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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
08/26/2019	\$
00/20/2019	ALLOCATION NUMBER

Return completed workbook by email to:

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	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 busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting conducting the conduction of t	ess of the cable system on the last day of the counting perion	em he accounting period should s	
				78192019/1
				7819 2019/1
	PO BOX 1000 MASSILLON OH 44648-1000			
С	INSTRUCTIONS: In line 1, give any business or trade names used to it			
	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address give	n in space B.
System	1 IDENTIFICATION OF CABLE SYSTEM:			
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite number)			
	(City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b
Area	with all communities.			
Served	CITY OR TOWN	STATE		
First	WOOSTER CITY WAYNE COUNTY	ОН		
Community	Below is a sample for reporting communities if you report multiple cha			
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alla	MD	A	1
	Alliance	MD MD	B B	3
	Gering	INID	D	3

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 7819 **MASSILLON CABLE TV INC** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **WOOSTER CITY WAYNE COUNTY** OH **First APPLE CREEK WAYNE COUNTY** OH Community **EAST UNION TWP** WAYNE COUNTY OH **SMITHVILLE** WAYNE COUNTY OH **FRANKLIN TWP WAYNE COUNTY** OH **PLAIN TWP WAYNE COUNTY** OH See instructions for **CHESTER TWP** WAYNE COUNTY OH additional information on alphabetization. **MOUNT EATON** WAYNE COUNTY OH **WAYNE TWP WAYNE COUNTY** OH **CANAAN TWP** OH WAYNE COUNTY **CLINTON TWP** OH WAYNE COUNTY Add rows as necessary. WAYNE COUNTY **GREENE TWP** OH **PAINT TWP** WAYNE COUNTY OH **SALT CREEK TWP** WAYNE COUNTY OH SUGAR CREEK TWP-WAYNE **WAYNE COUNTY** OH **WOOSTER TWP** WAYNE COUNTY OH **CONGRESS TWP** WAYNE COUNTY OH **PERRY TWP ASHLAND COUNTY** OH **WAYNE COUNTY MILTON TWP** OH

1	

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

MASSILLON CABLE TV INC

SYSTEM ID#
7819

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1			BLOC	K 2		
CATECORY OF SERVICE	NO. OF		RATE		CATECORY OF SERVICE	NO. OF	RATE
CATEGORY OF SERVICE	SUBSCRIBERS		KAIL	Н	CATEGORY OF SERVICE	SUBSCRIBERS	RAIE
Residential:							
Service to first set	10,318		38.75				
 Service to additional set(s) 							
 FM radio (if separate rate) 							
Motel, hotel		I					
Commercial							
Converter							
Residential							
Non-residential							
	I	1		1 ľ		1	T

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	\$ 14.75	Motel, hotel		HD ESSENTIALS	\$ 6.95
 Pay cable—add'l channel 	\$ 65.75	Commercial		НВО	\$ 24.65
Fire protection		Pay cable		CINEMAX	\$ 15.15
Burglar protection		 Pay cable-add'l channel 		SHOWTIME	\$ 20.15
Installation: Residential		Fire protection		STARZ	\$ 15.50
First set		Burglar protection			
Additional set(s)		Other services:			
• FM radio (if separate rate)		Reconnect			
Converter		Disconnect			
		Outlet relocation			
		Move to new address			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **MASSILLON CABLE TV INC** 7819 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER STATION (If Distant) **WEAO** 49.1 Ε No **AKRON FUSION** 49.2 E-M No AKRON See instructions for additional information MHzWordlview #N/A #N/A No #N/A on alphabetization. No **WRLM HD** 47.1 ı **KENT** Ν **WBNX** 55.1 No AKRON **Happy Chnl** 55.2 N-M No AKRON Movies! **AKRON** 55.3 N-M No **AKRON** Heroes&Ic 55.4 N-M No **WVPX** 23.1 Ν No **AKRON QUBO** N-M No 23.2 **AKRON** ionLife 23.3 N-M No AKRON **WKYC** 3.1 Ν No **CLEVELAND Justice Net** 3.2 N-M No CLEVELAND Cozi 3.3 N-M No **CLEVELAND WEWS** 5.1 Ν No **CLEVELAND** 5.2 **Grit TV** N-M No **CLEVELAND CLEVELAND** LAFF TV 5.3 N-M No WJW 8.1 Ν No **CLEVELAND**

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name MASSILLON CABLE TV INC 7819 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
Antenna TV	8.2	N-M	No		CLEVELAND
WVIZ	25.1	E	No		CLEVELAND
Ohio Channel	25.2	E-M	No		CLEVELAND
PBS World	25.3	E-M	No		CLEVELAND
Create	25.4	E-M	No		CLEVELAND
PBS Kids	25.5	E-M	No		CLEVELAND
WOIO	19.1	N	No		SHAKER HEIGHTS
Me TV	19.2	N-M	No		SHAKER HEIGHTS
WUAB	43.1	N	No		LORAIN
Bounce	43.2	N-M	No		LORAIN
WDLI	17.1	I	No		CANTON
			No		
WIVM	13.1	I	No		CANTON
ThisTV	13.2	I-M	No		CANTON
COMET	13.3	I-M	No		CANTON

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
MASSILLON CA	ABLE TV IN	С			7819	Nume		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON O						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for inde								
Column 6: Give the	location of ea Canadian statio	ch station. Fo	or U.S. stations, le the name of th	list the community ne community with	to which the station is licensed by the which the station is identifed.			
		CHANN	EL LINE-UP	AC				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWI	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
MASSILLON C	ABLE TV IN	<u>C</u>			7819	- Tunio
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
In General: In space carried by your cable: FCC rules and regular 76.59(d)(2) and (4), 7 substitute program ba Substitute Program ba Substitute Program ba Substitute Program ba Substitute Basis: basis under specific Fe Do not list the station station was carried. List the station here, basis. For further in in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable 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	G, identify even system during the tions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with A-2". Simulcast e channel numbers of the cast, "E" (for neese terms, see tation is outside ince area, see parave entered "Y the distant statiction on a part-tilision of a distant tentered into o a primary trans simulcasts, also here categories e location of ea	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the station account of the station. Whether the station. Whether the station. Whether the station account of the local servers in column on during the same basis becard multicast stream or before Jumitter or an associated of the station. For the station.	g period, except 81, permitting the referring to 76.6 paragraph. A distant stations for izations: to the station was carried that basis station report origination cording to its own be reported in containing the station is a network etwork), "N-M" (if I educational), one general instruction area, (i.e. "or general instruction area, (i.e. "or general instruction accounting perional perional perional perional instruction accounting perional instruction.	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on program services the television statification, D.C. This work station, an indefor network multicute of "E-M" (for noncontrolled in the special state of the service of the state of the st	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your dering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form.	G Primary Transmitters: Television
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AD		1
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FURM SAJE. PAGE 3.					CVCTEM ID#	1
MASSILLON C					SYSTEM ID# 7819	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during the constant of	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 31, permitting the eferring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give th its community of licens on which your cable s' Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serve Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	CC rules, regular here in space only on a substand also in spatioformation concurred. The second of	ations, or auth G—but do list titute basis. Ince I, if the state erning substit sign. Do not read a station accepted as the station accepted as the station. In a station accepted as the station. In a station accepted as the station. In a station accepted as the station are station. In a station accepted as the station are station. In a station are basis because the station are basis because the station are station are station are station. In a station are station. For a station are station. For a station are station.	orizations: it in space I (the tion was carried ute basis station eport origination cording to its own be reported in coas assigned to fannel 4 in Wash ation is a netwoetwork), "N-M" (for educational), or egeneral instructive area, (i.e. "cogeneral instructive, you must cordinate of lack of a sam that is not some 30, 2009, be essociation repression of the general in trus. Stations, I of the general in trus.	e Special Statemer by the spec	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ering "LAC" if your cable system	Television
Note: If you are utilizing	ng multiple char		use a separate :		cnannei iine-up.	_
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	_	 			ļ	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name
MASSILLON CA	ABLE TV IN	С			7819	Nume
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
PRIMARY TRANSMITTE In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement	ers: TELEVISIC G, identify even system during the cons in effect or 6.61(e)(2) and (sis, as explaine stations: With I CC rules, regula here in space only on a subs and also in spa formation conc rm. h station's call associated with -2". Simulcast e channel numb ise. For example stem carried the in each case w entering the le cast), "E" (for ne east), "E" (for ne east) is eater a see pa ave entered "Y in ed distant static ion on a part-tir ion of a distant entered into or	y television state accounting a June 24, 1984, or 76.63 (rad in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state ring substitions on the a station account of the station. Whether the state on commercial page (v) of the the local servers age (v) of the the local servers are before Julians at the local servers and the local servers are the local servers and the local servers are the local servers and the local servers are the local servers are the local servers are the local servers and the local servers are the local	period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: to the station was carried ute basis station eport origination coording to its own be reported in common as assigned to stannel 4 in Wash attion is a network), "N-M" ("I educational), or ageneral instructive area, (i.e. "Cogeneral instructive, you must corraccounting period assem that is not sine 30, 2009, be	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your content of the carried column and the carried	and low power television stations) Id only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The paper SA3 form. The paper SA3 form is stating the basis on which your tering "LAC" if your cable system to apacity. The paper security is the subject term or an association representing	G Primary Transmitters: Television
the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the	a primary trans simulcasts, also tree categories e location of ea Canadian statio	mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give	ssociation repre you carried the of the general in Tu.S. stations, the the name of the	senting the primar channel on any ot nstructions locate list the community ne community with	ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. v to which the station is licensed by the u which the station is identifed.	
		CHANN	EL LINE-UP	AF		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
MASSILLON C	ABLE TV IN	С			7819	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cables of FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bassubstitute Basis of Substitute For Substitute Basis of Substitute For Sub	G, identify even system during to ions in effect on 6.61(e)(2) and (sis, as explaine stations: With a CC rules, regular here in space only on a substand also in spatformation concorn. The station's call associated with a c2". Simulcast e channel numbers of the sine ach case we see the	y television street accounting a June 24, 194, or 76.63 (rd d in the next) respect to any ations, or auth G—but do list titute basis. In the state of the station account of the station account of the station account of the station. Whether the station.	g period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: to the in space I (the ation was carried tute basis station report origination coording to its own be reported in or assassigned to annel 4 in Wash	(1) stations carried carriage of cert 1(e)(2) and (4))]; is carried by your one Special Statemed both on a substitute, see page (v) on program service er-the-air designate column 1 (list each the television statington, D.C. This bork station, an indicate in the carried station, an indicate carried station station.	s and low power television stations) ed only on a part-time basis under rain network programs [sections and (2) certain stations carried on a cable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi- h stream separately; for example tion for broadcasting over-the-air in may be different from the channel espendent station, or a noncommercial cast), "I" (for independent), "I-M"	G Primary Transmitters: Television
(for independent multice. For the meaning of the Column 4: If the step planation of local service Column 5: If you head to a 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	cast), "E" (for noise terms, see ation is outside ice area, see pawe entered "Yithe distant staticion on a partition of a distant tentered into o a primary trans simulcasts, also ree categories e location of ea	oncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis becamulticast stren or before Jumitter or an action enter "E". If a see page (v) ch station. Fo	I educational), of a general instructive area, (i.e. "of general instruct 4, you must con accounting period accounting period accounting period accounting that is not a seam that is no	or "E-M" (for nonce ctions located in the distant"), enter "Y- ions located in the mplete column 5, od. Indicate by en activated channel subject to a royalty etween a cable sy essenting the prima channel on any of instructions locate list the communit	ommercial educational multicast). he paper SA3 form. es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your ttering "LAC" if your cable system	
Note: If you are utilizing	ng multiple char		·	•	channel line-up.	
	T	CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
						
