-----------------|---------------------|--------------------------------|------------------|-----------------|--------------------|---------------|
| В | LOCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EAC | H SUBSCRI | BER GROUP | | |
| | FIRST | SUBSCRIBER GROU | Р | | • | | | |
| COMMUNITY/ AREA BISMARCK DMA | | | | COMMUNITY/ AREA | 9 Computation | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | SE CALL SIGN DSE CALL SIGN DSE | | | | |
| KUMV-DT | 0.25 | | | KBMY-DT | 0.25 | | | Base Rate Fee |
| KXMD-DT | 0.25 | | | KXND-DT | 0.25 | | | and |
| KXMD-CW | 0.25 | | | KNDM-DT | 0.25 | | | Syndicated |
| KBMY-DT | 0.25 | | | | | - | | Exclusivity |
| KXND-DT | 0.25 | | | | | | | Surcharge |
| KNDM-DT | 0.25 | | | | | | | for |
| KWSE-DT | 0.25 | | | | | | | Partially |
| | | | | | | | | Distant |
| | | | | | | - | | Stations |
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| | | | | | | | | |
| Total DSEs | <u> </u> | | 1.75 | Total DSEs | | | 0.75 | |
| | | | | | | | | |
| Gross Receipts First Gr | oup | \$ 428 | ,959.99 | Gross Receipts Seco | ond Group | \$ 1 | 99,144.17 | |
| Base Rate Fee First Gr | oup | \$ 6, | ,819.39 | Base Rate Fee Seco | ond Group | \$ | 1,589.17 | |
| | THIRD | SUBSCRIBER GROU | Р | | FOURTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | GREAT | FALLS DMA | | COMMUNITY/ AREA | A | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
| KRTV-DT | 0.25 | | | | | | | |
| KFBB-DT | 0.25 | | | | | | | |
| KBGF-DT | 0.25 | | | | | | | |
| KFBB2-DT | 0.25 | | | | | | | |
| KRTV-CW | 0.25 | | | | | _ | | |
| KUSM-DT | 0.25 | | | | | | | |
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| Total DSEs | | | 1.50 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Group \$ 265,561.00 | | ,561.00 | Gross Receipts Four | th Group | \$ | 0.00 | | |
| | | | | | | | | |
| Base Rate Fee Third G | roup | \$ 3 | ,756.36 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add th | | | ber group a | s shown in the boxes a | above. | | | |
| Enter here and in block | 3, line 1, s | pace L (page 7) | | | | \$ | 12,164.92 | |

| LEGAL NAME OF OWNER OF O | | | | | | S | YSTEM ID# 63540 | Name |
|---|--------|-----------------|--------------|--------------------------|---------|-----------------|--------------------|-------------------------|
| | | | | TE FEES FOR EACH | | | | |
| COMMUNITY/ AREA | IFTH S | SUBSCRIBER GROU | P 0 | COMMUNITY/ AREA | SIXTH | SUBSCRIBER GROU | IP 0 | 9 Computation |
| CALL SIGN DS | SE | 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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| | | | | | | | | |
| | | | 0.00 | | | | 0.00 | |
| Total DSEs | - | | 0.00 | Total DSEs | | | | |
| Gross Receipts First Group | | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| Base Rate Fee First Group | | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| - | ENTH S | SUBSCRIBER GROU | | | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN DS | SE | 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 Fourth | Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee Third Group | | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the bas Enter here and in block 3, line | | | iber group a | as shown in the boxes at | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SY | STEM ID# 63540 | Name |
|--|-----------------------------------|-----------------|-----------------------|--------------------------|---------|------------------|-------------------|---------------------------|
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP | | | | | | | | |
| | NINTH | SUBSCRIBER GROU | | | TENTH | 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 |
| | | | | | | | | Syndicated Exclusivity |
| | | | | | | | | Surcharge |
| | | | | | | | | for |
| | | | | | | | | Partially Distant |
| | | | | | | | | Stations |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | l Group | \$ | 0.00 | |
| Base Rate Fee First Gro | Base Rate Fee First Group \$ 0.00 | | | | l Group | \$ | 0.00 | |
| | EVENTH | SUBSCRIBER GROU | | | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| 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 | | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| | | | | | | | | |
| Base Rate Fee Third Group \$ 0.00 | | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block 3 | | | iber group a | as shown in the boxes ab | ove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SI | STEM ID# 63540 | Name |
|--|-----------------|-----------------|------------------|--------------------------|-------------|-----------------|-------------------|--------------------------|
| | | | | TE FEES FOR EACH | | | | |
| THIR COMMUNITY/ AREA | SUBSCRIBER GROU | RTEENTH | SUBSCRIBER GROUI | P 0 | 9 | | | |
| | | | | COMMUNITY/ AREA | Computation | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of Base Rate Fee |
| | | | | | | - | | and |
| | | | | | | - | | Syndicated |
| | | | | | | | | Exclusivity Surcharge |
| | | - | | | | | | for |
| | | | | | | | | Partially Distant |
| | | | | | | | | Stations |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | | | | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | l Group | \$ | 0.00 | |
| FIF | TEENTH | SUBSCRIBER GROU | IP | S | IXTEENTH | SUBSCRIBER GROU | P | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block (| | | iber group a | as shown in the boxes at | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | 5 | 63540 BYSTEM | Name |
|---|---------|-----------------|-------------|-------------------------|----------|------------------|--------------|----------------------|
| | | | | TE FEES FOR EAC | | | | |
| SEVEN COMMUNITY/ AREA | NTEENTH | SUBSCRIBER GROU | JP 0 | E COMMUNITY/ AREA | | I SUBSCRIBER GRO | UP 0 | 9 |
| COMMONITY AREA | | | U | COMMONT I/ AREA | | | V | 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 | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | |
| NI | NTEENTH | SUBSCRIBER GROU | | - | | | | |
| 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 Fourt | th Group | \$ | 0.00 | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourt | th 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 OWNER | | | | | | S | 63540 BYSTEM | Name |
|-----------------------------------|-----------|------------------------|--------------|-------------------------|-------------|-----------|--------------|----------------------|
| | | | | TE FEES FOR EACH | | | | |
| TWEN COMMUNITY/ AREA | TY-FIRST | SUBSCRIBER GROU | IP 0 | TWENT | JP 0 | 9 | | |
| | | | U | COMMONT I AREA | Computation | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee and |
| | | | | | | - | | Syndicated |
| | | | | | | | | Exclusivity |
| | | | | | | | | Surcharge for |
| | | - | | | | - | | Partially |
| | | | | | | | | Distant |
| | | | | | | | | Stations |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Secor | nd Group | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Secor | nd Group | \$ | 0.00 | |
| | Y-THIRD | SUBSCRIBER GROU | | TWENT | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | n Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | | 0.00 | Base Rate Fee Fourth | ו Group | \$ | 0.00 | |
| Base Rate Fee: Add the | base rate | e fees for each subser | iber group : | as shown in the boxes a | bove | | | |
| Enter here and in block | | | 9. oup (| | 21 | \$ | | |

| LEGAL NAME OF OWNE | | | | | | 5 | 63540 BYSTEM | Name |
|-------------------------|--------------|------------------|----------------|-----------------------|-----------|------------------|--------------|---------------------|
| | | | | TE FEES FOR EAC | | | | |
| TWEN COMMUNITY/ AREA | ITY-FIFTH | SUBSCRIBER GRO | UP 0 | TW COMMUNITY/ AREA | | I SUBSCRIBER GRO | UP 0 | 9 |
| | | | | | | | · | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of Base Rate Fee |
| | | | | | | | | and |
| | | | | | | | | Syndicated |
| | | | | | | | | Exclusivity |
| | | | | | | | | Surcharge for |
| | | | | | | | | Partially |
| | | | | | | | | Distant Stations |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| | SEVENTH | SUBSCRIBER GRO | | TWE | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | Group | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | |
| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add th | | | criber group a | as shown in the boxes | above. | | | |
| Enter here and in block | 3, line 1, s | space L (page 7) | | | | \$ | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
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| | | | | TE FEES FOR EACH | | | | |
| TWEN1 COMMUNITY/ AREA | ry-NINTH | SUBSCRIBER GROU | IP 0 | COMMUNITY/ AREA | THIRTIETH | I SUBSCRIBER GROU | IP 0 | 9 |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| THIR | TY-FIRST | SUBSCRIBER GROU | | THIRT | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block | | | iber group a | as shown in the boxes al | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SY | STEM ID# 63540 | Name |
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| | | | | TE FEES FOR EACH | SUBSCRI | BER GROUP | | |
| THIRT COMMUNITY/ AREA | Y-THIRD | SUBSCRIBER GROU | P 0 | THIRTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA | | | | 9 |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of | | |
| | 502 | | | | DSE | CALL SIGN | | Base Rate Fee |
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| Total DSEs | 11 | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second Group \$ 0.00 | | | | |
| Base Rate Fee First Gro | aud | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
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| COMMONIT I/ AREA | | | U | | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block 3 | | | iber group a | as shown in the boxes ab | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SI | STEM ID# 63540 | Name |
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| | | | | TE FEES FOR EACH | | | | |
| THIRTY-S COMMUNITY/ AREA | EVENTH | SUBSCRIBER GROU | P 0 | THIRT COMMUNITY/ AREA | Y-EIGHTH | SUBSCRIBER GROUP | 。 0 | 9 |
| | | | | | | | | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of Base Rate Fee |
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| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | l Group | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| | Y-NINTH | SUBSCRIBER GROU | Р | | | | | |
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| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Gross Receipts Third Group \$ 0.00 | | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add the Enter here and in block (| | | iber group a | as shown in the boxes ab | oove. | \$ | | |

