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							
2-25-20	\$ ALLOCATION NUMBER							

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting	2019/2				
Period					
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 account of the counting period of the system's first filing. If not, enter the system's ID	ss of the cable system on the last day of the counting perion	em the accounting period should s		3779
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
	Reservation Telephone Cooperative				
				377	920192
				3779	2019/2
	PO Box 68				
	Parshall, ND 58770				
0	INSTRUCTIONS: In line 1, give any business or trade names used to id	dentify the busines	s and operation of the syst	em unless	these
С	names already appear in space B. In line 2, give the mailing address of				
System	1 IDENTIFICATION OF CABLE SYSTEM:				
	MAILING ADDRESS OF CABLE SYSTEM:				
	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	 e 1b
Area	with all communities.	•	·		
Served	CITY OR TOWN	STATE			
First	Parshall	ND			
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.		
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	3 GRP#
Sample	Alda	MD	Α		1
•	Alliance	MD	В		2
	Gering	MD	В		3

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

RM SA3E. PAGE 1b.			SYSTEM ID#	
EGAL NAME OF OWNER OF CABLE SYSTEM:				
Reservation Telephone Cooperative			3779	
nstructions: List each separate community served by the cable system. A "connection FCC rules: "a separate and distinct community or municipal entity (including unreas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd) of system identification hereafter known as the "first community." Please use it a	inincorporated communit . The frst community that	ies within unincorp you list will serve	orated	D Area Served
lote: Entities and properties such as hotels, apartments, condominiums, or molelow the identified city or town.	bile home parks should b	e reported in pare	ntheses	
f all communities receive the same complement of television broadcast stations all communities with the channel line-up "A" in the appropriate column below or on a partially distant or partially permitted basis in the DSE Schedule, associate lesignated by a number (based on your reporting from Part 9).	leave the column blank.	If you report any st	ations	
When reporting the carriage of television broadcast stations on a community-by channel line-up designated by an alpha-letter(s) (based on your Space G report based on your reporting from Part 9 of the DSE Schedule) in the appropriate co	ing) and a subscriber gro			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Parshall	ND	Α	5	First
White Shield	ND	A	5	Community
Garrison Carrison	ND	A	5	Community
Plaza	ND	A	4	
Makoti	ND	A	4	
Douglas	ND	A	4	See instructions for
Max	ND	Α	4	additional informati
Ryder	ND	Α	4	on alphabetization.
lew Town	ND	Α	3	
Ross	ND	Α	3	
Kenmare	ND	Α	3	
White Earth	ND	Α	3	Add rows as necess
Alexander	ND	Α	2	
Arnegard	ND	Α	2	
Keene	ND	Α	2	
Squaw Gap	ND	Α	2	
Natford City	ND	A	2	
Mandaree	ND	A	1	

	•

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Reservation Telephone Cooperative

3779

Ε

scribers and

Rates

Secondary Transmission Service: Sub-

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:	COBCONIBENC		TOTIL	ONTEGER OF GERVICE	CODCONIBLINO	TOTIL
Service to first set	3,604	\$	19.95			
Service to additional set(s)						
 FM radio (if separate rate) 						
Motel, hotel	4	\$	19.95			
Commercial	7	\$	19.95			
Converter						
Residential	3,604	\$	5.95			
Non-residential	1,197	\$	14.95			

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK	2					
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	CATEGORY OF SERVI	CE !	RATE	
Continuing Services:		Installation: Non-residential					
• Pay cable		Motel, hotel	\$	30.00	Digital	\$	55.00
 Pay cable—add'l channel 		Commercial	\$	30.00	Digital Plus	\$	17.00
Fire protection		• Pay cable			НВО	\$	19.95
•Burglar protection		Pay cable-add'l channel	Cinemax	\$	16.95		
Installation: Residential		Fire protection			Starz/Encore	\$	16.95
First set	\$ 30.00	Burglar protection			Showtime	\$	16.95
 Additional set(s) 		Other services:					
• FM radio (if separate rate)		Reconnect	\$	30.00			
Converter		Disconnect					
		Outlet relocation	\$	40.00			
		 Move to new address 	\$	30.00			
			h			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

FORM SA3E. PAGE 3						
LEGAL NAME OF OV					SYSTEM ID:	Namo
	-				377	9
carried by your cable FCC rules and regule 76.59(d)(2) and (4), substitute program b Substitute Basis basis under specifc I Do not list the statio station was carrie List the station here casis. For further in the paper SA3 Column 1: List eleach multicast stream cast stream as "WET WETA-simulcast). Column 2: Give to its community of lice on which your cable Column 3: Indicateducational station, I (for independent mul For the meaning of the Column 4: If the planation of local ser Column 5: If you	TERS: TELEVISIO G. G., identify ever e system during to ations in effect or 76.61(e)(2) and (asis, as explaine s Stations: With ECC rules, regula on here in space of only on a subse e, and also in spa- information cond form. ach station's call m associated wit FA-2". Simulcast the channel numl nse. For example system carried the tite in each case to by entering the le titicast), "E" (for n hese terms, see station is outside vice area, see p have entered "Y	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the state ring substitute basis been the FCC he, WRC is Che, the station account of the station of the stat	g period, except 81, permitting the referring to 76.6 paragraph. y distant stations controlled the stations are to the basis station was carried to the basis station to the period of the station was assigned to the period of the station is a network attaion is a network attaion is a network attaion is a network of the station is a netwo	(1) stations carried carriage of cert 1(e)(2) and (4))]; is carried by your one Special Statement of both on a substitute, see page (v) on program service er-the-air designation of the television statington, D.C. This ork station, an indefer network multiple or "E-M" (for noncontrions located in the television statington, p. c. the television statington, p. c. This ork station, an indefer network multiple or "E-M" (for noncontrions located in the television stating or "E-M" (for noncontrions located in the televisions located in	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your	Primary Transmitters: Television
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **Reservation Telephone Cooperative** 3779 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

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	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KMCY	14	N	No		MINOT, ND
KSRE	6	E	No		MINOT, ND
KUMV	8	N	No		WILLISTON, ND
KXMC	13	N	No		MINOT, ND
KMOT	10	N	No		MINOT, ND
KXMD	11	N	No		WILLISTON, ND
KXND	24	N	No		MINOT, ND
KMOT-WD	10.2	N	No		MINOT, ND
KMCY-DT3	14.3	I-M	No		MINOT, ND
KMOT-DT3	10.3	I-M	No		MINOT, ND
PPB2	6.2	E-M	No		MINOT, ND
PPB3	6.3	E-M	No		MINOT, ND
KXMC-WX	13.2	I	No		MINOT,ND
PPB4	6.4	E-M	No		MINOT, ND
KXMC-DT3	13.3	N-M	No		MINOT, ND
KXMC-DT4	13.4	N-M	No		MINOT, ND
KMCY-DT2	14.2	I-M	No		MINOT, ND