						
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FORM SA3E. PAGE 3.	UED OF OARL F O	(OTEN			SYSTEM ID#	<u> </u>
LEGAL NAME OF OWN						Name
					7010	<u>'</u>
carried by your cable : FCC rules and regular 76.59(d)(2) and (4), 70 substitute program ba Substitute Basis ! basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fc Column 1: List each each multicast stream cast stream as "WETA- WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the si planation of local serv Column 5: If you cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	ERS: TELEVISION G, identify ever system during to tions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular on here in space only on a substand also in spanformation concorm. Ch station's call associated with A-2". Simulcast e channel numbers of the control of	y television state accounting an June 24, 19, 4), or 76.63 (and in the next respect to any ations, or auth G—but do list itute basis. ace I, if the state arming substitute basis ace I, if the station ac streams must be attention and the station. Whether the station. Whether the station apage (v) of the the local semantage (v) of the the local semantage (v) of the estitute arministration and account and account and account arministration or before Jumitter or an account arministration. For one, if any, given a station.	g period, except g period, except 81, permitting the referring to 76.6 paragraph. It is shown that it in space I (the ation was carried tute basis station report origination cording to its own to be reported in the assigned to annel 4 in Wash tation is a network etwork), "N-M" (If educational), the egeneral instructive area, (i.e. "or general instructi	(1) stations carried the carriage of certain (e) (2) and (4))]; as a carried by your content of the Special Statement of the	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. If payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further and in the paper SA3 form. If to which the station is licensed by the name which the station is identified.	G Primary Transmitters: Television
		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	

LECAL NAME OF OWN	IED OF CARLE C	ZOTEM:			SYSTEMII	1 #
MASSILLON CA		_			78′	Namo
PRIMARY TRANSMITTE	RS: TELEVISION	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during to lons in effect of 5.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrience carriage of cert 1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television
basis under specifc FC • Do not list the station station was carried	CC rules, regula here in space only on a subs	ations, or auth G—but do lis titute basis.	norizations: t it in space I (th	e Special Statem	ent and Program Log)—if the	
basis. For further in in the paper SA3 fo	formation cond	erning substit	tute basis statio	ns, see page (v) o	tute basis and also on some other if the general instructions located s such as HBO, ESPN, etc. Identify	
each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	associated wit -2". Simulcast channel numl	h a station ac streams must ber the FCC h	cording to its ov t be reported in on the assigned to	er-the-air designa column 1 (list eac the television stat	tion. For example, report multi- h stream separately; for example ion for broadcasting over-the-air in may be different from the channel	
	in each case v	whether the st			ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
(for independent multion for the meaning of the	cast), "E" (for n ese terms, see	oncommercia page (v) of the	l educational), c e general instru	or "E-M" (for nonce ctions located in t	ommercial educational multicast).	
planation of local servi Column 5: If you have cable system carried the carried the distant stati	ce area, see pa ave entered "Y ne distant station ion on a part-ti	age (v) of the es" in column on during the me basis beca	general instruct 4, you must cor accounting perion ause of lack of a	ions located in the mplete column 5, od. Indicate by en activated channel	e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the	a primary trans simulcasts, also tree categories e location of ea	mitter or an a o enter "E". If , see page (v ch station. Fo	ssociation repre you carried the) of the general or U.S. stations,	senting the prima channel on any o instructions locate list the community	stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further and in the paper SA3 form. If to which the station is licensed by the an which the station is identifed.	
Note: If you are utilizing	g multiple cha	• •	use a separate	•	channel line-up.	_
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	l					

LEGAL NAME OF OWN	JER OF CARLES	YSTEM:			SYSTEM ID#		
MASSILLON C					7819	Name	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast). "E" (for noncommercial educational), or "E-M" (for network, "N-M" (for network multicast), "I" (for ind							
For the retransmiss	ion of a distant	multicast stre	eam that is not s	ubject to a royalty	payment because it is the subject		
the cable system and	a primary trans	mitter or an a	ssociation repre	senting the primar	ry transmitter, enter the designa-		
explanation of these th	ree categories	, see page (v	of the general i	instructions locate	her basis, enter "O." For a further d in the paper SA3 form.		
				•	to which the station is licensed by the which the station is identifed.		
Note: If you are utilizing	ng multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.		
	1	CHANN	EL LINE-UP	AJ			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					21/2=====	
LEGAL NAME OF OWN					SYSTEM ID#	Name
MASSILLON C					7819	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during the consistence of	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc F0				carried by your c	able system on a substitute program	Television
station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA- WETA-simulcast).	only on a subs and also in spa iformation cond orm. ch station's call associated with A-2". Simulcast	titute basis. ace I, if the sta erning substit sign. Do not r h a station acc streams must	ation was carried the basis station eport origination cording to its over be reported in o	I both on a substit ns, see page (v) o n program service er-the-air designa column 1 (list each	ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multinatream separately; for example on for broadcasting over-the-air in	
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educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried to carried the distant state For the retransmiss of a written agreementhe cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	e in each case we rentering the le cast), "E" (for no ese terms, see lation is outside ice area, see parave entered "Yohe distant staticion on a part-tiristion of a distant tentered into or a primary transsimulcasts, also ree categories e location of ea Canadian statio	whether the stater "N" (for no concommercial page (v) of the the local servage (v) of the es" in column on during the concommercial state or or before Jumitter or an accommerce of the concommerce of the	etwork), "N-M" (I l educational), o e general instruc- vice area, (i.e. "o general instructi 4, you must cor accounting perio ause of lack of a eam that is not s one 30, 2009, be ssociation repre- you carried the of the general in r U.S. stations, lee the name of the	for network multic r "E-M" (for noncotions located in the distant"), enter "Ye ons located in the mplete column 5, sod. Indicate by entoctivated channel of ubject to a royalty tween a cable syssenting the primarchannel on any of instructions locate list the community with	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your dering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the which the station is identifed.	
,		CHANN	EL LINE-UP	Λ <i>K</i>	·	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURM SA3E. PAGE 3.					evetem in	4
MASSILLON CA					SYSTEM IC 781	Namo
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the constant of	he accounting n June 24, 19 4), or 76.63 (i d in the next	period, except 81, permitting the eferring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these th Column 6: Give the	CC rules, regular here in space only on a subs and also in spatformation concurr. The station's call associated with a channel number of the station's call associated with a channel number of the station of the station is outsided to the channel number of the station is outsided to the channel number of the station is outsided to the channel number of the channel number of the station is outsided to the channel number of the channel number of the station is outsided to the channel number of the number o	ations, or auth G—but do listitute basis. ace I, if the staterning substitute basis. It is in a station ace streams must be the FCC has whether the station. Whether the station acrommercial page (v) of the local service in column on during the me basis becard multicast stream or before Jumitter or an acceptage (v) ch station. For see page (v) ch station.	orizations: It it in space I (the ation was carried to the basis station report origination or be reported in the carried as assigned to the properties of the carried as assigned to the carried as assigned to the carried as assigned to the carried as a network), "N-M" (the ducational), one general instructive area, (i.e. "or general instructive area, (i.e. "or general instruction of the carried the carried as a network), and the carried the carried the carried the carried the carried as a network of the general in the carried as a carried the carried as a carried the carried as a carried	de Special Statement of both on a substitute, see page (v) or a program service er-the-air designal column 1 (list each the television statington, D.C. This limit of the television statington, D.C. This limit of the television, an indefor network multicular "E-M" (for noncoctions located in the inplete column 5, so do. Indicate by entitivated channel of subject to a royalty stween a cable system of the primary channel on any of instructions locate list the community with	ent and Program Log)—if the ute basis and also on some other if the general instructions located is such as HBO, ESPN, etc. Identify ition. For example, report multi- in stream separately; for example on for broadcasting over-the-air in imay be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your fering "LAC" if your cable system capacity. The paper SA3 form. The	
Note: If you are dillizati	ig manipic chai		EL LINE-UP	<u>'</u>	спапнет ште-ир.	_
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	