| LEGAL NAME OF OWNE | | | | | | S | 63540 | Name |
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| | | | | TE FEES FOR EACH | | | | |
| FOF COMMUNITY/ AREA | RTY-FIRST | SUBSCRIBER GROU | JP 0 | FORT COMMUNITY/ AREA | JP 0 | 9 | | |
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| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Secor | nd Group | \$ | 0.00 | |
| Base Rate Fee First G | - | \$ | 0.00 | Base Rate Fee Secon | | \$ | 0.00 | |
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| Gross Receipts Third Group \$ 0.00 | | 0.00 | Gross Receipts Fourth | n Group | \$ | 0.00 | | |
| Dens Data Ex. This is | | | | | - 0- | | | |
| Base Rate Fee Third C | sroup | \$ | 0.00 | Base Rate Fee Fourt | n Group | \$ | 0.00 | |
| | | | riber group | as shown in the boxes a | above. | | | |
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| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
|--|----------|-----------------|-----------------------|--------------------------|---------|------------|--------------------|----------------------|
| | | | | TE FEES FOR EACH | | IBER GROUP | | |
| FOR COMMUNITY/ AREA | TY-FIFTH | SUBSCRIBER GROU | IP 0 | FOI COMMUNITY/ AREA | P 0 | 9 | | |
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| Gross Receipts Third Group \$ 0.00 | | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add th Enter here and in block | | | iber group a | as shown in the boxes al | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SY | STEM ID# 63540 | Name |
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| | | | | TE FEES FOR EACH | | | | |
| FORT COMMUNITY/ AREA | Y-NINTH | SUBSCRIBER GROU | P 0 | COMMUNITY/ AREA 0 | | | | 9 |
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| Total DSEs | | | 0.00 | Total DSEs | 11 | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second Group \$ 0.00 | | | | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | l Group | \$ | 0.00 | |
| FIF | TY-FIRST | SUBSCRIBER GROU | P | FIFTY | -SECOND | SUBSCRIBER GROUP | , | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add the Enter here and in block 3 | | | iber group a | as shown in the boxes ab | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name | |
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| | | | | TE FEES FOR EACH | | | | | |
| - | Y-THIRD | SUBSCRIBER GROU | | FIFT | | 9 | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts First Gro | oup | <u>\$</u> | 0.00 | Gross Receipts Secon | d Group | <u>\$</u> | 0.00 | | |
| Base Rate Fee First Gr | | \$ | 0.00 | Base Rate Fee Secon | | \$ | 0.00 | | |
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| Gross Receipts Third G | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee Third G | oup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee : Add the Enter here and in block | | | iber group a | as shown in the boxes al | oove. | \$ | | | |

| LEGAL NAME OF OWNER | | | | | | SI | YSTEM ID# 63540 | Name |
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| FIFTY-S COMMUNITY/ AREA | EVENTH | SUBSCRIBER GROU | IP 0 | FIFT COMMUNITY/ AREA | Y-EIGHTH | SUBSCRIBER GROUI | P 0 | 9 |
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| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | l Group | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | l Group | \$ | 0.00 | |
| | Y-NINTH | SUBSCRIBER GROU | | | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Group \$ 0.00 | | 0.00 | Gross Receipts Fourth | Group | <u>\$</u> | 0.00 | | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add the Enter here and in block (| | | iber group a | II as shown in the boxes at | oove. | \$ | | |

| LEGAL NAME OF OWNE | | | | | | S | 63540 BYSTEM | Name |
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| | | | | TE FEES FOR EACH | | | | |
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| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Secor | nd Group | \$ | 0.00 | |
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| Base Rate Fee First G | | \$ | 0.00 | Base Rate Fee Secor | | \$ | 0.00 | |
| | TY-THIRD | SUBSCRIBER GROU | | SIXT | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| | | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| | noup | ·* | 0.00 | | , Stoup | · <u>*</u> | | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | n Group | \$ | 0.00 | | |
| Base Rate Fee: Add th Enter here and in block | | | riber group a | as shown in the boxes a | above. | s | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
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| | | | | TE FEES FOR EACH | | | | |
| SIX COMMUNITY/ AREA | TY-FIFTH | SUBSCRIBER GROU | IP 0 | SI. COMMUNITY/ AREA | IP 0 | 9 | | |
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| 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 | |
| | SEVENTH | SUBSCRIBER GROU | | SIX | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| 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 | | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee Third Group \$ 0.0 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add th Enter here and in block | | | iber group a | as shown in the boxes al | oove. | \$ | | |