FORM SA3E. PAGE 3.					2/2====	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Reservation Te	elephone Co	operative			3779	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute program base Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List 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 multicate for the meaning of the Column 5: If you heable system carried the cable system and tion "E" (exempt). For explanation of these the substitute of these the state of the set of the state the system and tion "E" (exempt). For explanation of these the substitute of the set of the state of the set of the	G, identify eventy system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)	y television standard by television standard by television standard by television standard by televisions, or auth G—but do list titute basis. In the standard by the standard	period, except 81, permitting the seferring to 76.6 paragraph. It is space I (the stion was carried ute basis station to the seferring to 76.6 paragraph. It is in space I (the stion was carried ute basis station to the sefer to see the see the see the second to see the see the second to see the see the second to sec	(1) stations carried et carriage of certa 1(e)(2) and (4))]; as carried by your context of the carried by your carried by y	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your ering "LAC" if your cable system expacity. expaper system or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.	G Primary Transmitters: Television
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the which the station is identified.	
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AC		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURINI SAJE. PAGE 3.					OVOTEM	ID#
Reservation Te					SYSTEM 37	Name
PRIMARY TRANSMITT						
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 (r d in the next p	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
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 spatformation concurrs. The station's call associated with a second carried the in each case of the cast), "E" (for nese terms, see ation is outside ice area, see prave entered "Y he distant staticion on a part-tilision of a distant tentered into o a primary trans simulcasts, also ree categories e location of each canadian static canadian static	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, WRC is Change (v) of the basis because in column and uring the same basis because multicast stream or before Jumitter or an ace on enter "E". If I, see page (v) ch station. Forns, if any, giv	tit in space I (the ation was carried tute basis station report origination or be reported in the ation is a network ation is a network ation is a network (i.e. "Capeneral instruction of the ation is a network (i.e. "Capeneral instruction of the ation is a network (i.e. "Capeneral instruction of the ation of the spanning period ause of lack of a peam that is not some 30, 2009, be ssociation repreyou carried the color of the general in true. Settling, in the name of the ation was attended to the stations, in the same of the ation was attended to the stations.	e Special Statemed both on a substitute, see page (v) on program services er-the-air designal column 1 (list each the television statington, D.C. This limit of	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 ion. For example, report multi- instream separately; for example on for broadcasting over-the-air in imay be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). ite paper SA3 form. is". If not, enter "No". For an ex- paper SA3 form. istating the basis on which your ering "LAC" if your cable system is apacity. payment because it is the subject item or an association representing y transmitter, enter the designa- 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.	
Trotor ii you are amizii			EL LINE-UP		опанногино ар.	_
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Reservation Te	lephone Co	operative			3779	
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 Program bas Substitute Program bas Substitute Program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even the system during it ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e	y television standard page (v) of the local servage (v) of the local se	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the fermion of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is space I (the referring to report origination of the report origination of the reported in control of the reported in control of the reported in control of the reported in the report origination is a network assigned to the reported in the referring to the reported in the referring the re	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce special Statement of both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television statington, D.C. This in the television statington, D.C. This in the television statington, D.C. This in the television statington, but the television statington in the more television statington to the television statington the television the television the television statington the television the televisi	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
		CHANN	EL LINE-UP	ΔF		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Reservation Te	lephone Co	operative			3779	Nume
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
PRIMARY TRANSMITTE In General: In space (carried by your cable stock rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute program bas Substitute Basis Subasis under specific Fo Do not list the station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servi Column 5: If you have cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the	ERS: TELEVISIO G, identify every system during the control of the control Gold (e)(2) and (estations: With the control of the	y television state accounting a June 24, 194, or 76.63 (rad in the next) respect to any ations, or auth G—but do listitute basis. ace I, if the state raing substitute basis bearing substitute basis. The state of t	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: It it in space I (the referring to station was carried that it in space I (the report origination cording to its own be reported in compared to the reported in the reported	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce special Statement both on a substitute, see page (v) of a program services er-the-air designaticolumn 1 (list each the television statifington, D.C. This in the television statifington, D.C. This in the television statifington, program services of the television statifington, program (for noncostions located in the special program of the television of the televisi	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel upendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system capacity. The payment because it is the subject teem or an association representing the basis, enter "O." For a further d in the paper SA3 form.	G Primary Transmitters: Television
				•	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AF		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					21/2=11/15		
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Reservation Te	elephone Co	operative			3779		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program 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 such as the 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							
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the		
Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AG			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Reservation Te	lephone Co	operative			3779		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2) and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program 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, or "E-M" (for network), "N-M" (for network multicast), "I (for independent), "I-M" (for independent), "I-M" (for inde							
,		CUANN	EL LINE UD	A11			
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	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Reservation Te	lephone Co	operative			3779		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program 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							
,	<u> </u>		EL LINE-UP	·	'		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Reservation Te	lephone Co	operative			3779		
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent), "I-M" (for ind							
Note: If you are duite!	ig multiple onal	• •	•	•	channer inte-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.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Reservation Te	elephone Co	operative			3779		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)/2) and (4), 76.61(e)/2) and (4), or 76.63 (referring to 76.61(e)/2) and (4))]; and (2) certain stations carried on a substitute 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 ilense. 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 multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial edu							
		CHANN	FI LINE-LIP	ΔK			
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	
Reservation Te	lephone Co	operative			3779	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
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Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations, l	list the community	to which the station is licensed by the		
FCC. For Mexican or 0 Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AL			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Reservation Te	elephone Co	operative			3779		
PRIMARY TRANSMITTE	ERS: TELEVISION	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 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							
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Note: If you are utilizing	ng multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AM			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.					21/2=11/15		
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Reservation Te	elephone Co	operative			3779		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program 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), "I" (for independent), "I-M" (for in							
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Note: If you are utilizing				•			
		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		

LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID:	#			
Reservation Te	elephone Co	operative			3779	Name			
PRIMARY TRANSMITTERS: TELEVISION									
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during to ions in effect of 6.61(e)(2) and (sis, as explaine	he accounting n June 24, 19 4), or 76.63 (i d in the next	g period, except 81, permitting th referring to 76.6 paragraph.	(1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a	and low power television stations) 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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basis. For further in in the paper SA3 fo Column 1: List each multicast stream cast stream as "WETA-simulcast).	and also in spa formation cond rm. ch station's call associated with a-2". Simulcast	ace I, if the sta erning substif sign. Do not in a station ac streams must	tute basis station report origination cording to its ow the reported in o	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				
its community of licens on which your cable sy	se. For example stem carried th	e, WRC is Cha ne station.	annel 4 in Wash	nington, D.C. This	may be different from the channel				
educational station, by (for independent multion for the meaning of the Column 4: If the st planation of local service Column 5: If you heable 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	rentering the lecast), "E" (for nese terms, see ation is outside ce area, see prave entered "Yhe distant station on a part-tiicion of a distant tentered into o a primary transsimulcasts, also ree categories e location of ea Canadian static	etter "N" (for no concommercial page (v) of the the local servage (v) of the es" in column on during the me basis becar multicast streen or before Jumitter or an acoenter "E". If a see page (v) ch station. For the servage (v) ch station, given el line-ups,	etwork), "N-M" (I educational), of general instruct vice area, (i.e. "of general instruct 4, you must correct accounting perioduse of lack of a geam that is not some 30, 2009, be association repreyou carried the jor U.S. stations, the the name of the use a separate	for network multic or "E-M" (for noncoctions located in the distant"), enter "Ye ions located in the mplete column 5, sod. Indicate by entactivated channel of subject to a royalty etween a cable system of the primary of the community in the community me community with space G for each	es". If not, enter "No". For an expaper SA3 form. stating the basis on which your stating "LAC" if your cable system capacity. 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. to which the station is licensed by the which the station is identifed.				
		CHANN	EL LINE-UP	AO					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Reservation Te	elephone Co	operative			3779		
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program 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), "I" (for independent), "I-M" (for in							
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Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	IED OF CARLE CA	/CTEM.			SYSTEM ID#		
Reservation Te					3779	Name	
PRIMARY TRANSMITTI	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 07.76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute 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"							
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	r 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.		
		•	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		

FURINI SAJE. PAGE 3.						<i></i> -		
Reservation Te					SYSTEM 3	1 ID# 3779	Name	
PRIMARY TRANSMITTI								
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	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 th 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: 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 sesociated 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 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 on a part-time basis because of lack of activated channel capacity. For the ret								
Note. Il you are utilizii	ig multiple chai		EL LINE-UP		channer inte-up.			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.					2)/2=====	
LEGAL NAME OF OWN					SYSTEM ID#	Name
Reservation Te	lephone Co	operative			3779	
PRIMARY TRANSMITTI	ERS: TELEVISION	ON				
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.						Primary Transmitters: Television
Note. II you are utilizii	ig multiple chai	•	·		charmer line-up.	
		CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					2/2====		
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Reservation Te	elephone Co	operative			3779		
PRIMARY TRANSMITTERS: TELEVISION							
PRIMARY TRANSMITTERS: TELEVISION							
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the		
Note: If you are utilizing				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AT			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FURM SAJE. PAGE 3.					OVOTEMIE	ш
Reservation Te					SYSTEM ID 377	Namo
PRIMARY TRANSMITTI						
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 (red 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	G Primary Transmitters: Television
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (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 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						
-		CHANN	EL LINE-UP	AU		_
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=11/15		
LEGAL NAME OF OWN					SYSTEM ID#	Name	
Reservation Te	elephone Co	operative			3779		
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 —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 swETA-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 independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).							
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community			
Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AV			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Reservation Te	lephone Co	operative			3779	Nume	
PRIMARY TRANSMITTERS: TELEVISION							
· ·							
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations, l	list the community			
Note: If you are utilizing				•			
		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: 2019/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 3779 **Reservation Telephone Cooperative** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.						ACCOUNTING	9 PERIOD: 2019/2
LEGAL NAME OF OWNER OF						SYSTEM ID#	Name
Reservation Telephon	e Coopera	ative				3779	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG				
							1
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further						_	
explanation of the programm							Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBST	TITUTE CARRIAGE				Carriage: Special
 During the accounting per broadcast by a distant star 		r cable system	carry, on a substitute basi	s, any nonnet		ı program ☑ Yes 	Statement and
Note: If your answer is "No		rest of this pag	ge blank. If your answer is '	Yes," you mu	·		Program Log
log in block 2.			•		·		
2. LOG OF SUBSTITUTE In General: List each subs			ite line. Use abbreviations i	wherever nos	sible if their me	eaning is	
clear. If you need more spa	ice, please a	attach addition	al pages.	·		•	
Column 1: Give the title period, was broadcast by a			ision program (substitute p our cable system substitute				
under certain FCC rules, re	gulations, o	r authorization	s. See page (vi) of the gen	eral instructio	ns located in th	ie paper	
SA3 form for futher informatitles, for example, "I Love I				"basketball".	List specific pr	ogram	
Column 2: If the program	n was broad	lcast live, ente	r "Yes." Otherwise enter "N				
Column 4: Give the broa	adcast statio	n's location (th	asting the substitute programe community to which the	station is lice		C or, in	
the case of Mexican or Car			community with which the stem carried the substitute p			the month	
first. Example: for May 7 given	ve "5/7."			_			
Column 6: State the time to the nearest five minutes.			gram was carried by your o				
stated as "6:00-6:30 p.m."		-	-				
Column 7: Enter the lett to delete under FCC rules a	er "R" if the and regulation	listed program	was substituted for progra	mming that you	our system was ter "P" if the list	s required red pro	
gram was substituted for pr	ogramming						
effect on October 19, 1976.	•						
					N SUBSTITU	I 7 REASON	
		E PROGRAM			IAGE OCCURI 6. TIME	RED FOR	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM —	TO DELETION	
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