LEGAL NAME OF OWN	JER OF CARLES	YSTEM:			SYSTEM ID#	
MASSILLON C					7819	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fc Column 1: List each multicast stream cast stream as "WETA weta-simulcast). Column 2: Give the its community of licenon which your cable sy Column 3: Indicate educational station, by (for independent multi-For the meaning of the Column 4: If the st planation of local servi-	G, identify ever system during to ions in effect or ions in effect or ions. On the control of th	y television st he accounting n June 24, 19 4), or 76.63 (red) do in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the sta terning substiff sign. Do not re he a station ac streams must ber the FCC he e, WRC is Che he station. whether the state tetter "N" (for noncommercia page (v) of the tage (v) of the	g period, except 81, permitting the referring to 76.6 paragraph. A distant stations for izations: to the station was carried to the basis station report origination cording to its own the period of the station is a network attain is a network station in the station is a network of	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the carried column 1 (list each of the carried column 1 (list each of the carried column 1). This work station, an indefer network multic or "E-M" (for noncontext of the carried column 1), enter "Yesions located in the carried carried column 1), enter "Yesions located in the carried	es". If not, enter "No". For an ex-	Primary Transmitters: Television
	he distant statio	on during the	accounting perio	od. Indicate by ent	tering "LAC" if your cable system	
For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or 0.	sion of a distant tentered into o a primary trans simulcasts, also ree categories e location of ea Canadian static	multicast streen or before Jumitter or an a one enter "E". If see page (v) ch station. For one, if any, given	earn that is not so ine 30, 2009, be association repre you carried the of the general in or U.S. stations, e the name of the	subject to a royalty stween a cable system as the primal channel on any of instructions locate list the community are community with	r payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. If to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.	
	T	CHANN	EL LINE-UP	AM		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					01/0==11.15#	T
LEGAL NAME OF OWN					SYSTEM ID#	Name
MASSILLON C					7819	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the consistency of	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
Substitute Basis States basis under specific FC				carried by your c	able system on a substitute program	Television
Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for	n here in space only on a subs and also in spa offormation cond orm.	G—but do list titute basis. ace I, if the sta erning substit	t it in space I (thation was carried tute basis station	both on a substit	ute basis and also on some other fthe general instructions located	
each multicast stream	associated with	h a station acc	cording to its over	er-the-air designa	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example	
			•		on for broadcasting over-the-air in may be different from the channel	
on which your cable sy	ystem carried th	ne station.			ependent station, or a noncommercial	
(for independent multi- For the meaning of the Column 4: If the st planation of local servi	cast), "E" (for neese terms, see ation is outside ice area, see pa	oncommercial page (v) of the the local serv age (v) of the	l educational), o e general instruc rice area, (i.e. "d general instructi	r "E-M" (for nonco ctions located in th listant"), enter "Ye lons located in the	s". If not, enter "No". For an ex-	
cable system carried to 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	he distant staticion on a part-tiricion of a distant tentered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	on during the ame basis became basis became multicast streen or before Jumitter or an amount enter "E". If a see page (v) ch station. Fo	accounting period ause of lack of a cam that is not some 30, 2009, be association represous carried the of the general in a turn of the country of the general in the country of the name of the same same same same same same same sam	od. Indicate by ent ctivated channel of ubject to a royalty tween a cable sys- senting the primal channel on any of nstructions locate list the community with	tering "LAC" if your cable system capacity. If payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. If to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AN		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
						

FURINI SAJE. PAGE 3.					OVOTI	- NA 1154	
MASSILLON C					51511	EM ID# 7819	Name
PRIMARY TRANSMITT	ERS: TELEVISION	ON					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during t tions in effect of 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a		Primary Transmitters:
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURM SA3E. PAGE 3.					OVOTI	- NA 104	
MASSILLON C					21211	EM ID# 7819	Name
PRIMARY TRANSMITT	ERS: TELEVISION	ON					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during t ions in effect of 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a		Primary Transmitters:
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURM SAJE. PAGE 3.	.== 0= 0.15. = 0.				evetem in	4
MASSILLON C					SYSTEM ID: 7819	Namo
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the constant of	he accounting n June 24, 19 (4), or 76.63 (t ed in the next	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
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Note: If you are utilizing	ig multiple chai	•	EL LINE-UP		спаппетше-ир.	-
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	_ _

FORM SA3E. PAGE 3.					0/07514 15 //	
MASSILLON CA					SYSTEM ID# 7819	Name
					7019	
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational process of the station is concommercial educational, or "E-M" (for noncommercial educ						
Note. If you are utilizing	ig multiple chai		EL LINE-UP		channer 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	

FURM SAJE. PAGE 3.					OVOT	ENA ID#	
MASSILLON CA					5151	7819	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program base	system during the constant of	he accounting n June 24, 19 4), or 76.63 (i d in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a		Primary Transmitters:
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURM SAJE. PAGE 3.					CVCT	-M 1D#	
MASSILLON CA					51511	EM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during to ons in effect or 5.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a		Primary Transmitters:
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURM SAJE. PAGE 3.					0)/07	=== := "	
MASSILLON CA					5151	7819	Name
PRIMARY TRANSMITTE	RS: TELEVISION	ON .					
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during to lons in effect of 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	m	Primary Transmitters: Television
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Note: If you are utilizing	ig multiple chai	•	EL LINE-UP	•	спаппетше-ир.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURINI SAJE. PAGE 3.					OVOTI	-84 104	
MASSILLON C					51511	EM ID# 7819	Name
PRIMARY TRANSMITT	ERS: TELEVISION	ON					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during t tions in effect of 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 (4), or 76.63 (i ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a		Primary Transmitters:
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.										
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name				
MASSILLON CA	ABLE TV IN	С			7819	Nume				
PRIMARY TRANSMITTERS: TELEVISION										
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)). The carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "" (for independent), "I-M" (f										
Note: If you are utilizing	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.					
		CHANN	EL LINE-UP	AW						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION					

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 7819 **MASSILLON CABLE TV INC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION **WQKT** FΜ **WOOSTER OH**

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2019/
LEGAL NAME OF OWNER OF MASSILLON CABLE T		ГЕМ:				S	YSTEM ID# 7819	Name
		LOTATEMEN	IT AND DOCDAM LOC				7013	
SUBSTITUTE CARRIAGI	E: SPECIA	T 2141EMEN	II AND PROGRAM LOG					1
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or autho	rizations. F	or a further	Substitute
1. SPECIAL STATEMEN								Carriage:
 During the accounting per broadcast by a distant sta 		ır cable system	carry, on a substitute basis	s, any nonnet			⊠No	Special Statement and Program Log
Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUTE			ge blank. If your answer is "	Yes," you mu	ıst complete th	ne program	1	
In General: List each subs clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gir Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please a of every no distant state gulations, oution. Do no Lucy" or "NE m was broad addeast stationation and day we "5/7." es when the Example: a er "R" if the and regulation or gramming	am on a separa attach additional network televition and that your authorization at use general cast live, entertation broadcast live, entertation broadcast live, if any, the when your systems as program carriested program carriested program ons in effect du	al pages. ision program (substitute piur cable system substitute piur cable system substitute piur cable system substitute piur cable system substitute piur categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "N isting the substitute programe community to which the community with which the stem carried the substitute piur piur value piur val	rogram) that, of for the program instruction "basketball". o." m. station is licerestation is identrogram. Use table system. 5 p.m. to 6:2 mming that year enter the lettunder FCC reference.	during the accramming of ar ins located in the List specific purished by the Footified). The specific purished by the Footified purished by the Footified purished by the Footified purished by the Footified purished by the Eight purished by the footing purished by the f	counting nother stati he paper program CC or, in h the mont accurately uld be as required sted proations in	h ⁄	
S	SUBSTITUT	E PROGRAM			EN SUBSTITU IAGE OCCUF	RRED	7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIM FROM —	IES TO	DELETION	
					<u> </u>			
					_			
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					_			