| LEGAL NAME OF OWNE | | | | | | S | YSTEM ID# 63540 | Name |
|--|-----------|-----------------|----------------------|------------------------|---------|---------------------------------|--------------------|----------------------|
| | | | | TE FEES FOR EACH | | IBER GROUP I SUBSCRIBER GROL | | |
| SIX COMMUNITY/ AREA | TY-NINTH | SUBSCRIBER GROU | JP 0 | SE COMMUNITY/ AREA | JP 0 | 9 | | |
| | | | | | | | • | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee and |
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| | | | | | | | | Exclusivity |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | roup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First Gr | roup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| | ITY-FIRST | SUBSCRIBER GROU | | SEVENT | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| 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 | iroup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add th Enter here and in block | | | riber group a | n shown in the boxes a | bove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SY | STEM ID# 63540 | Name |
|---|----------|-----------------|----------------------|--------------------------|---------|-----------|-------------------|---------------------------|
| BL | OCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCRI | BER GROUP | | |
| | Y-THIRD | SUBSCRIBER GROU | | SEVENTY | | 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 |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| SEVEN | ry-fifth | SUBSCRIBER GROU | Р | SEVEN | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add the Enter here and in block 3 | | | iber group a | as shown in the boxes ab | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
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| | | | | TE FEES FOR EACH | | | | |
| SEVENTY-S | SEVENTH | SUBSCRIBER GROU | IP 0 | SEVEN COMMUNITY/ AREA | IP 0 | 9 | | |
| | | | | | | | Ŭ | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee and |
| | | | | | | | | Syndicated |
| | | - | | | | | | Exclusivity |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First Gro | | \$ | 0.00 | Base Rate Fee Secon | | \$ | 0.00 | |
| | Y-NINTH | SUBSCRIBER GROU | | 11 | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| 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 | | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
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| Base Rate Fee Third G | oup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
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| Base Rate Fee: Add the Enter here and in block | | | iber group a | as shown in the boxes a | bove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | S | 63540 | Name | |
|--|----------|-----------------|-----------------------|-------------------------------------|-------------------|-----------|-------|-------------------|--|
| | | | | TE FEES FOR EACH | | | | | |
| | TY-FIRST | SUBSCRIBER GROU | IP 0 | EIGHT | | 9 | | | |
| COMMUNITY/ AREA | | | U | COMMUNITY/ AREA | COMMUNITY/ AREA 0 | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of | |
| | | | | | | | | Base Rate Fee | |
| | | | | | | | | and Syndicated | |
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| Total DSEs | | | 0.00 | Total DSEs 0.00 | | | 0.00 | | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second Group \$ 0.00 | | | 0.00 | | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | | |
| EIGHT | Y-THIRD | SUBSCRIBER GROU | IP | EIGHT | | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | | |
| 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 | Gross Receipts Fourth | Group | \$ | 0.00 | | | |
| | | <u>.</u> | | | · | · | | | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | | |
| | | | | | | | | | |
| Base Rate Fee: Add the Enter here and in block | | | iber group a | as shown in the boxes a | bove. | \$ | | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name | |
|---|----------|-----------------|----------------------|--------------------------|-------------------|-----------------|--------------------|----------------------|--|
| | | | | TE FEES FOR EACH | | | | | |
| | TY-FIFTH | SUBSCRIBER GROU | P 0 | 1 | HTY-SIXTH | SUBSCRIBER GROU | | 9 | |
| COMMUNITY/ AREA | | | | | COMMUNITY/ AREA 0 | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts First Group \$ 0.00 | | | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | | |
| | SEVENTH | SUBSCRIBER GROU | | 11 | Y-EIGHTH | SUBSCRIBER GROU | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA 0 | | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | | |
| Base Rate Fee: Add the Enter here and in block | | | iber group a | as shown in the boxes at | oove. | \$ | | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
|---|-----|-----------|----------------------|--------------------------|----------|-------------------------------|--------------------|-------------------|
| | | | | TE FEES FOR EACH | | IBER GROUP SUBSCRIBER GROU | | |
| COMMUNITY/ AREA 0 | | | | COMMUNITY/ AREA | 9 | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of |
| | | | | | | | | Base Rate Fee |
| | | | | | | | | and Syndicated |
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| Total DSEs | | | 0.00 | Total DSEs | <u> </u> | | 0.00 | |
| Gross Receipts First Group \$ 0.00 | | | 0.00 | Gross Receipts Second | | | | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | l Group | \$ | 0.00 | |
| NINETY-FIRST SUBSCRIBER GROUP | | | IP | NINETY | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add the Enter here and in block (| | | iber group a | as shown in the boxes at | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SY | STEM ID# 63540 | Name | |
|--|-----------------|-----------------|--------------|---------------------------|-----------|------------------|-------------------|---------------------------|--|
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP | | | | | | | | | |
| | Y-THIRD | SUBSCRIBER GROU | | NINETY COMMUNITY/ AREA | -FOURTH | SUBSCRIBER GROUP | | 9 | |
| COMMUNITY/ AREA | | | | | | | 0 | Computation | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of | |
| | | | | | | | | Base Rate Fee | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | | |
| NINE | TY-FIFTH | SUBSCRIBER GROU | Р | NINE | ETY-SIXTH | SUBSCRIBER GROUP |) | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA 0 | | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| | | | | | | | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add the | | | iber group a | as shown in the boxes ab | oove. | | | | |
| Enter here and in block | pace L (page 7) | | | | \$ | | | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
|--|----------|-----------------|-----------------------|----------------------------|---------|-----------------|--------------------|----------------------|
| | | | | TE FEES FOR EACH | | | | |
| NINETY-S | SEVENTH | SUBSCRIBER GROU | IP 0 | NINET COMMUNITY/ AREA | P 0 | 9 | | |
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| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee and |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| NINE | ry-ninth | SUBSCRIBER GROU | IP | ONE HU | NDREDTH | 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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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Group \$ 0.00 | | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add th Enter here and in block | | | iber group a | n as shown in the boxes al | oove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
|--------------------------|----------|------------------------|------------|------------------------------------|----------|-----------------|--------------------|-------------------------|
| BI | OCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCRI | BER GROUP | | |
| | ED FIRST | SUBSCRIBER GROU | | ONE HUNDRED | SECOND | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA 0 | | | | COMMUNITY/ AREA | | | 0 | 3 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| ONE HUNDRE | D THIRD | SUBSCRIBER GROU | Р | | D FOURTH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | U | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth Group | | \$ 0.00 | | |
| | - | | | | | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth Group \$ 0.00 | | | 0.00 | |
| Base Rate Fee: Add the | hase rat | e fees for each subscr | iber group | as shown in the hoves at | | | | |
| Enter here and in block | | | | | | \$ | | |

| BLOCK A: ONE HUNDRED FIFTH COMMUNITY/ AREA | COMPUTATION OF SUBSCRIBER GROU | | | | | | |
|--|-----------------------------------|--------------|--------------------------|----------|-----------------|-------------|----------------------|
| | SUBSCRIBER GROU | | TE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| | | P 0 | ONE HUNDF | JP 0 | 9 | | |
| | | | | U | Computation | | |
| CALL SIGN DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | Base Rate Fee and |
| | - | | | | | | Syndicated |
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| Total DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Group \$ 0.00 | | | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First Group | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| ONE HUNDRED SEVENTH | SUBSCRIBER GROU | | | D EIGHTH | SUBSCRIBER GROU | JP 0 | |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ AREA | | | | |
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| Total DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third Group | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Group \$ 0.00 | | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the base rate Enter here and in block 3, line 1, s | | iber group a | as shown in the boxes al | pove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | SI | STEM ID# 63540 | Name | | |
|--|---------|-----------------|-----------------|--------------------------------------|-------------|-----------|-------------------|---------------------|--|--|
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED NINTH SUBSCRIBER GROUP ONE HUNDRED TENTH SUBSCRIBER GROUP | | | | | | | | | | |
| ONE HUNDRE | D NINTH | SUBSCRIBER GROU | IP 0 | ONE HUNDRI COMMUNITY/ AREA | 9 | | | | | |
| | | | | | Computation | | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of Base Rate Fee | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | | |
| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | | | |
| Base Rate Fee First Group \$ 0.00 | | | 0.00 | Base Rate Fee Second Group \$ 0.00 | | | | | | |
| ONE HUNDRED EL | EVENTH | SUBSCRIBER GROU | IP | ONE HUNDRED TWELVTH SUBSCRIBER GROUP | | | | | | |
| COMMUNITY/ AREA 0 | | | | COMMUNITY/ AREA | | | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | | | |
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| Total DSEs 0.00 | | 0.00 | Total DSEs 0.00 | | | | | | | |
| 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 | | | | |
| Base Rate Fee: Add the Enter here and in block 3 | | | iber group a | u as shown in the boxes ab | oove. | \$ | | | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
|---|---------|-----------------|------------|-------------------------------------|----------|-----------------|--------------------|---------------------|
| BI | LOCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCRI | BER GROUP | | |
| ONE HUNDRED THIF | RTEENTH | SUBSCRIBER GROU | | ONE HUNDRED FOU | | 9 | | |
| COMMUNITY/ AREA 0 | | | | COMMUNITY/ AREA 0 | | | | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | - | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Group \$ 0.00 | | | 0.00 | Gross Receipts Second Group \$ 0.00 | | | | |
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| Base Rate Fee First Group \$ 0.00 | | | | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| | TEENTH | SUBSCRIBER GROU | | 11 | IXTEENTH | SUBSCRIBER GROU | | |
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| Total DSEs 0.00 | | | Total DSEs | | | 0.00 | | |
| Gross Receipts Third Group | | \$ 0.00 | | Gross Receipts Fourth Group | | <u>\$ 0.00</u> | | |
| Base Rate Fee Third Group | | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block | | | iber group | as shown in the boxes al | bove. | \$ | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
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| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
| ONE HUNDRED NIN | NTEENTH | SUBSCRIBER GROU | JP | ONE HUNDRED T | WENTIETH | SUBSCRIBER GROU | Р | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| 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 | | | riber group a | as shown in the boxes al | oove. | | | |
| Enter here and in block | ວ, line 1, s | pace L (page /) | | | | \$ | | |

| LEGAL NAME OF OWNER | | | | | | S | YSTEM ID# 63540 | Name |
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| BL | OCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCRI | BER GROUP | | |
| ONE HUNDRED TWEN | ITY-FIRST | SUBSCRIBER GROU | | ONE HUNDRED TWENT | Y-SECOND | SUBSCRIBER GROUP | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | J Computation |
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| Gross Receipts First Gro | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
| ONE HUNDRED TWEN | TY-THIRD | SUBSCRIBER GROUP | | ONE HUNDRED TWENT | Y-FOURTH | SUBSCRIBER GROUP | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Gross Receipts Third Gr | oup | <u>\$</u> | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Gr | oup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block 3 | | | iber group a | as shown in the boxes ab | oove. | \$ | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
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| Gross Receipts Third Gr | auo | s | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | | |
| | 1- | · | | | | | | | |
| Base Rate Fee Third Gr | oup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | | |
| Base Rate Fee: Add the Enter here and in block 3 | | | iber group a | as shown in the boxes ab | oove. | \$ | | | |
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| LEGAL NAME OF OWNER | | | | | | SI | (STEM ID# 63540 | Name |
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| COMMUNITY/ AREA 0 | | | | COMMUNITY/ AREA | | | 0 | Computation |
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| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
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| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
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| Bross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 |
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| E | LOCK A: | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | SUBSCR | IBER GROUP | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | roup | \$ 428 | ,959.99 | Gross Receipts Secor | nd Group | \$ 1 | 99,144.17 | |
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| Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ | | | | | 0.00 | | | |
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| COMMUNITY/ AREA | GREAT | FALLS DMA | | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | Group | \$ 265 | ,561.00 | Gross Receipts Fourth | n Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee Third G | Group | \$ | 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 a | bove. | \$ | 0.00 | |