Reservation Telephone Cooperative

SYSTEM ID#

3779

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 "4/10"
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.–12:00 p.m."

		DATES	AND HOURS (OF P	ART-TIME CAF	RRIAGE			
CALL SIGN -	WHEN CARRIAGE OCCURRED				CALL SIGN	WHEN CARRIAGE OCCURF			
	DATE	HOUR FROM	TO			DATE	FROM	OUR	TO
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	L NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
Res	ervation Telephone Cooperative			3779	Name				
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identifed in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts)									
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: • Complete block 1, showing your minimum fee. • Complete block 2, showing whether your system carried any distant television stations. • If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. • If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.									
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be $k = 1$ below.	e enter	red on line 1	of					
▶ If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be ϵ low.	entered	d on line 2 in	block					
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	uld be	entered on li	ne					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		064 percent o	of the					
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064		\$	751,350.80					
	Enter the result here. This is your minimum fee.	\$		7,994.37					
Block DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? X Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete line 1, block 4.									
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	7,994.37					
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00					
	Line 3. Add lines 1 and 2 and enter here	\$		7,994.37					
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		\$	7,994.37	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 0.00								
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)								
	Line 4. FILING FEE		\$	725.00	additional fees. Division for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		8,719.37	appropriate form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Significant descriptions of the paper SA3 form for more information.)	See pa	age (i) of the						

NI	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Reservation Telephone Cooperative	3779
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations. 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services. 269	
N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) Name Lisa Schenfisch Telephone 701-862-3115	
	Address PO Box 68 (Number, street, rural route, apartment, or suite number) Parshall, ND 58770	
	(City, town, state, zip) Email Iisas@rtc.email Fax (optional)	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations. I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or 	
	 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable syst in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings Typed or printed name: Shane D. Hart Title: CEO/General Manager (Title of official position held in corporation or partnership)	

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 OWNE	R OF CABLE SYSTEM:	SYSTEM ID#	
Reservation Tel	ephone Cooperative	3779	Name
The Satellite Hor lowing sentence: "In determ service of scribers at For more information paper SA3 form. During the account made by satellite. X NO	ATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by add the viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by add the viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by add the providing secondary transmissions of primary broadcast transmitters, the system shall not not amount amounts collected from subscribers receiving secondary transmissions pursuant to sect ation on when to exclude these amounts, see the note on page (vii) of the general instruction of the cable system exclude any amounts of gross receipts for secondary transmissions pursuant to sect ation on when to exclude these amounts, see the note on page (vii) of the general instruction of the cable system exclude any amounts of gross receipts for secondary transmissions pursuant to see the note on page (viii) of the general instruction of the cable system exclude any amounts of gross receipts for secondary transmissions pursuant to see the note on page (viii) of the general instruction of the cable system exclude any amounts of gross receipts for secondary transmissions.	the basic include sub- tion 119."	Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address	Name Mailing Address		
INTEREST AS	SSESSMENTS		
You must comple	ete this worksheet for those royalty payments submitted as a result of a late payment or un on 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	ine 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply	ine 2 by the number of days late and enter the sum here	- 0.00274	
	ine 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	- est charge)	
	interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assis Licensing Division at (202) 707-8150 or licensing@loc.gov.	tance please	
** This is the	decimal equivalent of 1/365, which is the interest assessment for one day late.		
•	filing this worksheet covering a statement of account already submitted to the Copyright C the owner, address, first community served, accounting period, and ID number as given in		
Owner Address			
First community Accounting perio			

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: 2019/2

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that lead stations are not counted at all in computing DSEs	

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 beer 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.

Santa Rosa	Stations A and C 35 mile zone
\ an	Bodega Bay ns B, D, id E le zone

	Distant Stations Carried		Identification	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

ψο,οο που								
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	<u>.</u>			
(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: 2019/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)										
1	LEGAL NAME OF OWNER OF CABLE SYSTEM:										
ı	Reservation Telephone Cooperative 3779										
	SUM OF DSEs OF CATEGORY "O" STATIONS:										
	 Add the DSEs of each station 										
	Enter the sum here and in line	1.00									
•	Instructions:										
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5										
Computation	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."										
of DSEs for											
Category "O"			CATEGORY "O" STATION								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	KSRE	0.250									
	PPB2	0.250									
	PPB3	0.250									
Add rows as	PPB4	0.250									
necessary.											
Remember to copy											
all formula into new											
rows.											
	L	L		t		l					

Name		OWNER OF CABLE SYSTEM: Telephone Coopera	tive				S	3779
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all dista 2: For each station, give the correspond with the inform 3: For each station, give the context of the column of	the number of hours mation given in spathe total number of lumn 2 by the figure mal point. This is the station, give the "ty lumn 4 by the figure is DSE. (For more in	s your cable syste ace J. Calculate of hours that the star in column 3, and e "basis of carriag pe-value" as "1.0." e in column 5, and formation on rour	m carried the sta nly one DSE for e tion broadcast ov give the result in ge value" for the s " For each netwo d give the result inding, see page (tion during the accounting the accounting the accounting the air during the accounting the accounting the air during the accounting the air during the accounting the accou	unting period. is figure must cational station,	
	1. CALL	2. NUMBE		NUMBER	4. BASIS OF	5. TYPE	6. DS	E E
	SIGN	OF HOU CARRIE SYSTEM	D BY S	OF HOURS STATION ON AIR	CARRIAG VALUE	GE VALUE	=	
		313121	÷		=	x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	X	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	X	=	
	Add the DSEs	s OF CATEGORY LAC S of each station. um here and in line 2 of pa		ile,	·····•	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations and the space I). Column 2: at your option. Column 3: Column 4:	re the call sign of each start by your system in substituted on October 19, 1976 (cone or more live, nonnetwork for each station give the This figure should correst Enter the number of days Divide the figure in column This is the station's DSE of the station of	itution for a prograi as shown by the le ork programs during number of live, no spond with the infor in the calendar ye in 2 by the figure in (For more informat	m that your system tter "P" in column ; that optional carr nnetwork program rmation in space I har: 365, except in a column 3, and gi ion on rounding, s	n was permitted to 7 of space I); and age (as shown by as carried in substance). a leap year. ve the result in cosee page (viii) of to	to delete under FCC rules d the word "Yes" in column a stitution for programs that olumn 4. Round to no less the general instructions in	2 of were deleted s than the third	rm).
		SUI	BSTITUTE-BAS	SIS STATION	S: COMPUTA	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=		÷		=
		÷		=		÷		
				=		·····		=
		÷		=				
	Add the DSEs	s OF SUBSTITUTE-BASI of each station. um here and in line 3 of pa		ıle,	⊁	0.00		
5		ER OF DSEs: Give the am s applicable to your system		es in parts 2, 3, and	d 4 of this schedule	e and add them to provide	the tota	
Total Number	1. Number o	of DSEs from part 2●				>	1.00	
of DSEs		of DSEs from part 3 ●				· •	0.00	
U. DULS		f DSEs from part 4 ●				r ▶	0.00	
	TOTAL NUMBE	ER OF DSEs						1.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/2