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

MASSILLON CABLE TV INC

SYSTEM ID#
7819

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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

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

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

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

				7 12 . 10 0 . 10 0	F PART-TIME CAP	T T				
CALL SIGN	WHEN CARRIAGE OCCURRED HOURS				CALL SIGN	WHEN CARRIAGE OCCURRED HOURS				
	DATE	FROM	OUR	TO		DATE			TO	
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			_					_		
			_					_		
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	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID	#				
	ASSILLON CABLE TV INC			781	Mama				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)									
during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. \$ 2,265,247.36 (Amount of gross receipts)									
• Cor • Cor • If your fee • If you	YRIGHT ROYALTY FEE uctions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. bur 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. bur system did carry any distant television stations, you must complete the applicable par ompanying this form and attach the schedule to your statement of account.				L Copyright Royalty Fee				
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ck 3 below.	e enter	ed on line	e 1 of					
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered	on line 2	2 in block					
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be	entered c	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 fe system's gross receipts for the accounting period. 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.								
	This is your minimum fee.	\$		24,102.23					
2 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colun "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. X No—Leave block 3 below blank and one of the property o	nn 4, yo	ou must c	heck					
Block	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		\$						
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	\$		_					
		<u> </u>							
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		\$	24,102.23	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, enter	r		0.00	submitting additional deposits under				
	zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)								
	Line 4. FILING FEE.		\$	725.00	should contact the Licensing additional fees.				
				0.00	Division for the appropriate				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here								
	EFT Trace # or TRANSACTION ID #								
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to								

Mana	LEGAL NAME OF OWNER	R OF CABLE S	YSTEM:	SYSTEM ID#
Name	MASSILLON CAL	BLE TV II	NC	7819
M Channels		_	(1) the number of channels on which the cable system carried television broadcas cable system's total number of activated channels, during the accounting period.	et stations
	1. Enter the total no	umber of c	hannels on which the cable	9
	system carried te	levision br	oadcast stations	
	2. Enter the total no	umbor of a	ctivated channels	
			carried television broadcast stations	
		-		94
N Individual to Be Contacted			CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual tement of account.)	
for Further	Name KATH	ERINE (GESSNER Telephone	330-833-5509
Information				
	Address 814 C	ABLE C	T NW PO BOX 1000	
	(Number,	street, rural i	oute, apartment, or suite number)	
		ILLON , state, zip)	OH 44648-1000	
	(Oity, town	i, state, zip)		
	Email		Fax (optional)	
	CERTIFICATION (T	his statem	ent of account must be certifed and signed in accordance with Copyright Office re	gulations.
0	,			·
Certifcation	• I, the undersigned,	hereby ce	tify that (Check one, but only one, of the boxes.)	
	(Owner other th	an corpor	ation or partnership) I am the owner of the cable system as identifed in line 1 of space	e B; or
			n corporation or partnership) I am the duly authorized agent of the owner of the cabl that the owner is not a corporation or partnership; or	le system as identified
				ar of the coldens
	in line 1 of sp		n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as o	owner of the cable system
	• I have examined th	o statomo	nt of account and hereby declare under penalty of law that all statements of fact contain	nod horoin
			to the best of my knowledge, information, and belief, and are made in good faith.	ned nerelli
	[18 U.S.C., Section	1001(1986)]	
		V	/S/ KATHERINE GESSNER	
		<u>X</u>	75/ KATHERINE GESSNER	
		(e.g., /s/	electronic signature on the line above using an "/s/" signature to certify this statement. John Smith). Before entering the first forward slash of the /s/ signature, place your curso ton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotu	
		Typod	or printed name: KATHERINE GESSNER	
		гуреа	or printed harne: NATHERINE GESSNER	
		Title:	PRESIDENT	
			(Title of official position held in corporation or partnership)	
		Dat	August 22, 2010	
		⊔ate:	August 23, 2019	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 781	Namo
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filling.	
Owner Address	
First community served Accounting period ID number	

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

ACCOUNTING PERIOD: 2019/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

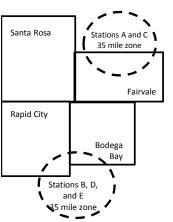
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		40,0000			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

ACCOUNTING PERIOD: 2019/1

1	LEGAL NAME OF OWNER OF CABL				S	STEM ID#						
	MASSILLON CABLE TV					7819						
	SUM OF DSEs OF CATEGOR											
	Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. 0.00											
	Litter the sum here and in line	TOT PART 5 OF TH	is soliedule.		0.00							
2	Instructions:	Diamette liet the en		. :	le a latte a #O" in a alcuna F							
_	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).											
Computation	In the column headed "DSE"	: for each indep	endent station, give the DSI	≣ as "1.0"; for	each network or noncom-							
of DSEs for	mercial educational station, give	e the DSE as ".	25." CATEGORY "O" STATION									
Category "O"		.	·									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as												
necessary.												
Remember to copy												
all formula into new												
rows.												
1												
1												
1												
1												
1												
						<u> </u>						

Name		OWNER OF CABLE SYSTEM: CABLE TV INC					S	7819				
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.											
Capacity		C	CATEGORY	LAC STATIONS	: COMPUTAT	ION OF DSEs						
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIA VALUE	F 5. TYP		3E				
			÷		=	x	=					
			÷ -		=		<u>=</u>					
			÷		<u> </u>	x	=					
			÷		=	x	=					
					=	x	<u>=</u>					
			÷		=	x x	=					
	Add the DSEs	of CATEGORY LAC Sof each station. Im here and in line 2 of p		chedule,		0.0	00					
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations are space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each st. I by your system in subst. I to n October 19, 1976 (one or more live, nonnetw. For each station give the This figure should corrected the number of days. Divide the figure in colunt This is the station's DSE.	itution for a pricas shown by to ork programs of number of living spond with the sin the calendary (For more informare).	rogram that your syste the letter "P" in column during that optional care, nonnetwork prograe information in space dar year: 365, except i ure in column 3, and cormation on rounding,	m was permitted in 7 of space I); arriage (as shown b ms carried in sub I. in a leap year, give the result in casee page (viii) of	to delete under FCC rund y the word "Yes" in colum stitution for programs the column 4. Round to no I the general instructions	les and regular- nn 2 of nat were deleted ess than the third	orm).				
				-BASIS STATION								
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE				
		4		=			÷	=				
			•	=			÷	=				
		-		=			÷	=				
		-		=			÷					
	Add the DSEs	OF SUBSTITUTE-BAS of each station. Im here and in line 3 of p			▶	0.0	00	-				
5 Total Number of DSEs	number of DSEs 1. Number o 2. Number o 3. Number o	ER OF DSEs: Give the ams applicable to your system f DSEs from part 2 of DSEs from part 3 of DSEs from part 4 of DSEs from part 4 of DSEs from part 4 of DSEs PSEs		e boxes in parts 2, 3, ar	d 4 of this schedu	lle and add them to provi	0.00 0.00 0.00	0.00				
	TOTAL NUMBE	IN OF DOES						0.00				

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

LEGAL NAME OF C	OWNER OF CABLE	SYSTEM:					S'	YSTEM ID#	N 1
MASSILLON C	CABLE TV INC							7819	Name
Instructions: Bloc	ck A must be com	pleted.							
 If your answer if 	"Yes," leave the re	emainder of p	part 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
schedule. • If your answer if	"No," complete blo	ocks B and C	below.						
				ELEVISION M					Computation of 3.75 Fee
Is the cable syster effect on June 24, Yes—Com			•					gulations in	
X No—Comp	olete blocks B and	C below.							
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations and regulations	ons prior to Ju dule. (Note: Tl	part 2, 3, and 4 o ne 25, 1981. For fo ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric	ules and regued pursuant for as defined all educations	llations cited boto the FCC maddin 76.5(kk) (7all station [76.5	usis on which you of elow pertain to the rket quota rules [7 (6.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding su	ose in effect of 76.57, 76.59(b (e)(1), 76.63(a 63(a) referrin	n June 24, 198 o), 76.61(b)(c), a) referring to 7 g to 76.61(d)	76.63(a) referring 6.61(e)(1	j tc	
	•	ant to individ viously carrie JHF station v	ual waiver of Fed on a part-ting within grade-B	ne or substitute ba contour, [76.59(d)(•		erring to 76.61(e)	(5)	
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule				-	
Line 2: Enter the	e sum of permitte	ed DSEs fro	m block B ab	ove			r		
Line 3: Subtract (If zero, I	line 2 from line 1 leave lines 4–7 b			,		rate.		0.00	
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	line 4 by 0.0375	and enter s	um here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				X	<u>-</u>	carriage? If yes, see part 9 instructions.
Line 7: Multiply li	line 6 by line 5 ar	nd enter her	e and on line	2 block 3 spac	e I (page 7)			0.00	