ACCOUNTING PERIOD: 2019/1

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Nonpermitted 3.75 Stations

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| | | SUBSCRIBER GRO | | | | SUBSCRIBER GROU | | 9 |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | |
| | SEVENTH | SUBSCRIBER GRO | UP | | EIGHTH | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in bloc | | | criber group | II as shown in the boxes a | above. | \$ | | |

ACCOUNTING PERIOD: 2019/1

| LEGAL NAME OF OWNER | | | | | | S | 63540 BYSTEM | Name |
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| B | LOCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCR | IBER GROUP | | |
| | NINTH | SUBSCRIBER GROU | JP | | TENTH | SUBSCRIBER GROU | JP | • |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
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| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | d Group | \$ | 0.00 | |
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| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | d Group | \$ | 0.00 | |
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| 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 | bove. | \$ | | |

| | ABLE SYSTEM: TIONS, INC. | | | | | SYSTEM ID# 63540 | Name |
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| | A: COMPUTATION | | 11 | | | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| Bross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| FIFTEE | TH SUBSCRIBER GR | OUP | | SIXTEENTH | I SUBSCRIBER GRO | UP | |
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| SECOND SUBSCRIBER GROUP | EMONT COMMUNICATIONS, INC. |
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| NEMONT COMMUNICAT | BLE SYSTEM: IONS, INC. | | | | | SYSTEM ID# 63540 |
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| SIXTY-FIF | TH SUBSCRIBER GRO | DUP 0 | COMMUNITY/ AREA | | I SUBSCRIBER GRO | UP 0 |
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| al DSEs | | 0.00 | Total DSEs | | | 0.00 |
| oss Receipts First Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 |
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| se Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 |
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| SIXTY-SEVEN | \$ | DUP | SIX | KTY-EIGHTH | \$ | UP |
| SIXTY-SEVEN | | | | KTY-EIGHTH | | |
| SIXTY-SEVEN //MUNITY/ AREA | | DUP | SIX | KTY-EIGHTH | | UP |
| SIXTY-SEVEN IMUNITY/ AREA | TH SUBSCRIBER GRC | DUP 0 | SI) COMMUNITY/ AREA | KTY-EIGHTH | I SUBSCRIBER GRO | 0 0 |
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| SIXTY-SEVEN | TH SUBSCRIBER GRC | DUP 0 | SI) COMMUNITY/ AREA | KTY-EIGHTH | I SUBSCRIBER GRO | 0 0 |
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| EGAL NAME OF OWNER OF CA | | | | | | 63540 BYSTEM ID# | Nam |
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| | A: COMPUTATION | | m | | | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| ross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
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| | | | | | | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| | \$ | | | | SUBSCRIBER GRO | | |
| SEVENTY-FIR | • | | | TY-SECONE | | | |
| SEVENTY-FIR | ST SUBSCRIBER GR | OUP | SEVEN | TY-SECONE | | UP | |
| SEVENTY-FIR | ST SUBSCRIBER GR | OUP 0 | SEVEN COMMUNITY/ AREA | TY-SECONE |) SUBSCRIBER GRO | UP 0 | |
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| SEVENTY-FIR | ST SUBSCRIBER GR | OUP 0 | SEVEN COMMUNITY/ AREA | TY-SECONE |) SUBSCRIBER GRO | UP 0 | |
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| SEVENTY-FIR CALL SIGN DSE | ST SUBSCRIBER GR | OUP 0 DSE 0 | COMMUNITY/ AREA | | D SUBSCRIBER GRO | UP 0 DSE | |

| Name | YSTEM ID# 63540 | S | | | | | | LEGAL NAME OF OWNER |
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| | 0.00 | \$ | d Group | Base Rate Fee Second | 0.00 | \$ | oup | Base Rate Fee First Gro |
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| Name | YSTEM ID# 63540 | 3 | | | | NS, INC. | | LEGAL NAME OF OWNE NEMONT COMMU |
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| GAL NAME OF OWNER OF CAB | | | | | | 63540 BYSTEM | Name |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| ross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
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| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | | \$ | 0.00 | |
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| SYSTEM ID# 63540 | | | | | | | LEGAL NAME OF OWNE NEMONT COMMU |
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| | JP | SUBSCRIBER GROU | | NINET | JP | \$ SUBSCRIBER GROU | - | NINE |
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| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE DMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE MMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE MMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE MMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE DMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE DMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE DMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE DMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE DMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE OMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | ase Rate Fee First Gr NINE OMMUNITY/ AREA CALL SIGN |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE OMMUNITY/ AREA |
| | JP 0 | SUBSCRIBER GROU | -SECOND | NINET | JP 0 | | TY-FIRST | NINE OMMUNITY/ AREA CALL SIGN |
| | JP 0 DSE | SUBSCRIBER GROU | /-SECOND | CALL SIGN | JP 0 DSE | | TY-FIRST DSE | NINE DMMUNITY/ AREA CALL SIGN |
| | JP 0 DSE 0 | SUBSCRIBER GROU | /-SECOND | CALL SIGN CALL SIGN | JP 0 DSE 0.00 | | TY-FIRST DSE | NINE OMMUNITY/ AREA |

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| | | | | TE FEES FOR EACH | | | | |
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| | | | | | | | | |
| | 0.00 | \$ | d Group | Base Rate Fee Second | 0.00 | \$ | oup | a se Rate Fee First G |
| | JP | SUBSCRIBER GROU | ETY-SIXTH | NINE | JP | SUBSCRIBER GROU | TY-FIFTH | NINE |
| | 0 | | | COMMUNITY/ AREA | 0 | | | OMMUNITY/ AREA |
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| | 0.00 | s | Group | | 0.00 | | | |
| | | s | Group | Total DSEs Gross Receipts Fourth | | | roup | Total DSEs Gross Receipts Third G |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 63540 | | | | | | | | |
|----------------------------|--|-----------------------|---------|--|---------------|---------------------------------|------------------------|--------------------------------------|--|
| | BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP | | | | | | | | |
| 9 Computat of | NINETY-EIGHTH SUBSCRIBER GROUP | | | | | NINETY-SEVENTH SUBSCRIBER GROUP | | | |
| | COMMUNITY/ AREA 0 | | | | 0 | | | COMMUNITY/ AREA | |
| | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | |
| Base Rate | | | | | | | | | |
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| | Total DSEs 0.00 | | | | 0.00 | otal DSEs 0.00 | | | |
| | Gross Receipts Second Group \$ 0.00 | | | 0.00 | \$ | oup | Bross Receipts First G | | |
| | Base Rate Fee Second Group \$ 0.00 | | | | \$ 0.00 | | | | |
| | 0.00 | \$ | l Group | Base Rate Fee Secon | 0.00 | \$ | roup | Base Rate Fee First G | |
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| | I | \$ SUBSCRIBER GROU | | 1 | | \$ SUBSCRIBER GROU | - | NINE | |
| | JP | | | ONE HU | IP | • | - | NINE | |
| | JP | | | ONE HU | IP | • | - | NINE | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE OMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE COMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE COMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | COMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE COMMUNITY/ AREA | |
| | JP 0 | SUBSCRIBER GROL | NDREDTH | ONE HL COMMUNITY/ AREA | IP 0 | SUBSCRIBER GROU | TY-NINTH | NINE COMMUNITY/ AREA | |
| | JP 0 DSE 0 | SUBSCRIBER GROU | DSE | ONE HL COMMUNITY/ AREA CALL SIGN | DSE | SUBSCRIBER GROU | TY-NINTH DSE | NINE COMMUNITY/ AREA CALL SIGN | |
| | JP 0 DSE | SUBSCRIBER GROL | DSE | ONE HL COMMUNITY/ AREA CALL SIGN | P 0 DSE | SUBSCRIBER GROU | TY-NINTH DSE | NINE COMMUNITY/ AREA CALL SIGN | |

| LEGAL NAME OF OWN | | | | | | | SYSTEM ID# 63540 | Name |
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| | | | | ATE FEES FOR EACH | I SUBSCF | RIBER GROUP | | |
| | RED FIRST | SUBSCRIBER GROU | | 11 | | D SUBSCRIBER GRO | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computat |
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| Fotal DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
| Base Rate Fee First C | Group | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| ONE HUNDF | RED THIRD | SUBSCRIBER GROU | JP | ONE HUNDRE | D FOURTH | H SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Fotal DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| | | L * | 0.00 | | n | l. <u>≺</u> | 0.00 | |
| | he base rat | te fees for each subsc | | as shown in the boxes a | | \$ | 0.00 | |