Reservation T							S	YSTEM ID# 3779	Name
								3119	
Instructions: Bloc In block A:									•
 If your answer if schedule. 	"Yes," leave the re	emainder of p	art 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
If your answer if	"No," complete blo			ELEVISION M	ADVETS				Computation of
Is the cable syster	n located wholly o					ection 76.5 of	FCC rules and re	gulations in	3.75 Fee
effect on June 24,		- de adada - E	, NOT COM		AINDED OF F	NADT CAND T		•	
	plete part 8 of the lete blocks B and		O NOT COM	PLETE THE REMA	AINDER OF F	ARI 6 AND 7			
A No comp	note blocks b and								
Caluman 4.	1 :- 4 4 11 - :			IAGE OF PERI			4	-1.6	
Column 1: CALL SIGN	under FCC rules	and regulations BSE Scheen	ons prior to Jui dule. (Note: Th	part 2, 3, and 4 or ne 25, 1981. For for ne letter M below r Act of 2010.)	urther explana	ition of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	lles and reguled pursuant t	lations cited be o the FCC ma	sis on which you on elow pertain to the rket quota rules [7 (6.59(d)(1), 76.61(ese in effect or 6.57, 76.59(b	n June 24, 198), 76.61(b)(c),	76.63(a) referring	j tc	
	C Noncommeric	al educationa d station (76.6 or DSE sched	al station [76.5 65) (see parag ule).	9(c), 76.61(d), 76. raph regarding su	63(a) referrin	g to 76.61(d)			
	*F A station pre	viously carrie JHF station w	ed on a part-tin rithin grade-B	ne or substitute ba contour, [76.59(d)(•		erring to 76.61(e)	(5)	
Column 3:		e stations ide	ntified 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	
KSRE	С	0.25							
PPB2	С	0.25							
PPB3	C	0.25							
PPB4		0.25							
								1.00	
		В	LOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			,		
Line 2: Enter the	sum of permitte	d DSEs fror	n block B abo	ove					
Line 3: Subtract (If zero, l				r of DSEs subjec 7 of this schedu		rate.			
Line 4: Enter gro	ess receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375	and enter su	ım here				X		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				^		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

	OWNER OF CABLE Telephone Coo						3	4STEM ID# 3779	Name
		BLOCK	A: TELEVIS	SION MARKET	S (CONTIN	IUED)			
1. CALL SIGN	2. PERMITTED BASIS			2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation o
									3.75 Fee

		<u> </u>	Ц	I	I	11	I	1	

Name	Reservation Te								S	*YSTEM ID 3779
	Reservation re	iepriorie C	ooperative							3//9
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 Ff 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 programing: (d)(1),76.61(e) (e)(3)). Carriage under all instructions the station's It e the DSE figure 1, column 3 differentiation by the station of the column 3 differentiation by the station of the column 3 differentiation by the column 3 differentiation by the column 3 differentiation by the DSE figure 1, column 3 differentiation by the	1981, under forme ach distant station i his station for a sing g period and year i arriage on which the regulations cited be mming: Carriage, co ()(1), or 76.63 (refer Carriage under FCC certain FCC rules, in the paper SA3 fo DSE for the current ures listed in column of part 6 for this state ou give in columns	r FCC rules gov dentifed by the gle accounting p n which the car ie station was eleow pertain to te in a part-time bar ring to 76.61(e) C rules, sections regulations, or a orm. accounting per ns 2 and 5 and tion. 2, 3, and 4 mus	vern lett peri riag arri shos asis (1)) s 76 auth iod list	entified by the letter "F" ning part-time and sub er "F" in column 2 of p iod, occurring between ge and DSE occurred led by listing one of the se in effect on June 24 s, of specialty program). 6.59(d)(3), 76.61(e)(3) horizations. For furthe as computed in parts the smaller of the two e accurate and is subject to the subject of the subject in the subject of the s	stitute carri part 6 of the n January 1 (e.g., 1981/ e following 4, 1981. nming unde d, or 76.63 (r explanation 2, 3, and 4 o figures her	age. DSE schedule, 1978 and Jur 1) letters r FCC rules, se referring to on, see page (v of this schedu	ections vi) of the should be	e entere
		PERMITT	ED DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS		
	1. CALL	2. PRIC		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED
	SIGN	DSE	PI	ERIOD		CARRIAGE	[DSE		DSE
Computation of the	•	"Yes," comple	ete blocks B and C locks B and C blan	k and complete	•	rt 8 of the DSE schedo				
Syndicated			BLOC	(A: MAJOR	TE	LEVISION MARK	ET			
Exclusivity Surcharge	• Is any portion of the o	cable system w	vithin a ton 100 maio	or television mark	ket	as defned by section 7	6.5 of ECC	rules in effect .l	une 24	19812
Guronargo	Yes—Complete	•	, ,	or toloviolor man	ιιοι	X No—Proceed to		raics in chect o	unc z-,	1001:
	Tes—complete	DIOCKS D and				No—i locced to	parto			
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	;
	Is any station listed in commercial VHF stati or in part, over the ca	on that places			H	Was any station listed nity served by the cab to former FCC rule 76	le system p			
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st			ate permi	tted DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	iN	DSE
			-							
			-							
			-							
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00
				3.00	- 11					

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative	SYSTEM ID# 3779	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	00	
Section			7
1	Enter the amount of gross receipts from space K (page 7)	751,350.80	1
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 defined by the FCC? Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here	_	
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge.		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	YSTEM ID#
Name	I	Reservation Telephone Cooperative	3779
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	
		, , ,	_
8 Computation	You m 6 was • In blo	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 part checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	t
of	-	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belov	W
Base Rate Fee		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
		e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
		(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶	_
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	_
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	_
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/2

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Rese	vation Telephone Cooperative	3779	Name
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
7	A. Enter 0.01064 of gross receipts (the amount in section 1) **State	_	8
	B. Enter 0.00701 of gross receipts (the amount in section 1)		Computation of
	C. Multiply line B by 3.000 and enter here		Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) * ** ** ** ** ** ** ** ** **		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here \$	_	
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$	0.00	
	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 channe	0	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 Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine 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	and 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 properties a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.	, ,	Partially Distant Stations, and
-	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
	For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were log 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.)		
subscr	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 th will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
	section:		
• Give	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.	of the	
• If:			
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in f this schedule; or,	n parts 2, 3,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,	
• Add t	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 is paper SA3 form.	nstructions	
• Comp	oute 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 (the		

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

DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 3779 **Reservation Telephone Cooperative** 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.