		CABLE TV INC						31	7819	NI a saa a
SIGN BASIS Computation of 3.75 Fee and the state of the s			BLOCK	A: TELEVIS	ION MARKET	S (CONTIN	UED)			_
Computation of 3.75 Fee	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			3. DSE			3. DSE	6
						l				
						<u> </u>				
						ļ				
						<u> </u>				

Name		FAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819												
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fr A—Part-time sp 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Comparin block	or to June 25, call sign for eather DSE for the DSE for the accounting the basis of CC rules and ecialty programming: (e)(3)). Carriage under all instructions the station's I e the DSE figure 1, column 3 of the information years.	1981, under form ach distant station his station for a sing period and year carriage on which tregulations cited home. (I) (1), or 76.63 (reficulty carriage under FC certain FCC rules in the paper SA3 DSE for the currer ures listed in columof part 6 for this stou give in columns	er FCC rules govidentifed by the ngle accounting in which the car the station was coon a part-time bearing to 76.61(e) C rules, section, regulations, or form. It accounting permits a government of and 5 and ation.	ver let pe rria aritho as)(1 s 7 au	entifed by the letter "F" rning part-time and subtter "F" in column 2 of priod, occurring between and DSE occurred ried by listing one of the ose in effect on June 24 is, of specialty program (a). 76.59(d)(3), 76.61(e)(3), thorizations. For further das computed in parts at the smaller of the two one accurate and is subject to the subject of the smaller of the two one accurate and is subject to the smaller of the smaller of the subject to the smaller of the smaller o	estitute carricant 6 of the n January 1 (e.g., 1981/e following 4, 1981. and under carricant carries and carries and the carries and the figures here are the carries and the carries and the figures here are the carries and the carries are	age. DSE schedule, 1978 and Jun 1) letters r FCC rules, se referring to on, see page (v of this schedule, This figure	ections vi) of the should be	981 se enterei				
		PERMITT	ED DSE FOR ST	ATIONS CARRI	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS						
	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERM SIGN DSE PERIOD CARRIAGE DSE DSE													
				_				-						
					•••••									
					•••••									
7 Computation of the	,	"Yes," comple	ete blocks B and (,	· pa	art 8 of the DSE sched	ule.							
Syndicated			BLOC	K A: MAJOR	T	ELEVISION MARK	ET							
Exclusivity										10010				
Surcharge	l <u> </u>	•	•	jor television mai	ке	t as defned by section 7		ruies in ettect J	une 24,	1981?				
	X Yes—Complete	blocks B and	1C.			No—Proceed to	part 8							
	BLOCK B: Ca	arriage of VHI	F/Grade B Contou	r Stations	_	BLOCK	C: Compu	tation of Exem	pt DSEs	3				
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p							
	Yes—List each s		th its appropriate pe part 8.	ermitted DSE		Yes—List each st No—Enter zero a			ate permi	tted DSE				
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE				
			-				ļ							
							 							
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00				

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC	SYSTEM ID# 7819	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,265,247.36	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? \(\text{\text{Y}} \) No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	F	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.	E	
	A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name			SYSTEM ID#
		MASSILLON CABLE TV INC	7819
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in	
		section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge. \$\Bigsim \frac{1}{2} \\	<u></u> .
		ctions: nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of par	rt
8		checked "Yes," use the total number of DSEs from part 5.	·
Computation		ock 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.	
of	-	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo	w
Base Rate Fee	blank What i	c. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	I
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	your cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$ 2,265,247.3	<u>6</u>
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	00_
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 15,879.38	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	_
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7) Base Rate Fee	_
		Base Kate Fee	<u></u> !-

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/1

	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 7819	Name
MAGG	NEEDN GABLE IV ING	7010	
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1) * *** *** *** *** *** *** ***		8
	B. Enter 0.00701 of gross receipts	_	Computation
	(the amount in section 1) \$		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here	_	
	D. Enter 0.00330 of gross receipts (the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here >		
	G. Add lines A, C, and F. This is your base rate fee.		
	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 broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channed.	•	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:	dvantage of this	of
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to	o the same	Base Rate Fee and
station DSEs a	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in purpose a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.	, ,	Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant stat to that community.	ion you	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compu	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system.	tem's subscriber	
-	section:		
• Give t	fy the communities/areas represented by each subscriber group. he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.	of the	
• lf:			
and 4 c	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in fithis schedule; or,		
	oortion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	IOCK B,	
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	nstructions	
page. DSEs f	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the in making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	at is, the total	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 7819 **MASSILLON CABLE TV INC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

SLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP O O O O O O O O O	LEGAL NAME OF OWNE						S	YSTEM ID# 7819	Name
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA WOOSTER CALL SIGN DSE CALL SIG								1019	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE and Syndicated of Pase Rate Fee First Group See Rate Fee Third Group See CALL SIGN DSE	В				TE FEES FOR EAC			LID	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee Second Group \$ 0.00 THIRD SUBSCRIBER GROUP THIRD SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Gross Receipts First Group \$ 0.00 THIRD SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Gross Receipts First Group \$ 0.00 THIRD SUBSCRIBER GROUP TOTAL DSES CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Gross Receipts First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRD SUBSCRIBER GROUP TOTAL DSES CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Gross Receipts Third Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Gross Receipts Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	COMMUNITY/ADEA			אר	COMMUNITY/ ADD		9		
CALL SIGN	COMMUNITY AREA	WOOS	IEK		COMMUNITY ARE	_			
Base Rate Fee Second Group \$ 0.00 THIRD SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE COMMUNITY AREA D COMMUNITY	CALL SIGN	CALL SIGN DSE CALL SIGN DS			CALL SIGN	DSE	CALL SIGN	DSE	
Syndicated Exclusivity Surcharge for Partially Distant Stations Total DSEs									
Exclusivity Surcharge for Partially Distant Stations Total DSEs 0.00 Gross Receipts First Group \$ 2,265,247.36 Gross Receipts First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SI									and
Surcharge for partially Distant Stations Total DSEs									Syndicated
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Total DSEs Stross Receipts First Group Source Receipts Found Group FOURTH SUBSCRIBER GROUP COMMUNITY AREA OCALL SIGN DSE CALL SIGN									Surcharge
Distant Stations Control Contro									
Stations Statio									
Total DSES O.00 Gross Receipts First Group Total DSES O.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CAL		<u></u>							
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									Stations
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
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Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN									
Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE DIVIDANCE DIVIDAN	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE DIVIDANCE DIVIDAN	Gross Pacaints First G	roup	\$ 2.265	247 36	Gross Pacaints Sag	cond Group	¢	0.00	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA	Gross Receipts First C	поир	\$ 2,200	,247.30	Gloss Receipts Sec	John Group	.	0.00	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA									
COMMUNITY/ AREA O CALL SIGN D SE C	Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN		THIRD	SUBSCRIBER GROU	JP		FOURTH	H SUBSCRIBER GRO	UP	
Total DSEs	COMMUNITY/ AREA				COMMUNITY/ ARE			_	
Total DSEs						***************************************			
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.					-	······			
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.		<u> </u>		<u> </u>					
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.		<u></u>		<u> </u>					
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	,	•				· r			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	_	_						_	
	Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
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	Daniel Date Eller 1999			alla a .					
				riber group	as snown in the boxe	s above.	\$	0.00	

MASSILLON CABLE TV I	BLE SYSTEM: NC				S	YSTEM ID# 7819	Name
			TE FEES FOR EAC				
	H SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	_			
CALL SIGN DSE	ALL SIGN DSE CALL SIGN DSE			DSE	CALL SIGN	Computation of	
							Base Rate Fo
							and
							Syndicated
					-		Exclusivity
							Surcharge
							for Partially
							Distant
							Stations
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVENT	H SUBSCRIBER GRO	DUP		EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		0.00	Total DSEs	•		0.00	
Gross Pacainte Third Crous	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third Group							

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819										
BL	OCK A: 0	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP				
	NINTH	SUBSCRIBER GRO	UP			SUBSCRIBER GROU	JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation					
CALL SIGN	ALL SIGN DSE CALL SIGN DSE			CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
	•	-						Syndicated		
	.			-				Exclusivity		
			<u></u>			-		Surcharge for		
	•	-						Partially		
								Distant		
								Stations		
		-				-				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
	EVENTH	SUBSCRIBER GRO				SUBSCRIBER GROU				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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Total DSEs	l I	l	0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	e fees for each subs	criber group	as shown in the boxe	s above.	\$				