| Name | 63540 | S | | | | | R OF CABL | NEMONT COMMU |
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| | | | | TE FEES FOR EACH | | | | |
| 9 | | SUBSCRIBER GROU | RED SIXTH | 11 | | SUBSCRIBER GROU | ED FIFTH | |
| Computati | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | 0.00 | \$ | d Group | Base Rate Fee Secor | 0.00 | \$ | roup | 3ase Rate Fee First G |
| | JP | I SUBSCRIBER GROL | D EIGHTH | ONE HUNDR | JP | SUBSCRIBER GROU | SEVENTH | ONE HUNDRED |
| | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
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| Name | YSTEM ID# 63540 | | | | | NS, INC. | R OF CABLE | NEMONT COMMU |
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| 9 | | SUBSCRIBER GROU | ED TENTH | 11 | | SUBSCRIBER GROU | ED NINTH | |
| Computati | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | 0.00 | | | Total DSEs | 0.00 | | | Total DSEs |
| | 0.00 | \$ | d Group | Gross Receipts Secor | 0.00 | \$ | oup | Gross Receipts First G |
| | 0.00 | \$ | d Group | Base Rate Fee Secor | 0.00 | \$ | oup | Base Rate Fee First G |
| | | SUBSCRIBER GROU | | | IP | | | ONE HUNDRED E |
| | JP | SUBSCINIELIN GINUU | IVVELVIH | ONE HUNDRED | | SUBSCRIDER GROU | LEVENIH | |
| | 0 0 | SUBSCRIBER GROU | | COMMUNITY/ AREA | 0 | SUBSCRIBER GROU | | COMMUNITY/ AREA |
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Nonpermitted 3.75 Stations

| LEGAL NAME OF OWNE | | | Henpe | | | S | 63540 SYSTEM | Name |
|--|---------|-----------------|-------------|-----------------------|-----------|----------------|--------------|---------------------------|
| | | | | TE FEES FOR EAC | | | | |
| | RTEENTH | SUBSCRIBER GROU | | 1 | | SUBSCRIBER GRO | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | A | | 0 | ✓ Computatio |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| ONE HUNDRED FI | FTEENTH | SUBSCRIBER GROU | JP | ONE HUNDRED | SIXTEENTH | SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | A | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| 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 | | | riber group | as shown in the boxes | above. | \$ | | |

| Name | YSTEM ID# 63540 | S | | | | | | LEGAL NAME OF OWNER |
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| | | IBER GROUP | SUBSCR | TE FEES FOR EACH | BASE RA | COMPUTATION OF | LOCK A: | В |
| 9 | | SUBSCRIBER GROUP | GHTEENTH | 1 | | SUBSCRIBER GROUP | ENTEENTH | |
| Computatio | 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 | | | Fotal DSEs |
| | 0.00 | \$ | d Group | Gross Receipts Secon | 0.00 | \$ | roup | Gross Receipts First Gr |
| | 0.00 | \$ | d Group | Base Rate Fee Secon | 0.00 | \$ | roup | Base Rate Fee First Gr |
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| | 0.00 | | | Total DSEs | 0.00 | | | Total DSEs |
| | 0.00 | | Group | Total DSEs Gross Receipts Fourth | 0.00 | \$ | iroup | Total DSEs Gross Receipts Third G |
| | | | Group | | | | Group | |

| Name | 63540 | S | | | | | | LEGAL NAME OF OWNER |
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| | | | | TE FEES FOR EACH | BASE RA | | | |
| 9 | , 0 | SUBSCRIBER GROUP | Y-SECOND | ONE HUNDRED TWENT | 0 | SUBSCRIBER GROUP | ITY-FIRST | ONE HUNDRED TWEN |
| Computati of | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
| Base Rate I | 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 | \$ | l Group | Gross Receipts Second | 0.00 | \$ | oup | Gross Receipts First Gro |
| | 0.00 | \$ | l Group | Base Rate Fee Second | 0.00 | \$ | oup | Base Rate Fee First Gro |
| | , | SUBSCRIBER GROUP | Y-FOURTH | ONE HUNDRED TWEN | | SUBSCRIBER GROUP | TY-THIRD | ONE HUNDRED TWEN |
| | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | 0.00 | <u> </u> | Group | Total DSEs Gross Receipts Fourth | 0.00 | | oup | Total DSEs Gross Receipts Third Gr |

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| 9 | | I SUBSCRIBER GROUP | NTY-SIXTH | | | SUBSCRIBER GROUP | VTY-FIFTH | |
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| | 0.00 | \$ | l Group | Base Rate Fee Secon | 0.00 | \$ | oup | Base Rate Fee First Gr |
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| | TY-THIRD | SUBSCRIBER GROUP | | | Y-FOURTH | SUBSCRIBER GROUP | | 9 |
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| Gross Receipts First Gro | bup | \$ | 0.00 | Gross Receipts Second | Group | \$ | 0.00 | |
| Base Rate Fee First Gro | oup | \$ | 0.00 | Base Rate Fee Second | l Group | \$ | 0.00 | |
| ONE HUNDRED THIR | TY-FIFTH | SUBSCRIBER GROU | Р | ONE HUNDRED THIF | RTY-SIXTH | I SUBSCRIBER GROU | P | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Gross Receipts Third Gr | oup | \$ | 0.00 | Gross Receipts Fourth | Group | \$ | 0.00 | |
| Base Rate Fee Third Gr | oup | \$ | 0.00 | Base Rate Fee Fourth | Group | \$ | 0.00 | |
| | | | | | | L. | | |
| Base Rate Fee: Add the Enter here and in block | | | iber group : | as shown in the boxes ab | oove. | \$ | | |

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| В | LOCK A: | COMPUTATION OF | BASE RA | TE FEES FOR EAC | CH SUBSCR | IBER GROUP | | |
| ONE HUNDRED THIRTY | -SEVENTH | SUBSCRIBER GROUP | | 11 | | I SUBSCRIBER GROUF | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | Computation |
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| Base Rate Fee First Gr | roup | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| ONE HUNDRED THIR | TY-NINTH | SUBSCRIBER GROU | JP | ONE HUNDRE | | SUBSCRIBER GRO | UP | |
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| Base Rate Fee Third G | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add th Enter here and in block | | | riber group | as shown in the boxes | above. | \$ | | |

| | 63540 BYSTEM | 5 | | | | | R OF CABLE | NEMONT COMMU |
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| | | IBER GROUP | I SUBSCR | ATE FEES FOR EAC | F BASE RA | COMPUTATION C | SLOCK A: | E |
| 9 | | SUBSCRIBER GROUP | TY-SECONE | | | SUBSCRIBER GROU | RTY-FIRST | |
| Computati | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | YSTEM ID# 63540 | S | | | | | | LEGAL NAME OF OWNE |
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| | | IBER GROUP | SUBSCRI | TE FEES FOR EACH | BASE RA | COMPUTATION C | BLOCK A: | B |
| 9 | | SUBSCRIBER GROUP | ORTY-SIXTH | ii | | SUBSCRIBER GROU | RTY-FIFTH | |
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| and Council a start | | | | | | - | | |
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| | | SUBSCRIBER GROUP | RTY-EIGHTH | ONE HUNDRED FOR | | SUBSCRIBER GROU | -SEVENTH | ONE HUNDRED FORTY |
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| | 0.00 | S | Group | Total DSEs Gross Receipts Fourth | 0.00 | s | Group | Total DSEs Gross Receipts Third G |

Nonpermitted 3.75 Stations

| LEGAL NAME OF OWNER | | | | | | S | 63540 | Name |
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| ONE HUNDRED FOR | TY-NINTH | SUBSCRIBER GROU | | | D FIFTIETH | I SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA 0 | | | COMMUNITY/ AREA | | | 0 | Computation | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| 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 Secor | nd Group | \$ | 0.00 | |
| ONE HUNDRED FIF | TY-FIRST | SUBSCRIBER GROU | Р | ONE HUNDRED FIFT | Y-SECONE | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourt | n Group | \$ | 0.00 | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourt | n Group | \$ | 0.00 | |
| e Rate Fee: Add the r here and in block | e base rat 3, line 1, s | e fees for each subscr pace L (page 7) | iber group | II as shown in the boxes a | above. | \$ | | |

| Name | 63540 | S | | | | | | LEGAL NAME OF OWNER |
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| | | | | TE FEES FOR EACH | | | | |
| 9 | | SUBSCRIBER GROU | -FOURTH | ONE HUNDRED FIFTY | | SUBSCRIBER GROU | Y-THIRD | ONE HUNDRED FIFT |
| Computati | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | 0.00 | \$ | l Group | Base Rate Fee Second | 0.00 | \$ | oup | Base Rate Fee First Gro |
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| Name | 63540 OK | S | | | | | | LEGAL NAME OF OWNER |
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| 0 | | IBER GROUP | | TE FEES FOR EACH | BASE RA | | | B ONE HUNDRED FIFTY |
| 9 Computatio | 0 | | | COMMUNITY/ AREA | 0 | COMMUNITY/ AREA 0 | | |
| of | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
| Base Rate F | | | | | | | | |
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| | JP | I SUBSCRIBER GROU | SIXTIETH | ONE HUNDREI | JP | SUBSCRIBER GRO | TY-NINTH | ONE HUNDRED FIF |
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| | 0.00 | | | Total DSEs | 0.00 | | | Total DSEs |
| | 0.00 | | Group | Total DSEs Gross Receipts Fourth | 0.00 | | | |
| | 0.00 | | Group | Total DSEs Gross Receipts Fourth | 0.00 | | Group | Total DSEs Gross Receipts Third G |