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE SRE 0.25 KSRE 0.25 PPB2 0.25 PB3 0.25 PPB3 0.25 Surchary for PB4 0.25 PPB4 0.25 Surchary for PB5 0.25 PPB4 0.25 Surchary for PB6 0.25 PPB3 0.25 Surchary for PB7 0.25 PPB4 DV PB7 0.25 PPB4 DV PB7 0.25 PPB4 DV PB8 0.25 PPB3 0.25 PPB4 PB9 0.25 PPB3 0.25 PPB4 0.25 PPB4 0.25 PPB4 0.25 PPB5 0.25 PPB5 0.25 PPB5 0.25 PPB6 0.25 PPB6 0.25 PPB7 0.25 PPB8 0.25 PPB8 0.25 PPB8 0.25 PPB9	LEGAL NAME OF OWNE Reservation Teler						S	3779	Name
COMMUNITY AREA Group 2: Alexander, Amegard, Squ Computation Community AREA Group 2: Alexander, Amegard, Squ Computation Community AREA Computation Community Community AREA Computation Community Com	В	LOCK A: 0	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCRI	BER GROUP		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Sale Rate See See See See See See See See See S		FIRST	SUBSCRIBER GRO	UP		SECOND	SUBSCRIBER GRO	UP	•
SRE	COMMUNITY/ AREA	Group 1	1: Mandaree		COMMUNITY/ ARE	A Group 2:	Alexander, Arn	egard, Squ	_
SRE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
PPB2	KSRF	0.25			KSRE	0.25			
PB3									
PPB4		···							-
for partially plated DSEs 1.00 Total DSEs 1.00 Gross Receipts First Group \$ 21,572.45 Gross Receipts First Group \$ 229,941.51 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Group 4: Plaza, Makoti, Douglas, M CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE SRE 0.25 KSRE 0.25 PPB3 0.25 PPB3 0.25 PPB3 0.25 PPB4 0.25 PPB4 0.25 PPB4 0.25 PPB4 0.25 PPB5 0.55 PPB6 0.55 PPB6 0.55 PPB7 0.55 PPB7 0.55 PPB8 0.55 PPB8 0.55 PPB8 0.55 PPB9 0.55							-		
Distant Stations Distant Stations Total DSEs 1.00 Gross Receipts First Group \$ 21,572,45 Gross Receipts Second Group \$ 291,941.51 Sase Rate Fee First Group \$ 229.53 Base Rate Fee Second Group \$ 3,106.26 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Group 3: New Town, Ross, Kenn COALL SIGN DSE CALL						0:20			for
Atal DSEs 1.00 Total DSEs 1.00 Gross Receipts First Group S 229.53 Base Rate Fee Second Group THIRD SUBSCRIBER GROUP DMMUNITY/ AREA Group 3: New Town, Ross, Kenn CALL SIGN DSE SRE 0.25 PPB3 0.25 PPB3 0.25 PPB4 0.25 PPB4 0.25 PPB4 0.25 PPB4 0.25 PB64 0.25 PB763 DSE CALL SIGN DSE CALL SIGN DSE SRE 0.25 PPB763 0.25 PPB763 0.25 PPB764 0.25 PPB765 DSE COMMUNITY/ AREA Group 4: Plaza, Makoti, Douglas, Ma									-
See Rate Fee First Group S 21,572.45 See Rate Fee Second Group S 291,941.51									Stations
Same Rate Fee First Group Same 21,572.45 Same Rate Fee First Group Same Rate Fee First Group Same Rate Fee First Group Same Rate Fee Second Group Same Rate Fee Fourth Group S									
Same Rate Fee First Group Same 21,572.45 Same Rate Fee First Group Same Rate Fee First Group Same Rate Fee First Group Same Rate Fee Second Group Same Rate Fee Fourth Group S									
Same Rate Fee First Group Same 21,572.45 Same Rate Fee First Group Same Rate Fee First Group Same Rate Fee First Group Same Rate Fee Second Group Same Rate Fee Fourth Group S									
See Rate Fee First Group S 21,572.45 See Rate Fee Second Group S 291,941.51				4.55					
Base Rate Fee First Group THIRD SUBSCRIBER GROUP OMMUNITY/ AREA Group 3: New Town, Ross, Kenn CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE SRE 0.25 PB2 0.25 PB3 0.25 PB4 0.25 PB4 0.25 PB5 0.25 PB6 0.25 PB6 0.25 PB7 0.25 PB8 0.	Γotal DSEs							-	
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Group 3: New Town, Ross, Kenn CALL SIGN DSE CALL S	Gross Receipts First G	iroup	\$ 2'	1,572.45	Gross Receipts Sec	cond Group	\$ 2	291,941.51	
COMMUNITY/ AREA Group 3: New Town, Ross, Kenn COMMUNITY/ AREA Group 4: Plaza, Makoti, Douglas, M.	Base Rate Fee First G	roup	\$	229.53	Base Rate Fee Sec	cond Group	\$	3,106.26	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE SRE 0.25 KSRE 0.25 PPB2 0.25 PPB3 0.25 PPB4		THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
Name	COMMUNITY/ AREA	Group 3	3: New Town, Ro	ss, Kenn	COMMUNITY/ ARE	A Group 4	: Plaza, Makoti, I	Douglas, M	
PB2	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
PB2	KSRE	0.25			KSRE	0.25			
PB3	PPB2	···					-		
PPB4 0.25 PPB4 0	PPB3	···					-		
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	PPB4	···							
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.							•		
see Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.									
ase Rate Fee Third Group \$ 2,275.43 Base Rate Fee Fourth Group \$ 450.61 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Total DSEs	_						-	
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third (Group	\$ 213	3,855.83	Gross Receipts Fou	ırth Group	\$	42,350.26	
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Base Rate Fee Third (Group	\$ 2	2,275.43	Base Rate Fee Fou	ırth Group	\$	450.61	
er here and in block 3, line 1, space L (page 7) \$ 7,994.37				criber group	as shown in the boxe	s above.	¢	7,994.37	

	3779							
		RIBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: C	Bl
	IP	I SUBSCRIBER GROU	SIXTH		JP	SUBSCRIBER GROU	FIFTH	
9 Computation	0			COMMUNITY/ AREA	Shield,	5: Parshall, White	Group 5	COMMUNITY/ AREA
of Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and							0.25	KSRE
Syndicate							0.25	PPB2
Exclusivity							0.25	PPB3
Surcharge							0.25	PPB4
for						-		
Partially						-	-	
Distant								
Stations								
_			<u> </u>					
	0.00			Total DSEs	1.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	,630.75	\$ 181,	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secor	,932.55	\$ 1.	roup	3ase Rate Fee First G
=	0.00			Base Rate Fee Secon	· ·			
=	0.00	\$ I SUBSCRIBER GROU		Base Rate Fee Secon	· ·	\$ 1,		Base Rate Fee First G
=	0.00				JP			
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
=	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
= - - - -	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
= - - - - - -	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
= - - - - - - -	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
= - - - - - - - - - - - - - - - - - - -	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	CALL SIGN
	0.00	I SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNE Reservation Telep						S	YSTEM ID# 3779	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
		-						
	<u> </u>		ļ					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
EL	EVENTH.	SUBSCRIBER GRO	JP		TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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	<u>\$</u>	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	s above.	\$		

Reservation Telephone (BLE SYSTEM: Cooperative				S	48TEM ID# 3779		
	: COMPUTATION O							
	H SUBSCRIBER GRO		FOURTEENTH SUBSCRIBER GROUP					
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE					
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		
FIFTEENT	H SUBSCRIBER GRO)UP		SIXTEENTH	I SUBSCRIBER GROU	JP		
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			Total DSEs			0.00		
otal DSEs		0.00	Total DSES					
otal DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		

Reservation Telephone	ABLE SYSTEM: Cooperative					48TEM ID# 3779		
	A: COMPUTATION (
	TH SUBSCRIBER GR		EIGHTEENTH SUBSCRIBER GROUP					
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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		
NINTEEN	TH SUBSCRIBER GR	OUP		TWENTIETH	I SUBSCRIBER GROU	JP		
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		0.00	Total DSEs	•		0.00		
otal DSEs								
otal DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		

Reservation Telep						SY	STEM ID# 3779	Name
		COMPUTATION OF SUBSCRIBER GROU		Ti .		IBER GROUP SUBSCRIBER GROUP	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	 	+	0.00	Total DSEs	-	' '	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
·							-	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	Y-THIRD	SUBSCRIBER GROU		li	Y-FOURTH	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			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 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 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 SIG
CALL SIGN DSE CA
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group TWENTY-SEVENTH SUBSCRIBER GROUP TOMMUNITY/ AREA COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group TWENTY-SEVENTH SUBSCRIBER GROUP TOMMUNITY/ AREA COMMUNITY/ AREA
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group TWENTY-SEVENTH SUBSCRIBER GROUP TOMMUNITY/ AREA COMMUNITY/ AREA
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA OCCUMMUNITY/ AREA
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group TWENTY-SEVENTH SUBSCRIBER GROUP TOMMUNITY/ AREA COMMUNITY/ AREA
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 TWENTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA OCCUMMUNITY/ AREA
TWENTY-SEVENTH SUBSCRIBER GROUP TOMMUNITY AREA TOMMUNITY AREA TOMMUNITY AREA TOMMUNITY AREA TOMMUNITY AREA
TWENTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA
OMMUNITY/ AREA 0 COMMUNITY/ AREA
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE
otal DSEs 0.00 Total DSEs 0.00
iross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00

LEGAL NAME OF OWNE Reservation Telep						S	YSTEM ID# 3779
				TE FEES FOR EAC			
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		_					
		_					
		_					
otal DSEs			0.00	Total DSEs			0.00
ross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
THIR	TY-FIRST	SUBSCRIBER GRO	UP	THIR	TY-SECONE	SUBSCRIBER GROU	JP
OMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs			0.00	Total DSEs			0.00
ross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00
ase Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00
			0.00	Suso Rate 1 66 i Oui	Стоир	Ψ	0.00
Base Rate Fee: Add the Enter here and in block	ne base ra k 3, line 1,	te fees for each subs	scriber group	as shown in the boxe	s above.	\$	