LEGAL NAME OF OWNER OF OME OF OWNER OWNER OF OWNER OF OWNER OF OWNER OWNER OF OWNER	/ INC					7819	
	A: COMPUTATION (
	NTH SUBSCRIBER GR		II		SUBSCRIBER GROU		
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSI		DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-				
otal DSEs		0.00	Total DSEs	•		0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
	<u></u>				<u>*</u>		
							
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FIFTEEN	\$ NTH SUBSCRIBER GR	OUP	Base Rate Fee Seco	SIXTEENTH	\$ I SUBSCRIBER GROU		
FIFTEEN			Base Rate Fee Seco	SIXTEENTH			
FIFTEEN	NTH SUBSCRIBER GR	OUP	Base Rate Fee Seco	SIXTEENTH		JP	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN OMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN OMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
FIFTEEN COMMUNITY/ AREA	NTH SUBSCRIBER GR	OUP 0	Base Rate Fee Seco	SIXTEENTH	I SUBSCRIBER GROU	JP 0	
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COMMUNITY/ AREA	E CALL SIGN	OUP DSE O.00	Base Rate Fee Second COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE O.000	

EGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819										
				ATE FEES FOR EAC						
SEV COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	JP 0	9		
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							<u></u>	Base Rate Fee		
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Total DSEs	•		0.00	Total DSEs	•		0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
	•				•					
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
		SUBSCRIBER GRO		iii .		SUBSCRIBER GROU				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$				

LEGAL NAME OF OWN						S	YSTEM ID# 7819	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
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		-						for
								Partially
								Distant
								Stations
			····			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWE	NTY-THIRD	SUBSCRIBER GRO	UP	TWEN	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	o as shown in the boxes	s above.	\$		

•	7819						ER OF CABL	MASSILLON CAB
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (BI
9		SUBSCRIBER GROU	NTY-SIXTH	tt -		SUBSCRIBER GRO	TY-FIFTH	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and		-						
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Exclusiv Surcharg						-		
for								
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_	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Secor	0.00	\$	roup	Gross Receipts First G
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	JP	SUBSCRIBER GROU	Y-EIGHTH	TWENT	UP	SUBSCRIBER GRO	SEVENTH	TWENTY-S
	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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	ABLE SYSTEM: INC					7819	Nar
	A: COMPUTATION C		ATE FEES FOR EAC				
	H SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Compu
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	0
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
dase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIRTY-FIRS	ST SUBSCRIBER GRO	OUP	THIR	TY-SECONE	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs			0.00	
Fotal DSEs		0.00	Total DSEs	th Group		0.00	
Total DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	

MASSILLON CABLE TV	ABLE SYSTEM: INC				S'	7819	Name
	A: COMPUTATION C						
	RD SUBSCRIBER GRO		H		SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	Comput
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		<u></u>					Base Rat
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							Surcha
							for
							Partial Distar
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otal DSEs		0.00	Total DSEs	•	•	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
noss Neceipis i nsi Gioup	<u>4</u>		Gross Receipts Sect	ond Group	<u>*</u>		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
			!				
THIRTY-FIF	TH SUBSCRIBER GRO	OUP	Th	IIRTY-SIXTH	I SUBSCRIBER GROU	JP	
	TH SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	
			ii .		SUBSCRIBER GROU		
OMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
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	TV IN(E SYSTEM:				S	7819	Name
BLOC	K A: C	OMPUTATION O	F BASE RA	ATE FEES FOR EAG				
	ENTH S	SUBSCRIBER GRO		111		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Comput
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group		\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group		\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIRTY-N	INTH S	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			···					
otal DSEs			0.00	Total DSEs			0.00	
		S S			urth Group		-	
otal DSEs Gross Receipts Third Group)	\$	0.00	Total DSEs Gross Receipts Fou	irth Group	\$	0.00	

MASSILLON CA						S	YSTEM ID# 7819	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					•••••			Syndicated
				-	······			Exclusivity Surcharge
		-						for
								Partially
	<u></u>							Distant
								Stations
						-		
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FO	RTY-THIRD	SUBSCRIBER GRO	UP	FOR	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
		<u> </u>						
			····					
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN						S	YSTEM ID# 7819	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO				H SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIN	DOL	ONEE GIGIT	DOL	O'NEE O'O'N	DOL	O/ LEE OIOI4	DOL	Base Rate Fee
								and
								Syndicated
					<u></u>			Exclusivity
			<mark></mark>					Surcharge
								for
			 		·····			Partially Distant
								Stations
			<u></u>		<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY	'-SEVENTH	SUBSCRIBER GRO	UP	FOR	RTY-EIGHTI	H SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
								
								
		-	<u></u>					
			<mark></mark>					
	·····	[] 						
					·····			
					••••••			
Total DSEs		-	0.00	Total DSEs		-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN						S	YSTEM ID# 7819	Name
				ATE FEES FOR EAC			ID.	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		1 SUBSCRIBER GROU	0 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for Partially
	····		<u></u>					Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Oloss Receipts First	Oloup	y	0.00	Oross Neccipis occi	она Огоар	<u>*</u>	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO	0 0	 		SUBSCRIBER GROU		
COMMUNITY/ AREA			U	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			<u> </u>					
			···					
	<u></u>							
	<u></u>							
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	o as shown in the boxes	s above.	\$		

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	
COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs D.00 Total DSEs Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA D COMMUNITY/ AREA	9
CALL SIGN DSE CA	O Compu
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA	Base Ra
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA	and
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	Syndic Exclus
Gross Receipts First Group Gross Receipts Second Group Gross Receipts Second Group Base Rate Fee Second Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA GROSS Receipts Second Group FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	Surcha
Gross Receipts First Group Solution Gross Receipts Second Group Solution	for
Gross Receipts First Group Solution Gross Receipts Second Group Solution	Partia
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA	Dista Statio
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA	
Gross Receipts First Group Sinoss Receipts First Group Gross Receipts Second Group Base Rate Fee Second Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA GROSS Receipts Second Group FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	
Gross Receipts First Group Gross Receipts Second Group Gross Receipts Second Group Base Rate Fee Second Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA GROSS Receipts Second Group FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	
Gross Receipts First Group Gross Receipts Second Group Gross Receipts Second Group Base Rate Fee Second Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA GROSS Receipts Second Group FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	
Gross Receipts First Group Gross Receipts Second Group Gross Receipts Second Group Base Rate Fee Second Group FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA GROSS Receipts Second Group FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA	
Base Rate Fee First Group \$ 0.00 FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	_
FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA COMMUNITY/ AREA	<u>-</u>
OMMUNITY/ AREA O COMMUNITY/ AREA	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	<u>0</u>
otal DSEs Total DSEs 0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	- 1
	_
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	_

LEGAL NAME OF OWN MASSILLON CAE						S	YSTEM ID# 7819	Name
		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO	0 0	COMMUNITY/ADE		1 SUBSCRIBER GROU		
COMMUNITY/ AREA			U	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	o as shown in the boxe	s above.	\$		

MASSILLON CAI						S	YSTEM ID# 7819	Name
SI	IXTY-FIRST	COMPUTATION O SUBSCRIBER GRO	UP	ii e	TY-SECONI	RIBER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				-				Base Rate Fee and
								Syndicated
				-				Exclusivity
								Surcharge for
								Partially
								Distant Stations
								Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO	0 0	II		1 SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			U	COMMUNITY/ AREA	-1		U	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
T D.O.F.			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	πn Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxes	s above.	\$		

MASSILLON CABLE TV II	1C					7819
			TE FEES FOR EAC			
	SUBSCRIBER GRO		ii —		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
	<u> </u>					
	<u> </u>					
otal DSEs		0.00	Total DSEs			0.00
Fross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
SIXTY-SEVENTH	\$ SUBSCRIBER GRO	DUP	SIX	TY-EIGHTH	\$ SUBSCRIBER GROU	JP '
SIXTY-SEVENTH				TY-EIGHTH		
SIXTY-SEVENTH OMMUNITY/ AREA		DUP	SIX	TY-EIGHTH		JP '
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH OMMUNITY/ AREA	I SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	TY-EIGHTH	I SUBSCRIBER GROU	JP 0
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE	I SUBSCRIBER GRO	DUP	CALL SIGN	TY-EIGHTH	I SUBSCRIBER GROU	JP 0 DSE
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE Total DSEs	CALL SIGN	DUP DSE O.00	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE O.00
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE Total DSEs	I SUBSCRIBER GRO	DUP	CALL SIGN	DSE	I SUBSCRIBER GROU	JP 0 DSE
COMMUNITY/ AREA	CALL SIGN	DUP DSE O.00	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE th Group	SUBSCRIBER GROU	DSE O.00

LEGAL NAME OF OWNER OF CAB MASSILLON CABLE TV IN					S	7819
BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC			
	SUBSCRIBER GRO		11		I SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<mark></mark>				
		<mark></mark>		·····		
			-			
		<mark></mark>				
	-					
	-	···				
			-			
	Ц	0.00				0.00
Total DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SEVENTY-FIRST	SUBSCRIBER GRO)UP	SEVEN	TY-SECONE	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
			-	·····		
	-					
		<mark></mark>				
	H					
Fotal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00
	\$			rth Group	\$	_
Total DSEs Gross Receipts Third Group Base Rate Fee Third Group	\$			·	\$	_