| | <u></u> | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# |
| | | 63540 |
| 9 | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | _ | 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 commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none em Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 |
| | THIRD SUBSCRIBER GROUP | FOURTH 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for of in the boxes above. Enter here and in block 4, line 2 of space L (page | |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# |
| Name | NEMONT COMMUNICATIONS, INC. | 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 Computation | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma 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 comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of o for the VHF Grade B contour stations that were classified as nter zero. of DSEs used to compute the surcharge. |
| | | |
| | FIFTH SUBSCRIBER GROUP | SIXTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation 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 commential schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | NINTH SUBSCRIBER GROUP | TENTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | SURCHARGE First Group | SURCHARGE Second Group |
| | ELEVENTH SUBSCRIBER GROUP | TWELVTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | Ŭ Î |
| | | |

| | | FORM SA3E. PAGE 20. |
|--|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 Computation | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a rket any portion of your cable system is located in as defined |
| of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commential schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. formula outlined in block D, section 3 or 4 of part 7 of this |
| Distant Stations | your actual calculations on this form. | gures applicable to the particular group. You do not need to show |
| | THIRTEENTH SUBSCRIBER GROUP | FOURTEENTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 |
| | SURCHARGE First Group | SURCHARGE Second Group |
| | FIFTEENTH SUBSCRIBER GROUP | SIXTEENTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | U |
| | | |
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| | | FORM SA3E. PAGE 20. |
|----------------------------------|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | · · · |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee | | |
| and Syndicated | Step 1: In line 1, give the total DSEs by subscriber group for commet this schedule. | srcial VHF Grade B contour stations listed in block A, part 9 of |
| Exclusivity | Step 2: In line 2, give the total number of DSEs by subscriber group | |
| Surcharge for | Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number | |
| Partially Distant Stations | Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. | formula outlined in block D, section 3 or 4 of part 7 of this gures applicable to the particular group. You do not need to show |
| | SEVENTEENTH SUBSCRIBER GROUP | 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 and enter here. This is the total number of DSEs for | 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 | this subscriber group subject to the surcharge |
| | computation | computation |
| | SYNDICATED EXCLUSIVITY | SYNDICATED EXCLUSIVITY |
| | SURCHARGE First Group | Surcharge Second Group |
| | NINEENTH SUBSCRIBER GROUP | TWENTYTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the | Line 3: Subtract line 2 from line 1 and enter here. This is the |
| | total number of DSEs for this subscriber group | total number of DSEs for this subscriber group |
| | subject to the surcharge | subject to the surcharge |
| | | |
| | SYNDICATED EXCLUSIVITY SURCHARGE | SYNDICATED EXCLUSIVITY SURCHARGE |
| | Third Group | Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown 9 7) |
| | | |
| | | |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | ☐ First 50 major television market | Second 50 major television market |
| Base Rate Fee and | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme | ercial VHF Grade B contour stations listed in block A, part 9 of |
| Syndicated Exclusivity Surcharge for Partially Distant Stations | this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | TWENTY-FIRST SUBSCRIBER GROUP | TWENTY-SECOND SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DDE3 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 | 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 |
| | First Group | Second Group |
| | TWENTY-THIRD SUBSCRIBER GROUP | TWENTY-FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Ender the Exemption Does 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 | Line 2: Enter the Exempt DoEst : |
| | SYNDICATED EXCLUSIVITY SURCHARGE Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown |
| | | |

| Name LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. 9 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCF If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalsor Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located is by section 76.5 of FCC rules in effect on June 24, 1981: Computation of one of the part of the p | so compute a |
|---|-----------------------------------|
| 9 If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located is by section 76.5 of FCC rules in effect on June 24, 1981: Computation of □ First 50 major television market □ Second 50 major television market | so compute a |
| Y Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in by section 76.5 of FCC rules in effect on June 24, 1981: Computation of Image: First 50 major television market Second 50 major television market | |
| of | |
| | |
| Base Rate Fee and INSTRUCTIONS: Syndicated Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in bloc this schedule. Surcharge for Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Partially 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 partiality Distant Stations Step 4: | re classified as art 7 of this |
| | |
| TWENTY-FIFTH SUBSCRIBER GROUP TWENTY-SIXTH SUBSCRIBER | R GROUP |
| 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 subject to the surcharge computation | |
| First Group | |
| TWENTY-SEVENTH SUBSCRIBER GROUP TWENTY-EIGHTH SUBSCRIBER | ER 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computationLine 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 | <u>-</u> |
| SYNDICATED EXCLUSIVITY SURCHARGE Third Group | |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) | |
| | |

| | | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation 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 commetties schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none emistep 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | TWENTY-NINTH SUBSCRIBER GROUP | THIRTIETH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | THIRTY-FIRST SUBSCRIBER GROUP | THIRTY-SECOND SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs | 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | 5 1 |
| | | |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# |
|--|--|--|
| | NEMONT COMMUNICATIONS, INC. | 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI | VITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none entities 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | rcial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| Distant Stations | schedule. In making this computation, use gross receipts fig your actual calculations on this form. | ures applicable to the particular group. You do not need to show |
| | THIRTY-THIRD SUBSCRIBER GROUP | THIRTY-FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 | SYNDICATED EXCLUSIVITY SURCHARGE Second Group |
| | THIRTY-FIFTH SUBSCRIBER GROUP | THIRTY-SIXTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 1 |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| or 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 commetities schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | THIRTY-SEVENTH SUBSCRIBER GROUP | THIRTY-EIGHTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | THIRTY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs | FORTIETH SUBSCRIBER GROUP 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | Ŭ I |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation 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 commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none emistep 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | FORTY-FIRST SUBSCRIBER GROUP | FORTY-SECOND SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | First Group | Second Group |
| | FORTY-THIRD SUBSCRIBER GROUP | FORTY-FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 1 |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commential schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| Stations | your actual calculations on this form. | |
| | FORTY-FIFTH SUBSCRIBER GROUP | FORTY-SIXTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 | SYNDICATED EXCLUSIVITY SURCHARGE Second Group |
| | FORTY-SEVENTH SUBSCRIBER GROUP | FORTY-EIGHTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | Ŭ I |
| | | |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation 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 commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | | |
| | FORTY-NINTH SUBSCRIBER GROUP | 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 |
| | SURCHARGE First Group | SURCHARGE Second Group |
| | FIFTY-FIRST SUBSCRIBER GROUP | FIFTY-SECOND SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for a in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 1 |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 Computation | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market 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 commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none end Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | FIFTY-THIRD SUBSCRIBER GROUP | |
| | FIFTY-THIRD SUBSCRIBER GROUP | FIFTY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| | FIFTY-FIFTH SUBSCRIBER GROUP | FIFTY-SIXTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown 7) |
| | | |