Reservation Telephone C	BLE SYSTEM: ooperative				S'	49 YSTEM ID# 3779
			TE FEES FOR EAC			
	SUBSCRIBER GRO		††		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
	SUBSCRIBER GRO	UP	TH	IRTY-SIXTH	I SUBSCRIBER GROU	JP
OMMUNITY/ AREA		^	001444444			•
		0	COMMUNITY/ AREA			0
	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	DSE
CALL SIGN DSE		DSE	CALL SIGN Total DSEs	DSE		DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		DSE	CALL SIGN Total DSEs	DSE		DSE

DI OCK A						3779
			TE FEES FOR EAC			
	SUBSCRIBER GRO		Ħ		H SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
Total DSEs		0.00	Total DSEs			0.00
Gross Receipts 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
THIRTY-NINTH	SUBSCRIBER GRO)UP		FORTIETH	1 SUBSCRIBER GROU	JP
COMMUNITY/ AREA		0	COMMUNITY/ AREA 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

LEGAL NAME OF OWNE Reservation Telep						S	YSTEM ID# 3779	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
FOR ⁻	TY-FIRST	SUBSCRIBER GRO	UP	FOR	TY-SECONE	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
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	Y-THIRD	SUBSCRIBER GRO	UP	11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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	e base rat 3, line 1, s	e fees for each subse	criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative \$\text{SYSTEM ID#}{3779}\$								Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	ΓY-FIFTH	SUBSCRIBER GRO		11		I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		31.122.21.011						Base Rate Fee
		-						and
								Syndicated
								Exclusivity Surcharge
								for
		-						Partially
		-						Distant
								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	and Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GRO	UP	FOR	RTY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	•				•			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subse space L (page 7)	criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CAB Reservation Telephone C					S	YSTEM ID# 3779
			TE FEES FOR EAC			
	SUBSCRIBER GRO				SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	_					
	,,					
	 -					
	•					
otal DSEs		0.00	Total DSEs	•		0.00
ross 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
	SUBSCRIBER GRO		li		SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
·			0.4.1.0.0.1			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	CALL SIGN	0.00	Total DSEs	DSE	CALL SIGN	DSE
otal DSEs	S S				CALL SIGN	
Total DSEs		0.00	Total DSEs			0.00
CALL SIGN DSE CALL SIGN DSE Cotal DSEs Gross Receipts Third Group Base Rate Fee Third Group		0.00	Total DSEs	th Group		0.00

LEGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative 3779								
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
FIFT	Y-THIRD	SUBSCRIBER GRO	UP	FIF.	TY-FOURTH	I 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
								Stations
		-						
		•						
Total DSEs			0.00	Total DSEs		Ц	0.00	
		_						
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-FIFTH	SUBSCRIBER GRO	UP	11		I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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	e base rat 3, line 1, s	e fees for each subse	criber group	as shown in the boxes	s above.	\$		

	COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC				
COMMUNITY/ AREA			FI	FTY-EIGHTH	LALIDAADIDED ADAL		
	CALL SIGN	0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	
	CALL SIGN	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE					
	CALE SIGN DOE CALE SIGN DOE CALE SIGN DOE						
	-						
•							
	-						
	-						
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 Seco	ond Group	\$	0.00	
FIFTY-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	I SUBSCRIBER GROU	JP	
DMMUNITY/ 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	
Fross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ase Rate Fee Third Group	\$	0.00	Base Rate Fee Foun	th Group	\$	0.00	

	cooperative					49 YSTEM ID#
	COMPUTATION O					
	T SUBSCRIBER GRO		III		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs		Ц	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 Seco	ond Group	\$	0.00
	O SUBSCRIBER GRO		SIX	TY-FOURTH	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
······································	<mark>—</mark>					
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00
Total DSEs Gross Receipts Third Group Base Rate Fee Third Group	\$			·	\$	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative \$\text{SYSTEM ID#}{3779}\$								Name
BI	LOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	TY-FIFTH	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		0.122.0.0						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	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP	11		I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		••••••••••						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th 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	ne base rat	e fees for each subs	criber group	as shown in the boxes	s above.			

EGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative 3779									
				TE FEES FOR EACH		RIBER GROUP			
	Y-NINTH	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	
						H		Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00		
SEVENT	Y-FIRST	SUBSCRIBER GROU	ΙP	SEVENTY					
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		_							
						H			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative 3779									
SEVE	NTY-THIRD	COMPUTATION C SUBSCRIBER GRO	DUP	ATE FEES FOR EACH	UP 0	9				
COMMUNITY/ ARE	4		0	COMMUNITY/ ARE	COMMUNITY AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation 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		††		H SUBSCRIBER GRO	UP 0			
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		-								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative 3779									
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP				
SEVENTY-S	EVENTH	SUBSCRIBER GRO	JP	SEVEN	ITY-EIGHTH	I SUBSCRIBER GROU	JP	•		
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	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			
SEVENT	Y-NINTH	SUBSCRIBER GRO	JP		EIGHTIETH	I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		_								
		-								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative 3779									
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC						
EIGH1	ΓY-FIRST	SUBSCRIBER GRO	JP	EIGHT	Y-SECONE	SUBSCRIBER GROU	JP	•		
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		
						H		Exclusivity		
								Surcharge		
								for		
		-						Partially		
								Distant		
								Stations		
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			
EIGHT	Y-THIRD	SUBSCRIBER GRO	JP	EIGHT	EIGHTY-FOURTH SUBSCRIBER GROUP					
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		_								
		-								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$				

LEGAL NAME OF OWI						S	3779	Name
		COMPUTATION OF SUBSCRIBER GRO			E FEES FOR EACH SUBSCRIBER GROUP EIGHTY-SIXTH SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
								ı
								ı
								ı
		•						ı
							2.00	ı
Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	<u>\$</u>	0.00	ı
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	l
		SUBSCRIBER GRO		II		I SUBSCRIBER GRO	UP	ı
COMMUNITY/ AREA			0	COMMUNITY/ AREA	ı			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
								ı
		-						ı
								ı
		-						ı
		-						ı
								ı
								ı
								ı
								ı
								ı
		•						ı
Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	ı
								ı
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	ı
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	s above.	\$		l

LEGAL NAME OF OV Reservation Te						S	3779	Name
EIG		COMPUTATION OF SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	A		0	COMMUNITY/ AREA	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
								İ
								İ
								ı
		•						ı
							2.22	İ
Γotal DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	ı
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NI	NETY-FIRST	SUBSCRIBER GRO	UP	NINE	TY-SECONE	SUBSCRIBER GRO	UP	ı
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	ı			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ı
								ı
		-						İ
								ı
		-						ı
		-						ı
								İ
								ı
								ı
								ı
								İ
		•						İ
Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts Thir	rd Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	İ
								1
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	1
			criber group	as shown in the boxe	s above.			1
Enter here and in bl	ock 3, line 1, s	space L (page 7)				\$		1

	EGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative 3779									
				TE FEES FOR EAC						
NINET COMMUNITY/ AREA	Y-THIRD	SUBSCRIBER GRO	UP 0	NINE COMMUNITY/ AREA	JP 0	9				
			<u> </u>		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	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00			
Dana Bata Fan Finat On			0.00	Dana Bata Fan Oana			0.00			
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		SUBSCRIBER GROU	0.00			
COMMUNITY/ AREA	IY-FIFIH	SUBSCRIBER GRO	<u>0</u>	COMMUNITY/ AREA						
COMMONTT / AREA				COMMONT IT AREA						
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	e base rat 3, line 1, s	e fees for each subsepace L (page 7)	criber group	as shown in the boxes	s above.	\$				

Reservation Telephone	BLE SYSTEM: Cooperative				S	YSTEM ID# 3779	
	: COMPUTATION C						
	H SUBSCRIBER GRO		NINETY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	
NINETY-NINT	H SUBSCRIBER GRO	DUP	ONE H	HUNDREDTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						L	
otal DSEs		0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	

LEGAL NAME OF OWNER OF CAE Reservation Telephone C					S	3779		
			TE FEES FOR EAC					
ONE HUNDRED FIRST	SUBSCRIBER GRO		ONE HUNDRED SECOND SUBSCRIBER GROUP					
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	.							
		<u> </u>						
	-							
	" 							
otal DSEs	!!	0.00	Total DSEs	<u> </u>	!!	0.00		
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
ONE HUNDRED THIRD	SUBSCRIBER GRO		11		SUBSCRIBER GROU			
	SUBSCRIBER GRO	0 0	ONE HUNDRE		I SUBSCRIBER GROU	JP 0		
OMMUNITY/ AREA	SUBSCRIBER GRO		11		SUBSCRIBER GROU			
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0		
CALL SIGN DSE		0	COMMUNITY/ AREA			0		
CALL SIGN DSE CALL SIGN DSE Total DSEs		DSE	CALL SIGN	DSE		DSE		
CALL SIGN DSE CALL SIGN DSE Total DSEs	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE O.00		
COMMUNITY/ AREA	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE O.00		