	11		ATE EEEC EOD EA/				Nan
COMMUNITY/ AREA		DUP	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	11	0	SEVEN COMMUNITY/ ARE		SUBSCRIBER GROU		9
				Α		0	Compu
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Ra
							and
							Syndic
			-				Exclusi Surcha
							for
							Partia
							Dista
							Statio
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00	
	1 SUBSCRIBER GRO		111		I SUBSCRIBER GROU		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				••••••	···		
otal DSEs		0.00	Total DSEs			0.00	
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Fotal DSEs Gross Receipts Third Group	\$			rth Group	\$		

LEGAL NAME OF OWNI						S	YSTEM ID# 7819	Name
				ATE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO				1 SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		_						Syndicated
								Exclusivity Surcharge
		-	···					for
								Partially
		=						Distant
								Stations
		_						
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
			···					
			<mark></mark>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819										
				ATE FEES FOR EAC						
		SUBSCRIBER GRO				O SUBSCRIBER GROU		9		
COMMUNITY/ AREA	······································		0	COMMUNITY/ ARE	Α		0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated Exclusivity		
			····	-				Surcharge		
								for		
								Partially		
								Distant Stations		
		-	····							
								I		
								I		
			····							
Total DSEs	· ·	! !	0.00	Total DSEs			0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Cross rescipto riist	Огоир	<u>*</u>		Cross rescipts ess	ona oroap	•				
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
		SUBSCRIBER GRO				H SUBSCRIBER GROU				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		<u> </u>								
								I		
			····							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819									
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	Р	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
								Syndicated	
								Exclusivity Surcharge	
								for	
								Partially Distant	
								Stations	
						-			
Total DSEs	!	 	0.00	Total DSEs	•		0.00		
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secor	d Group	\$	0.00		
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00		
EIGHTY-S COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GROU	<u>)P</u>	EIGHT	Y-EIGHTH	SUBSCRIBER GROU	P 0		

CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819									
				ATE FEES FOR EAC					
		SUBSCRIBER GRO				H SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
			···	-				Surcharge	
								for	
								Partially	
								Distant Stations	
								Stations	
		 -							
	<u></u>								
Total DSEs		! 	0.00	Total DSEs		H	0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	and Group	\$	0.00		
Cross recorpts i list v	огоир	Ψ	0.00	Cross receipts occi	ona Oroup	<u>*</u>	0.00		
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
		SUBSCRIBER GRO		1		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u></u>						
		<u> </u>							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$			

MASSILLON CABLE T	CABLE SYSTEM: / INC					7819
	A: COMPUTATION					
	IRD SUBSCRIBER GF				SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0
CALL SIGN DS		DSE	CALL SIGN	DSE	CALL SIGN	DSE
			-			
	<i></i>					
otal DSEs		0.00	Total DSEs	•		0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
oroco recoupto r not oroup			ll cross rescripts see	ona Oroup	_	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
NINETY-FII	\$ FTH SUBSCRIBER GF	ROUP	NI	NETY-SIXTH	\$ SUBSCRIBER GROU	
NINETY-FII	<u></u>			NETY-SIXTH		
NINETY-FII	FTH SUBSCRIBER GR	ROUP	NI	NETY-SIXTH		JP '
NINETY-FII OMMUNITY/ AREA	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII OMMUNITY/ AREA	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII OMMUNITY/ AREA	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII COMMUNITY/ AREA CALL SIGN DS	FTH SUBSCRIBER GR	ROUP 0	NI COMMUNITY/ AREA	NETY-SIXTH	I SUBSCRIBER GROU	JP 0
NINETY-FII COMMUNITY/ AREA CALL SIGN DSI	FTH SUBSCRIBER GR	DSE	CALL SIGN	DSE	I SUBSCRIBER GROU	JP 0 DSE
COMMUNITY/ AREA	E CALL SIGN	DSE DSE DO	CALL SIGN CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE O.00

LEGAL NAME OF OWNI						S	YSTEM ID# 7819	Name
				ATE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO				I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			<u> </u>	-				Exclusivity
			<u> </u>					Surcharge for
						-		Partially
								Distant
		=						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GRO		†		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
Total DSEs			0.00	Total DSEs			0.00	
	0	•			H- O			
Gross Receipts Third (GIOUP	\$	0.00	Gross Receipts Four	ııı Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MASSILLON CAE						S	YSTEM ID# 7819	Name
Е	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	RED FIRST	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
			<u>-</u>					for
								Partially
								Distant
								Stations
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	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	
ONE HUNDR	ED THIRD	SUBSCRIBER GRO	UP	ONE HUNDRE	ED FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	•••••		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>-</u>					
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Total DSEs			0.00	Total DSEs	1	-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

	IC				S'	7819	Na
			TE FEES FOR EAC				
ONE HUNDRED FIFTH	SUBSCRIBER GRO		††		SUBSCRIBER GROU		ļ
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Comp
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	00,
							Base
							Sum a
			-				Synd Excl
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							Dis
		<u></u>					Sta
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED SEVENTH	SUBSCRIBER GRO	UP	ONE HUNDI	RED EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					O, LEE GIGIT	DOL	
					0,122 01014	DOL	
					O'ALL GION	BOL	
					0,1220.01	502	
					O, LL C.O.Y	502	
						502	
Fotal DSEs		0.00	Total DSEs			0.00	
	s			rth Group	\$	0.00	
Fotal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group			

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819									
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP			
ONE HUNDRE	D NINTH	SUBSCRIBER GRO	JP	ONE HUND	RED TENTH	SUBSCRIBER GROU	JP	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
		-						Syndicated	
						-		Exclusivity Surcharge	
								for	
			•		•••••			Partially	
								Distant	
								Stations	
	-				<u>.</u>				
	-								
					·····				
Total DSEs	<u> </u>		0.00	Total DSEs		-!-!	0.00		
Gross Receipts First Gr	roup	\$	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		
	EVENTH	SUBSCRIBER GRO	JP	11		SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819								Name
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED THIS	RTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED FO	URTEENTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIN	DOL	Base Rate Fee
				-		-		and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First G	roup	•	0.00	Gross Receipts Seco	and Croup	•	0.00	1
Gloss Receipts First G	Toup	\$	0.00	Gross Receipts Sect	ona Group	\$	0.00	İ
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	JP	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
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Total DSEs			0.00	Total DSEs			0.00	1
	_					_	_	l
Gross Receipts Third C	eroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	1
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819								Name
				ATE FEES FOR EAC				
ONE HUNDRED SEVI COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		1 SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	T CALL SICN	DOE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
	<u></u>							Distant
								Stations
	····	-	···					
	<u></u>							
Total DSEs		 	0.00	Total DSEs		11	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		 		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>	<u> </u>						
						-		
			<u></u>					
	<u></u>							
		-				_		
			···					
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819								Name
ONE HUNDRED TWEN			JP		TY-SECOND	IBER GROUP SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			O_	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u> </u>		-	Base Rate Fee and
		-						Syndicated
						-		Exclusivity
					<u> </u>		-	Surcharge for
		-						Partially
		-						Distant
						-		Stations
					<u></u>			
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
						-		
				-	<u></u>	-		
						-		
		-				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	า Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	า Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN MASSILLON CAI						S	YSTEM ID# 7819	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
		SUBSCRIBER GROU		H		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate I
		-						and
	·····		·····					Syndicate Exclusivit
								Surcharg
								for
								Partially
								Distant Stations
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Total DSEs		Į.	0.00	Total DSEs		H	0.00	
	•				1.0	_	-	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU	IP	ONE HUNDRED TWI	ENTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
				-				
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819							Name	
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED TWEN	NTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRE	D THIRTIETH	H SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Mana
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED THI	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIS	RTY-SECONI	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

	NC				3	YSTEM ID# 7819	Nar		
			ATE FEES FOR EAC	H SUBSCF	RIBER GROUP				
ONE HUNDRED THIRTY-THIF	D SUBSCRIBER GROU		H		SUBSCRIBER GROUP		g		
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	Compu		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Oompt		
							Base R		
							an		
							Syndi		
							Exclu		
							Surch fo		
							Parti		
							Dist		
							Stati		
otal DSEs		0.00	Total DSEs		!!	0.00			
Fross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
ONE HUNDRED THIRTY-FIFT	H SUBSCRIBER GROU	ID	ONE HUNDBED 3						
COMMUNITY/ AREA			ONE HUNDRED I	HIRTY-SIXTH	I SUBSCRIBER GROUP	BER GROUP 0			
COMMUNITY/ AREA	TI GODOGNIBEN GNOC	0	COMMUNITY/ AREA		1 SUBSCRIBER GROUP				
CALL SIGN DSE	CALL SIGN		ii -		CALL SIGN				
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
		0	COMMUNITY/ AREA	Α		0			
CALL SIGN DSE		0	COMMUNITY/ AREA	Α		0			
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE			
CALL SIGN DSE	CALL SIGN	0 DSE	CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	DSE			
	CALL SIGN	0 DSE	CALL SIGN CALL SIGN Total DSEs	DSE THE Group	CALL SIGN	DSE			