| Name NEMONT COMMUNICATIONS, INC. Units 9 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GRO Bydicated Exclusivity Surcharge. Indicate which major television market and the station is not exempl in Part 7, your mustations compute a Syndicated Exclusivity Surcharge. Indicate which major television market and the station is not exempl in Part 7, your mustations compute a Syndicated Exclusivity Surcharge. Indicate which major television market and the station is not exempl in Part 7, your mustations compute a Syndicated Exclusivity Surcharge for each subscriber group of the VHF Grade B contour stations listed in block A, part 9 of this schedule. 90 Inine 3, gub the total DSE by subscriber group of the VHF Grade B contour stations listed in block A, part 9 of this schedule. 910 21: Inine 3, gub the total number of DSEs by subscriber group of the VHF Grade B contour stations instead in block A, part 9 of this schedule. 92 3: Inine 3, gub the total number of DSEs used to compute the surcharge. 93 4: Stations 94 5: Stations 94 5: Stations 95 4: Compute the surcharge computation. 95 4: Compute the surcharge computation. 95 4: Compute the surcharge computation. 96 4: Stations 97 5: Stations 98 5: Compute the surcharge computation. 98 6: Compute the surcharge computation. 98 6: Compute the surcharge computation. 98 7: State the VHF DSEs . | | | FORM SA3E. PAGE 20 |
|---|---------------|---|--|
| 9 If your cable system is located within a top 100 television market any portion of your cable system is located in as defined by section 76.5 of PCC rules in affect on June 24, 1981: Computation of and Syndicated Exclusivity Surcharge Tor Partially Surcharge for Partially Distant Stations Exclusivity Exempl DSEs in block C, part 7 of this schedule. If none enter zero. Step 1: in the 3, buttrat line 2 drow the total DSEs by subscriber group for commercial VHE Grade B contour stations that were classified as Exclusivity Exempl DSEs in block C, part 7 of this schedule. If none enter zero. 50:90 3: in the 3, buttrat line 0, and the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to sh your actual calculations on this form. Stations FIFTY-SEVENTH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs. Line 2: Enter the Exempt 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 | Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| Y 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 of an additional syndicated is the fact of June 24, 1981: Second 50 major television market Syndicated Exclusivity Surcharge indicates which major television market Second 50 major television market Step 1: In Into 1, give the total DSEs by subscriber group for the VHF Grade B contour stations listed in block A, part 9 of this schedule. If none enter zore, sign 3: In line 3, subtract line 2 for line 1. This is the total number of DSEs used to compute the surcharge. Step 2: In Into 2, give the total number of DSEs by subscriber group give the formate outlined in block D, section 3 or 4 of part 7 of this schedule. If none enter zore, sign 3: In line 3, subtract line 2 form line 1. This is the total number of DSEs used to compute the surcharge. Step 3: Compute the surcharge for each subscriber group give in the formal outlined in block D, section 3 or 4 of part 7 of this schedule. If none enter zore, sign 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs. Line 1: Enter the VHF DSEs. Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs for this subscriber group give to the surcharge computation. SynDicATED EXCLUSIVITY SURCHARGE First Group Sinthere This is the total number of DSEs for this subscriber group give to the surcharge computation. SynDicATED EXCLUSIVITY Surthared file 2 from line 1 and enter here. This is the total number of DSE | | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| of Base Rate FG Base Rate | _ | Syndicated Exclusivity Surcharge. Indicate which major television ma | |
| Base Rate Fee and Sign 1: Inite 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Sup 2: In line 2, give the total DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempl DSEs in block C, part 7 of this schedule. If none enter zaro. Step 3: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 of a dpart 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to sh your actual calculations on this form. FIFTY-SEVENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt 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 FIFTY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: 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 Third Group SYNDICATED EXCLUSIVITY SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE Third Group SYNDICATED EXCLUSIVI | - | ☐ First 50 maior television market | Second 50 major television market |
| Syndicated Exclusivity Sie 2: In line 2, dive the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as the particular group. You do not need to sh your actual calculations on this form. Sie 3: In line 2, dive the total number of DSEs used to compute the surcharge. Sie 4: Compute the surcharge for each subscriber group group for the VHF Grade B contour stations that were classified as the computation. Sie 4: Compute the surcharge for each subscriber group group for the VHF DSEs 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 | Base Rate Fee | | |
| Exclusivity Surcharge for 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 the exempt DSEs in block C, part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to sh your actual calculations on this form. FIFTY-SEVENTH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the KHF DSEs Line 2: Enter the Exempt DSEs for this subscriber group subject to the surcharge computation 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 FIFTY-NINTH SUBSCRIBER GROUP SITTETH SUBSCRIBER GROUP 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 FIFTY-NINTH SUBSCRIBER GROUP SITTETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs for this subscriber group subject to the surcharge computation SITTETH SUBSCRIBER GROUP SYNDICATED EXCLUSIVITY SURCHARGE SUNCHARGE Line 1: Enter the VHF DSEs SYNDICATED EXCLUSIVITY SURCHARGE SUNCHARGE SUNCHARGE SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE S | | | ercial VHF Grade B contour stations listed in block A, part 9 of |
| for Step 3: In line 3; subtract line 2 from line 1. This is the total number of DSEs used to compute the survarge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D. Section 3 or 4 of part 7 of this subscriber group. You do not need to sh your actual calculations on this form. FIFTY-SEVENTH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs 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 StyDICATED EXCLUSIVITY SURCHARGE FIFTY-NINTH SUBSCRIBER GROUP SYNDICATED EXCLUSIVITY SURCHARGE FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF 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 FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF 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 SUBCAREE FIFTY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs | Exclusivity | | |
| Distant Stations schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to sh your actual calculations on this form. FIFTY-SEVENTH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group SYNDICATED EXCLUSIVITY SURCHARGE S FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. Line 1: Enter the VHF 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 Line 1: Enter the VHF 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 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 SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY | - | | |
| 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Distant | schedule. In making this computation, use gross receipts fig | - |
| Line 2: Enter the Exempt DSEs | | FIFTY-SEVENTH SUBSCRIBER GROUP | FIFTY-EIGHTH SUBSCRIBER GROUP |
| 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 | | Line 1: Enter the VHE DSEs | Line 1: Enter the VHE DSEs |
| and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | | | Line 2: Enter the Exempt DSEs |
| this subscriber group subject to the surcharge computation | | and enter here. This is the | and enter here. This is the |
| computation - computation - SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs | | | |
| SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE First Group | | | |
| SURCHARGE First Group FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH 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 Third Group SYNDICATED EXCLUSIVITY SUNCHARGE Third Group SYNDICATED EXCLUSIVITY SUNCHARGE Third Group | | | |
| FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs | | | SURCHARGE |
| Line 1: Enter the VHF DSEs | | First Group | Second Group |
| Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs 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 this subscriber group subject to the surcharge computation | | FIFTY-NINTH SUBSCRIBER GROUP | SIXTIETH SUBSCRIBER GROUP |
| 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 | | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| 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 subject to the surcharge computation | | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| total number of DSEs for total number of DSEs for this subscriber group subject to the surcharge computation | | | |
| subject to the surcharge subject to the surcharge computation | | | |
| computation - computation - SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE - \$ Third Group \$ Fourth Group \$ SYNDICATED EXCLUSIVITY \$ \$ | | 5 1 | 0 1 |
| SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE Third Group | | | , , |
| Third Group \$ Fourth Group \$ SYNDICATED EXCLUSIVITY SUBCHARGE: Add the surcharge for each subscriber group as shown • | | | |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) | | Third Group | |
| | | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown |

| | | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation of | First 50 major television market | Second 50 major television market |
| or 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 commetities schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | SIXTY-FIRST SUBSCRIBER GROUP | SIXTY-SECOND SUBSCRIBER GROUP |
| | SIXTY-FIRST SUBSCRIBER GROUP | SIXTY-SECOND SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | SIXTY-THIRD SUBSCRIBER GROUP | SIXTY-FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for or in the boxes above. Enter here and in block 4, line 2 of space L (page | 5 1 |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation 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 commetities schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | SIXTY-FIFTH SUBSCRIBER GROUP | SIXTY-SIXTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | SIXTY-SEVENTH SUBSCRIBER GROUP | SIXTY-EIGHTH 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 | Line 1: Enter the VHF DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for of in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 1 |

| | | FORM SA3E. PAGE 20. |
|--|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | · · · · |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group | |
| Surcharge for Partially Distant Stations | Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ter zero. of DSEs used to compute the surcharge. |
| | SIXTY-NINTH SUBSCRIBER GROUP | SEVENTIETH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHE DSEs |
| | Line 2: Enter the Exempt DSEs | Line 1: Enter the VHF 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 | 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 | SYNDICATED EXCLUSIVITY SURCHARGE Second Group |
| | SEVENTY-FIRST SUBSCRIBER GROUP | SEVENTY-SECOND SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | Line 2: Enter the Exempt DOEs 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | |
| | | |

| | SYSTEM ID# 63540 SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
|---|--|
| | SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| If your cable system is located within a top 100 television market and | |
| Syndicated Exclusivity Surcharge. Indicate which major television make and by section 76.5 of FCC rules in effect on June 24, 1981: | I the station is not exempt in Part 7, you mustalso compute a arket any portion of your cable system is located in as defined |
| First 50 major television market | Second 50 major television market |
| INSTRUCTIONS: | |
| | ercial VHF Grade B contour stations listed in block A, part 9 of |
| Step 2: In line 2, give the total number of DSEs by subscriber group | o for the VHF Grade B contour stations that were classified as |
| Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3 subtract line 2 from line 1. This is the total number | |
| Step 4: Compute the surcharge for each subscriber group using the | |
| SEVENTY-THIRD SUBSCRIBER GROUP | SEVENTY-FOURTH SUBSCRIBER GROUP |
| Line 1: Enter the VHE 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 and enter here. This is the total number of DSEs for | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for |
| this subscriber group | this subscriber group |
| subject to the surcharge | subject to the surcharge |
| | computation |
| | SYNDICATED EXCLUSIVITY SURCHARGE |
| First Group | Second Group |
| SEVENTY-FIFTH SUBSCRIBER GROUP | SEVENTY-SIXTH SUBSCRIBER GROUP |
| Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| Line 3: Subtract line 2 from line 1 | Line 3: Subtract line 2 from line 1 |
| | and enter here. This is the total number of DSEs for |
| this subscriber group | this subscriber group |
| | subject to the surcharge computation |
| | SYNDICATED EXCLUSIVITY |
| SURCHARGE Third Group | SURCHARGE Fourth Group |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown e 7) |
| | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fi your actual calculations on this form. SEVENTY-THIRD 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 |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation 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 commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none emistep 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | SEVENTY-SEVENTH SUBSCRIBER GROUP | SEVENTY-EIGHTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | First Group | Second Group |
| | SEVENTY-NINTH SUBSCRIBER GROUP | EIGHTIETH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 1 |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation 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 commetities schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | EIGHTY-FIRST SUBSCRIBER GROUP | EIGHTY-SECOND SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | EIGHTY-THIRD SUBSCRIBER GROUP | EIGHTY-FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | |
| | | |