LEGAL NAME OF OW Reservation Tele						S	3779	Name
ONE HUND	RED FIFTH	COMPUTATION O SUBSCRIBER GRO	UP	TE FEES FOR EAC		9		
COMMUNITY/ AREA	Α		0	COMMUNITY/ ARE	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	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		ii .		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_	•••					
		_						
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo	I the base ra tock 3, line 1,	te fees for each subs	scriber group	as shown in the boxe	es above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative 3779									
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP				
ONE HUNDRE	D NINTH	SUBSCRIBER GROU	JP	ONE HUNDE	RED TENTH	I SUBSCRIBER GROU	JP	•		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant		
								Stations		
						H				
Total DSEs			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	nd Group	\$	0.00			
ONE HUNDRED EL	EVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						H				
						H				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Base Rate Fee: Add th Enter here and in block	e base rat 3, line 1, s	re fees for each subsc space L (page 7)	criber group	as shown in the boxes	above.	\$				

LEGAL NAME OF OW Reservation Tele						S	3779	Name
ONE HUNDRED TH	HIRTEENTH	COMPUTATION OF SUBSCRIBER GROU	JP	ii —	URTEENTH	RIBER GROUP I SUBSCRIBER GRO		9
COMMUNITY/ AREA	Α		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
T-4-1 DOE-			0.00	T-A-I DOE-			0.00	
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	
ONE HUNDRED	FIFTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	SIXTEENTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$		

Reservation Tele						S	3779	Name
ONE HUNDRED SEV	ENTEENTH		JP	ii —	GHTEENTH	RIBER GROUP I SUBSCRIBER GRO		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		Ш	0.00	
	0							
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED N	IINTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED 1	TWENTIETH	SUBSCRIBER GRO	UP	
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	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			riber group	as shown in the boxes	above.	\$		

BLOCK A: COMPUTATION OF BASE ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DS	C		ITY-SECOND	IBER GROUP SUBSCRIBER GROUP CALL SIGN	O DSE	9 Computation
COMMUNITY/ AREA	0	COMMUNITY/ AREA			0	_
				CALL SIGN		_
	SE I			CALL SIGN	DSE	
						of
						Base Rate I
				Ц		and
						Syndicate
						Exclusivit
						Surcharg
						for
						Partially
						Distant
						Stations
otal DSEs 0.0		Total DSEs		!!	0.00	
			1 0			
Gross Receipts First Group \$ 0.0	<u> </u>	Gross Receipts Seco	nd Group	\$	0.00	
Sase Rate Fee First Group \$ 0.0	00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP	(ONE HUNDRED TWEN	ITY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA	0	COMMUNITY/ AREA			0	
CALL SIGN DSE CALL SIGN DS	SE	CALL SIGN	DSE	CALL SIGN	DSE	
······································						
fotal DSEs 0.0	00_	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.0	00_	Gross Receipts Four	th Group	\$	0.00	
	$\exists \parallel$					
Base Rate Fee Third Group \$ 0.0	00	Base Rate Fee Fourt	h Group	\$	0.00	

Reservation Telephone	Cooperative					3779
			ATE FEES FOR EAC			
ONE HUNDRED TWENTY-FIFT COMMUNITY/ AREA	H SUBSCRIBER GROU	P 0	ONE HUNDRED TW		SUBSCRIBER GROUP	0
COMMUNITY AREA			COMMONT IT AREA			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
-t-I DOF-	Ц	0.00	T-A-I DOE-		<u> </u>	0.00
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
	r					
lase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
					\$ I SUBSCRIBER GROUP	
E HUNDRED TWENTY-SEVENT				ENTY-EIGHTH		
E HUNDRED TWENTY-SEVENT		P	ONE HUNDRED TWE	ENTY-EIGHTH)
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT	H SUBSCRIBER GROU	P 0	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	0
E HUNDRED TWENTY-SEVENT COMMUNITY/ AREA CALL SIGN DSE	H SUBSCRIBER GROU	DSE	ONE HUNDRED TWE	ENTY-EIGHTH	SUBSCRIBER GROUP	DSE
E HUNDRED TWENTY-SEVENT COMMUNITY/ AREA CALL SIGN DSE Otal DSEs	H SUBSCRIBER GROU	DSE DSE O.00	ONE HUNDRED TWE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROUP	DSE 0.00
CALL SIGN DSE	H SUBSCRIBER GROU	DSE	CALL SIGN	DSE	SUBSCRIBER GROUP	DSE
CALL SIGN DSE COMMUNITY/ AREA CALL SIGN DSE Total DSEs Gross Receipts Third Group	H SUBSCRIBER GROU	DSE DSE O.00	ONE HUNDRED TWE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE 0.00

	Cooperative				S	YSTEM ID# 3779	
BLOCK A	: COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED TWENTY-NINT	H SUBSCRIBER GROU		ii e		SUBSCRIBER GROUP		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THIRTY-FIRS	T SUBSCRIBER GROU	IP	ONE HUNDRED THI	RTY-SECONI	SUBSCRIBER GROUP)	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	0.00	Total DSEs	DSE	CALL SIGN	0.00	
Total DSEs	CALL SIGN				CALL SIGN		
Total DSEs Gross Receipts Third Group		0.00	Total DSEs			0.00	

LEGAL NAME OF OW Reservation Tele						S	3779	Name
ONE HUNDRED TI	HIRTY-THIRD	COMPUTATION O SUBSCRIBER GROU	Р	11	IRTY-FOURTH	IBER GROUP I SUBSCRIBER GROUI	P	9
COMMUNITY/ AREA	Α		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
						•		
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GROU		11		SUBSCRIBER GROUI	_	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						- 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d 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.	\$		

BLOCK A: COMPUTATION O NE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROU COMMUNITY/ AREA CALL SIGN DSE CALL SIGN		TE EEEO EOD EA			3779	Naı
COMMUNITY/ AREA	Р	TIE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
				SUBSCRIBER GROUP		9
	0	COMMUNITY/ ARE	Α		0	Compu
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	o
						Base R
						an
						Syndic
						Exclus Surch
						fo
						Parti
						Dist
						Stati
	0.00	T		11	0.00	
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 THIRTY-NINTH SUBSCRIBER GROU	P	ONE HUNDRE	D FORTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	0	COMMUNITY/ ARE			0	
CALL SIGN DSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
······································						
		Total DSEs			0.00	
otal DSEs	0.00					
Total DSEs Gross Receipts Third Group \$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
		Gross Receipts Fou	·	\$	0.00	

Reservation Telephone C	BLE SYSTEM: Cooperative				S	YSTEM ID# 3779
			TE FEES FOR EAC			
ONE HUNDRED FORTY-FIRS' COMMUNITY/ AREA	T SUBSCRIBER GROU	P 0	ONE HUNDRED FOR COMMUNITY/ AREA		SUBSCRIBER GROUP	0
		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Γotal DSEs	++	0.00	Total DSEs	_	! !	0.00
Gross 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
ONE HUNDRED FORTY-THIRI	O SUBSCRIBER GROU		ii .		SUBSCRIBER GROUP	
	SUBSCRIBER GROU	P 0	ONE HUNDRED FOR COMMUNITY/ AREA		I SUBSCRIBER GROUP	0
	CALL SIGN		ii .		SUBSCRIBER GROUP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE		0	COMMUNITY/ AREA			0
CALL SIGN DSE CALL SIGN DSE Total DSEs		DSE	COMMUNITY/ AREA	DSE		DSE
CALL SIGN DSE CALL SIGN DSE Total DSEs	CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE O.00
COMMUNITY/ AREA	CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE O.00

LEGAL NAME OF OWNE Reservation Telep						S	YSTEM ID# 3779	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED F	ORTY-SIXTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		_						Surcharge
		-						for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	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 FORTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-EIGHTH	I 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			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subsc space L (page 7)	riber group	as shown in the boxes	s above.	\$		

OF OWNER OF CABLE SYSTEM: n Telephone Cooperative	3779
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
ED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUBSCRIBER GRO	DUP
7/ AREA COMMUNITY/ AREA	0
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE
0.00 Total DSEs	0.00
ts First Group \$ 0.00 Gross Receipts Second Group \$	0.00
ee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
Buse rate recocond group	
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP	1
	1
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP	DUP
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA	DUP 0
RED FIFTY-FIRST SUBSCRIBER GROUP / AREA 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	DUP O DSE
RED FIFTY-FIRST SUBSCRIBER GROUP // AREA 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 DSE CALL SIG	DUP DSE DSE 0.00