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819								Name
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED TH	RTY-EIGHTI	H SUBSCRIBER GROUP)	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-				Exclusivity
								Surcharge for
	<u></u>							Partially
	<u> </u>							Distant
								Stations
		_						
			ļ					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED THI	RTY-NINTH	SUBSCRIBER GROUP	•	ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		_	0.00	Total DSEs		-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819								Name
		COMPUTATION OF SUBSCRIBER GROUP	BASE RA	ONE HUNDRED FOR COMMUNITY/ AREA		IBER GROUP SUBSCRIBER GROUP	0	9
COMMONT IT AREA				COMMONT IT AIRLA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-				-		and
								Syndicated Exclusivity
				-				Surcharge
						-		for
	-							Partially
								Distant Stations
						-		Stations
						-		
Total DSEs	<u> </u>		0.00	Total DSEs	1	Ш	0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	d Group	\$	0.00	
Daga Bata Faa First Cr			0.00	Basa Bata Fan Canan	od Craus		0.00	
Base Rate Fee First Gr			0.00	Base Rate Fee Secon		\$	0.00	
COMMUNITY/ AREA	וז-וחוגט	SUBSCRIBER GROUP	0	COMMUNITY/ AREA	I I-FOURTH	SUBSCRIBER GROUP	0	
				CONNICION 1777 NCEX				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-							
		-						
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819							Name	
BL	OCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED F	ORTY-SIXTH	H SUBSCRIBER GROUP)	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		_						and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts First G	roun	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Gross Receipts First G	oup	4	0.00	Gross Receipts Seco	ilia Group	*	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FORTY	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHT	H SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						_		
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE MASSILLON CABL						S	7819	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRE	D FIFTIETH	SUBSCRIBER GROU	IP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						-		Exclusivity
								Surcharge for
		-			····			Partially
						-		Distant
		-						Stations
		=						
		-						
					<u>.</u>			
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	
ONE HUNDRED FIFT	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-						
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					····		····	
Total DSEs	1		0.00	Total DSEs	'		0.00	
Gross Receipts Third G	roup	<u>\$</u>	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819								Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	ΓY-FOURTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Mana
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGIV	DOL	
								and
								Syndicated
								Surcharge
***************************************								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		Ш	0.00	
Gross Receipts First G	roup	•	0.00	Gross Receipts Seco	and Croup	¢	0.00	
Gloss Receipts Filst G	поир	\$	0.00	Gross Receipts Seco	ina Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED F	IFTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-			····	
Total DSEs			0.00	Total DSEs			0.00	
	2	•	-		H- O			
Gross Receipts Third (Oup	\$	0.00	Gross Receipts Four	ın Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819								Name
ONE HUNDRED FIFTY-				TI .		IBER GROUP SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u> </u>			Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
					<u> </u>			Distant
								Stations
		-						
					<u></u>			
Total DSEs			0.00	Total DSEs	4	П	0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Secon	nd Group	\$	0.00	
Gloss Necelpts I list Gl	oup	4	0.00	Gross Neceipis Secon	id Group	4	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROUP		TI .	D SIXTIETH	SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>			
				-	<u> </u>			
					<u></u>			
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	ı Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			•			S	7819	Name
В				TE FEES FOR EAG				
		SUBSCRIBER GRO	DUP		SECON	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA				COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
	<u> </u>							Surcharge
								for Partially
	<u> </u>							Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 2,26	5,247.36	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	THIRD	SUBSCRIBER GRO				H SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>	-						
	-							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
					•			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th			scriber group	as shown in the boxe	es above.		0.00	
Enter here and in block	k 3, line 1, s	space L (page 7)				\$	0.00	

LEGAL NAME OF OWNE MASSILLON CABL					_	S	7819	Name
BL				TE FEES FOR EAC				
	FIFTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.22 0.0.1	202	07.122 07011	332	07.122 0.0.1	202	07.22 01011	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
		-						
		-						
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	nd Group	\$	0.00	
S	EVENTH	SUBSCRIBER GRO	UP		EIGHTH	I 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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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	· - 17	·			- r	<u>·</u>		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
		· 						

LEGAL NAME OF OWNE MASSILLON CABI						S	7819	Name
Bl				TE FEES FOR EAC				
_	NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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								and
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								Exclusivity
								Surcharge
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								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
El	LEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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				-				
Total DSEs			0.00	Total DSEs			0.00	
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Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
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Base Rate Fee Third G	Broup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add th	ne hace r at	a fees for each sub-	scriber aroun	as shown in the hove	es ahove			
Enter here and in block			acinei gioup	as shown in the boxe	,o ab∪v€.	\$		

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-	LIP	RIBER GROUP I SUBSCRIBER GROU		TE FEES FOR EAC		COMPUTATION OF SUBSCRIBER GRO		
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-	UP 0	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	IFTEENTH	FI OMMUNITY/ AREA
-	UP 0	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	IFTEENTH	FI
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	UP 0	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	IFTEENTH	FI OMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	IFTEENTH	FI COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	IFTEENTH	FI COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	IFTEENTH	COMMUNITY/ AREA
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-	UP 0	I SUBSCRIBER GROU	SIXTEENTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	IFTEENTH	FI OMMUNITY/ AREA
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	DSE DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GRO	DSE	FI COMMUNITY/ AREA

Name								
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Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	OALL SIGN	DOL	OALL SIGIV	DOL	OALL GIGIT	DOL	OALL GIGIT
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	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
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	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	NIN COMMUNITY/ AREA
	DSE	SUBSCRIBER GROU	VENTIETH	CALL SIGN	JP 0	SUBSCRIBER GROU	ITEENTH	CALL SIGN
	JP 0	SUBSCRIBER GROU	VENTIETH	T COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	CALL SIGN
	DSE	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Total DSEs
	DSE O.00	SUBSCRIBER GROU	DSE	T COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE O.00	CALL SIGN	DSE	COMMUNITY/ AREA
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	LIP	RIBER GROUP SUBSCRIBER GROU		TE FEES FOR EAC		COMPUTATION OF SUBSCRIBER GROUND		
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Computat	DOE	II OALL OLON	T DOE		T DOE	I CALL CION	I DOE	
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	UP 0	SUBSCRIBER GROU	Y-FOURTH	TWENT	JP 0	SUBSCRIBER GROI	TY-THIRD	TWEN'
	DSE	SUBSCRIBER GROU	Y-FOURTH	TWENT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROI	TY-THIRD	TWEN COMMUNITY/ AREA CALL SIGN
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0# 19 Name	7013					lC .	LE TV IN	MASSILLON CAB
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Computation	505	Полион	I DOE		T 505	L OALL CLON	T 505	
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LEGAL NAME OF OWNE MASSILLON CABL			•			S	7819	Name
BL	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
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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 Seco	ona Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 7819	Name
BI	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRE	ED NINTH	SUBSCRIBER GRO	DUP	ONE HUND	RED TENTH	I SUBSCRIBER GRO	UP	0
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ONE HUNDRED E	LEVENTH	SUBSCRIBER GRO	DUP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GRO	UP	
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Total DSEs			0.00	Total DSEs			0.00	
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MASSILLON CABLE TV							
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ase Rate Fee First Group	\$		Base Rate Fee Seco	ond Group		<u>.</u>	
ONE HUNDRED NINTEENT	\$	DUP	Base Rate Fee Seco	ond Group		UP	
ONE HUNDRED NINTEENT OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	OUP 0	ONE HUNDRED TO COMMUNITY AREA	ond Group	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	OUP 0	ONE HUNDRED TO COMMUNITY AREA	ond Group	I SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	\$ TH SUBSCRIBER GRO	OUP 0	ONE HUNDRED TO COMMUNITY AREA	ond Group	I SUBSCRIBER GRO	UP 0	
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LEGAL NAME OF OWNE MASSILLON CABL			•			S	YSTEM ID# 7819	Name
				TE FEES FOR EAC				
ONE HUNDRED TWEN	ITY-FIRST	SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
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ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP	ı	ONE HUNDRED TWE	NTY-FOURTH	I SUBSCRIBER GROUP)	
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LEGAL NAME OF OWNE MASSILLON CABL						SY	7819	Name
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NE HUNDRED TWENTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-EIGHTH	SUBSCRIBER GROUP		
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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 th Enter here and in block			criber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER MASSILLON CABL			po.			SY	7819	Name
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Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED THIR	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIRT	Y-SECONE	SUBSCRIBER GROUP		
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LEGAL NAME OF OWNER MASSILLON CABL			•			S	7819	Name
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC 7819							
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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MASSILLON CABLE TV INC 7819 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MASSILLON CABLE TV INC 7819 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. 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 Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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