| | | FORM SA3E. PAGE 20. |
|----------------------------------|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | · · · · |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee | | |
| and Syndicated | Step 1: In line 1, give the total DSEs by subscriber group for commet this schedule. | ercial VHF Grade B contour stations listed in block A, part 9 of |
| Exclusivity | Step 2: In line 2, give the total number of DSEs by subscriber group | |
| Surcharge for | Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number | |
| Partially Distant Stations | Ily 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 | |
| | EIGHTY-FIFTH SUBSCRIBER GROUP | EIGHTY-SIXTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscribes group | 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 | this subscriber group subject to the surcharge |
| | computation | computation |
| | SYNDICATED EXCLUSIVITY SURCHARGE | SYNDICATED EXCLUSIVITY SURCHARGE |
| | First Group | Second Group |
| | EIGHTY-SEVENTH SUBSCRIBER GROUP | EIGHTY-EIGHTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the | Line 3: Subtract line 2 from line 1 and enter here. This is the |
| | total number of DSEs for this subscriber group | total number of DSEs for this subscriber group |
| | subject to the surcharge computation | subject to the surcharge |
| | SYNDICATED EXCLUSIVITY | |
| | SURCHARGE | SURCHARGE |
| | Third Group | Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown ∋ 7) \$ |
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| | | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commetities schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| Partially Distant Stations | IyStep 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 sho | |
| | EIGHTY-NINTH SUBSCRIBER GROUP | NINETIETH 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 | Second Group |
| | NINETY-FIRST SUBSCRIBER GROUP | NINETY-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 |
| | and enter here. This is the total number of DSEs for this subscriber group | and enter here. This is the total number of DSEs for this subscriber group |
| | subject to the surcharge | subject to the surcharge |
| | SYNDICATED EXCLUSIVITY SURCHARGE Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | Ŭ Î |
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| | | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation 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 commetities schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | NINETY-THIRD SUBSCRIBER GROUP | NINETY-FOURTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | NINETY-FIFTH SUBSCRIBER GROUP | NINETY-SIXTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 1 |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| or Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | Rate Fee and 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 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 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 | |
| | NINETY-SEVENTH SUBSCRIBER GROUP | NINETY-EIGHTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | NINETY-NINTH SUBSCRIBER GROUP | ONE HUNDREDTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Ŭ I |
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| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation 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 | |
| | ONE HUNDERED FIRST SUBSCRIBER GROUP | ONE HUNDERED SECOND SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | ONE HUNDERED THIRD SUBSCRIBER GROUP | ONE HUNDERED FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs | 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | Rate Fee INSTRUCTIONS: and 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 this schedule. dicated this schedule. usivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for 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 | |
| | ONE HUNDRED FIFTH SUBSCRIBER GROUP | ONE HUNDRED SIXTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | ONE HUNDRED SEVENTH SUBSCRIBER GROUP | ONE HUNDRED EIGHTH 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 | Line 1: Enter the VHF DSEs |
| | SURCHARGE Third Group | SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | Rate Fee INSTRUCTIONS: and 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 this schedule. clusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for 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 the particular group. You do not need to the particular group. | |
| | ONE HUNDRED NINTH SUBSCRIBER GROUP | ONE HUNDRED TENTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | ONE HUNDRED ELEVENTH SUBSCRIBER GROUP | ONE HUNDRED TWELVTH 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 | Line 1: Enter the VHF DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | Ŭ I |

| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| of □ First 50 major television market □ Second 50 major television market Base Rate Fee INSTRUCTIONS: and Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in this schedule. Syndicated Exclusivity Surcharge for for Step 3: Partially Distant Distant Stet 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 or schedule. In making this computation, use gross receipts figures applicable to the particular group. You your actual calculations on this form. | | ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. formula outlined in block D, section 3 or 4 of part 7 of this |
| | ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP | ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP | ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | 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 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 | |
| | ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP | ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | ONE HUNDRED NINTEENTH SUBSCRIBER GROUP | ONE HUNDRED TWENTIETH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown 7) |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | Fee 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 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 | |
| | ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP | ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP | ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown 7) |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|--|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | ☐ First 50 major television market | Second 50 major television market |
| of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | Rate Fee and step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 1 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 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 the particular group. | |
| | ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP | ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP |
| | UNE HUNDRED TWENTT-FIFTH SUBSCRIBER GROUP | UNE HUNDRED TWENTT-SIXTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for of in the boxes above. Enter here and in block 4, line 2 of space L (page | 8 1 |

| | | FORM SA3E. PAGE 20. | |
|---|--|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 | |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981: | | |
| Computation of | First 50 major television market | Second 50 major television market | |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | the 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 this schedule. sted 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 | | |
| | ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP | ONE HUNDRED THIRTIETH SUBSCRIBER GROUP | |
| | | | |
| | Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs | Line 1: Enter the VHF 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 | 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 | SYNDICATED EXCLUSIVITY SURCHARGE Second Group | |
| | ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP | ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group | |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown 7) | |
| | | | |

| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 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 | |
| | ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP | ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 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 | 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 |
| | ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP | ONE HUNDRED THIRTY-SIXTH 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 | Line 1: Enter the VHF DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for of in the boxes above. Enter here and in block 4, line 2 of space L (page | |
| | | |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
|---|--|--|
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for | INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of the second statement of the second st | for the VHF Grade B contour stations that were classified as ter zero. |
| Partially Distant Stations | Step 4: Compute the surcharge for each subscriber group using the | |
| | ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP | ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF DSEs |
| | Line 2: Enter the Exempt DSEs | Line 2: Enter the Exempt DSEs |
| | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 | SYNDICATED EXCLUSIVITY SURCHARGE Second Group |
| | ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP | ONE HUNDRED FORTIETH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | 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 | 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 Third Group \$ | |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | 0 1 |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation 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 FORTY-FIRST SUBSCRIBER GROUP | ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | First Group | Second Group |
| | ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP | ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|---|---|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | ☐ First 50 major television market | Second 50 major television market |
| or Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | Hase Rate Fee and INSTRUCTIONS: Syndicated Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, p this schedule. Surcharge for Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were class Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Partially 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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not ne | |
| | ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP | ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP |
| | UNE HUNDRED FOR IT-FIFTH SUBSCRIBER GROUP | UNE HUNDRED FOR IT-SIX IN SUBSCRIDER 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | 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 |
| | 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 | 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: Add the surcharge for a in the boxes above. Enter here and in block 4, line 2 of space L (page | 5 |

| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 Computation | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981: | |
| Computation of | First 50 major television market | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | | |
| | ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP | ONE HUNDRED FIFTIETH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | 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 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page | each subscriber group as shown |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | the station is not exempt in Part 7, you mustalso compute a |
| Computation of | First 50 major television market | Second 50 major television market |
| or 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 commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the | ercial VHF Grade B contour stations listed in block A, part 9 of of the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge. |
| | ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP | ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP | ONE HUNDRED FIFTY-SIXTH 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 | Line 1: Enter the VHF DSEs |
| | SYNDICATED EXCLUSIVITY SURCHARGE Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | |
| | | |

| | | FORM SA3E. PAGE 20. |
|---|--|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: NEMONT COMMUNICATIONS, INC. | SYSTEM ID# 63540 |
| | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP | |
| 9 Computation | If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981: | |
| of | | Second 50 major television market |
| Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | d catedStep 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.sivity arge r rStep 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 | |
| | ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP | ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP |
| | | |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 |
| | | |
| | ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP | ONE HUNDRED SIXTIETH SUBSCRIBER GROUP |
| | Line 1: Enter the VHF DSEs | Line 1: Enter the VHF 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 | 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 Third Group | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group |
| | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page | |
| | | |