EGAL NAME OF OWNER OF CABLE SYSTEM: Reservation Telephone Cooperative					3779	
BLOCK A: COMPUTATION OF BA						
ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA	0	ONE HUNDRED FIFTY	/-FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY AREA	U	COMMUNITY/ AREA			U	
CALL SIGN DSE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs	0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$	0.00	Gross Receipts Secon	d Group	\$	0.00	
		Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Group \$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP		ONE HUNDRED FIR		\$ SUBSCRIBER GROU	JP	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP					-	
		ONE HUNDRED FIR			JP	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
CALL SIGN DSE CALL SIGN	0	ONE HUNDRED FIF	TY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN Fotal DSEs	DSE	ONE HUNDRED FIF	DSE	SUBSCRIBER GROU	JP O DSE	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN Fotal DSEs	0 DSE	ONE HUNDRED FIF COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE 0.00	

LEGAL NAME OF OWNE Reservation Telep						S	YSTEM ID# 3779	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
ONE HUNDRED FIFTY-	SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED F	IFTY-EIGHTH	I SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		_						Base Rate Fee
								and
								Syndicated Exclusivity
						·		Surcharge
								for
								Partially
								Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROUP)	ONE HUNDR	ED SIXTIETH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			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 G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subse	criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE Reservation Telep						S	YSTEM ID# 3779	Name
Bl	_OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA	Group	1: Mandaree		COMMUNITY/ AREA	Group 2			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
						 		Syndicate
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		_						Surcharge
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								Partially Distant
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	···							
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	<u>\$</u> 21,	572.45	Gross Receipts Secon	d Group	\$ 29	91,941.51	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	ID		FOLIRTH	SUBSCRIBER GROU	ID	
COMMUNITY/ AREA		3: New Town, Ro		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
Γotal DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	Group	\$ 213,	855.83	Gross Receipts Fourth	Group	\$ 2	12,350.26	
3ase Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		te fees for each subso	riber group	as shown in the boxes a	above.	\$	0.00	

9 Name	YSTEM ID# 3779							LEGAL NAME OF OWNE Reservation Telep
				TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9		SUBSCRIBER GROU	SIXTH			SUBSCRIBER GROU		_
Computatio	0			COMMUNITY/ AREA	Shield,	5: Parshall, White		COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated						-		
Exclusivity Surcharge						_		
for								
Partially						-		
Distant								
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_	0.00	\$	d Group	Gross Receipts Secon	630.75	\$ 181,	oup	Gross Receipts First Gr
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	•	SUBSCRIBER GROU		Base Rate Fee Secon		SUBSCRIBER GROU		
	•			Base Rate Fee Secon COMMUNITY/ AREA				S
<u> </u>	UP				JP			S
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	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
	UP 0	I SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	EVENTH	S COMMUNITY/ AREA
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Name	YSTEM ID# 3779						R OF CABL hone Co	Reservation Telep
				TE FEES FOR EACH				Bl
9		SUBSCRIBER GROU	TENTH			SUBSCRIBER GROU	NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicated						-		
Exclusivity Surcharge								
for							-	
Partially								
Distant								
Stations								
	0.00			Total DSEs	0.00			Total DSEs
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	JP	SUBSCRIBER GROU	TWELVTH		JP	SUBSCRIBER GROU	EVENTH	EI
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
		CALL SIGN	DSE	COMMUNITY/ AREA	O DSE	CALL SIGN	DSE	COMMUNITY/ AREA
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Mana	SYSTEM ID							LEGAL NAME OF OWNE Reservation Telep
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<u>,</u> 9		SUBSCRIBER GROU	RTEENTH			SUBSCRIBER GROU	RTEENTH	
0 Computati				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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Distant		-				-		
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<u>-</u> 	0.00		l Group	Base Rate Fee Secon	0.00		roup	Base Rate Fee First G
<u>-</u> 	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gi
0	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First Gi
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0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Gr FIF COMMUNITY/ AREA
0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Gr FIF COMMUNITY/ AREA
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0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Gr FIF COMMUNITY/ AREA
0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Gr FIF COMMUNITY/ AREA
0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First G FII COMMUNITY/ AREA
0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First G FII COMMUNITY/ AREA
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0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First G FII COMMUNITY/ AREA
0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First G FII COMMUNITY/ AREA
0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Gr FIF COMMUNITY/ AREA
0	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Gr FIF COMMUNITY/ AREA
O	0.00 DUP	\$ SUBSCRIBER GROU	l Group XTEENTH	Base Rate Fee Secon S COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	FIECOMMUNITY/ AREA CALL SIGN
	O.00 DUP	\$ SUBSCRIBER GROU	d Group XTEENTH DSE	Base Rate Fee Secon S COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	TEENTH	Base Rate Fee First Gr FIF COMMUNITY/ AREA

Name a	YSTEM ID# 3779	Sì				operative		Reservation Telep
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROU	NTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00		4	Total DSEs	0.00		* *	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
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	0.00 JP 0	SUBSCRIBER GROU	d Group VENTIETH	Base Rate Fee Secon T\ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ITEENTH	COMMUNITY/ AREA
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	JP	SUBSCRIBER GROU				SUBSCRIBER GROU		
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	0.00 JP	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	Y-THIRD	ase Rate Fee First Gr TWENT OMMUNITY/ AREA
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	0.00 JP	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	Y-THIRD	ase Rate Fee First Gr TWENT OMMUNITY/ AREA
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BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FORTY-FIFTH SUBSCRIBER GROUP FORTY-SIXTH SUBSCRIBER GROUP	Name	3779					LE SYSTEM: poperative		Reservation Telep
#	9		SUBSCRIBER GROU	RTY-SIXTH	H		SUBSCRIBER GROU	TY-FIFTH	
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LEGAL NAME OF OWNE Reservation Telep						SY	STEM ID# 3779	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
FIFT	Y-THIRD	SUBSCRIBER GROU	JP	FIFT	Y-FOURTH	SUBSCRIBER GROU	Р	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
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		•						
Total DSEs	!!		0.00	Total DSEs	1		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FIF	TY-FIFTH	SUBSCRIBER GROU	JP	FII	TY-SIXTH	I SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee Third G Base Rate Fee: Add th Enter here and in block	e base rat	e fees for each subsc				\$	0.00	

LEGAL NAME OF OWN Reservation Tele						S	YSTEM ID# 3779	Name
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		t i		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
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								Base Rate F
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Total DSEs	_	!	0.00	Total DSEs		!!	0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	TY-NINTH	SUBSCRIBER GRO				I SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i>\</i>		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 Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
		Į*	0.00		c.cup	Į *	3.00	
Base Rate Fee: Add t			criber group	as shown in the boxes	s above.	\$		

Mana	YSTEM ID# 3779					operative		LEGAL NAME OF OWNE Reservation Telep
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GROU	TY-FIRST	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and		-					-	
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	0.00		d Group	Base Rate Fee Secon		\$ SUBSCRIBER GROU		
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	0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SIXTY COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE	SUBSCRIBER GROU	DSE	SIXT COMMUNITY/ AREA CALL SIGN

	BLE SYSTEM: Cooperative				S	3779
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	H SUBSCRIBER GRO		l		SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0
CALL SIGN DSE	CALL SIGN	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
rioco riocolpto i not Group			ll cross resolpts cost	ond Oroup		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
SIXTY-SEVENT	H SUBSCRIBER GRO	UP	SIX	KTY-EIGHTH	SUBSCRIBER GRO	UP
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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Total DSEs		0.00	Total DSEs			0.00
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Total DSEs Gross Receipts Third Group	\$			th Group	\$	0.00
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ID# 779 Name	SYSTEM I	S						LEGAL NAME OF OWNE Reservation Telep
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<u> </u>	UP	SUBSCRIBER GROU	NTIETH		1	SUBSCRIBER GROU	Y-NINTH	
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Name	YSTEM ID# 3779					ooperative	hone Co	Reservation Telep
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Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	3779	SY			•			LEGAL NAME OF OWNER Reservation Telep
				TE FEES FOR EACH				
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Mana	YSTEM ID# 3779					operative		LEGAL NAME OF OWNE Reservation Telep
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Nonpermitted 3.75 Stations

Name	Reservation Telephone Cooperative BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Reservation Telephone Cooperative 3779 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 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 Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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