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

Return completed workbook by email to:

for Secondary Transmissions by Cable Systems (Long Form)

STATEMENT OF ACCOUNT

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

FOR COPYRIGHT OFFICE USE ONLY				
DATE RECEIVED	AMOUNT			
	\$			
	ALLOCATION NUMBER			
03/19/2020				

<u>coplicsoa@loc.gov</u>

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:						
Accounting Period		2019/2					
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.						
		GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM CHAMPLAIN BROADBAND, LLC D/B/A BURLINGTON TELECOM					
				(062624	20192	
					062624	2019/2	
		200 CHURCH ST., STE 200 BURLINGTON, VT 05401					
С		TRUCTIONS: In line 1, give any business or trade names used to es already appear in space B. In line 2, give the mailing address o					
System	_	DENTIFICATION OF CABLE SYSTEM:					
	2 (MAILING ADDRESS OF CABLE SYSTEM: Number, street, rural route, apartment, or suite number) City, town, state, zip code)					
D	Instr	ructions: For complete space D instructions, see page 1b. Identif	y only the frst comr	nunity served below and re	elist on pag	e 1b	
Area	with	all communities.					
Served	(CITY OR TOWN	STATE				
First	l	BURLINGTON	VT				
Community		low is a sample for reporting communities if you report multiple ch	· · · ·				
	Alda	CITY OR TOWN (SAMPLE)	STATE MD	CH LINE UP		GRP# 1	
Sample	Alda MD A Alliance MD B					2	
	Gering MD B					3	
form in order to pro numbers. By provid search reports prep	ocess yo ling PII, pared fo	on 111 of title 17 of the United States Code authorizes the Copyright Offce to colle- our statement of account. PII is any personal information that can be used to identif you are agreeing to the routine use of it to establish and maintain a public record, r the public. The effect of not providing the PII requested is that it may delay proce nents of account, and it may affect the legal sufficiency of the fling, a determination	y or trace an individual, which includes appearin ssing of your statement	such as name, address and telep ig in the Offce's public indexes an of account and its placement in th	hone nd in		

Α	ACCOUNTING PERIO	D COVERED BY THIS STATEMENT:
Accounting	2019/2	(enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)
Period		

	INSTR	RUCTIONS:	T							
в	Give the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corporation, give the full									
Owner	corporate title of the subsidiary, not that of the parent corporation.									
	In line 2, list any other names under which the owner conducts the business of the cable system.									
		re were different owners during the accounting period, only the owner on the last day of the accounting period should submit								
	a sin	gle statement of account and royalty fee payment covering the entire accounting period.	BARCODE DAT							
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 062624	Filing Period							
	1	LEGAL NAME OF OWNER OF CABLE SYSTEM:	062							
		CHAMPLAIN BROADBAND, LLC								
	2	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):								
		D/B/A BURLINGTON TELECOM								
	3	MAILING ADDRESS OF OWNER OF CABLE SYSTEM:								
		200 CHURCH ST., STE 200								
		(Number, street, rural route, apartment, or suite number)								
		BURLINGTON, VT 05401								
		(City, town, state, zip)	1							
	INIST	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these	-							
		s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.								
С	name	s aneady appear in space D. In the 2, give the maning address of the system, in different non-the address given in space D.								
System	1	IDENTIFICATION OF CABLE SYSTEM:								
		MAILING ADDRESS OF CABLE SYSTEM:								
	2	(Number, street, rural route, apartment, or suite number)								
		(City, town, state, zp code)								

	BLO					
Е		NO. OF				
-	CATEGORY OF SERVICE	SUBSCRIBERS	RATE			
Secondary	Residential:	ODDOCIVIDENO	INTE			
Transmission	Service to first set	1 /181	\$45.00			
Service: Sub-	Service to additional set(s)	1,401	Ş43.00			
scribers and	 FM radio (if separate rate) 					
Rates	Motel, hotel					
	Commercial	247	45.00			
	Converter					
	Residential					
	Non-residential					
			BLOCK 1			7
	CATEGORY OF SERVICE	RATE	CATEGORY OF	SERVICE	RATE	
F	Continuing Services:		Installation: No	on-residential		
	Pay cable	\$9-15		Motel hotel	75.00	
Services	Pay cable—add'l channel	12.23		Commercial	75.00	1
Other Than	Fire protection			Pav cable	\$9-15	1
Secondary	Burdlar protection			Pay cable-add'l channel	21.25	•
ransmissions:	Burgiar protection Installation: Residential			Pay cable-add i channel Fire protection		•
ransmissions: Rates		65.00				
Rates	First set	65.00		Burglar protection		
	Additional set(s)		Other services		05.55	1
	FM radio (if separate rate)			Reconnect	25.00	
	Converter			Disconnect		
		1		 Outlet relocation 	50.00	
		1	1	 Move to new address 	-	
M Channels	Instructions: You must give (1 to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa	ble system's total nnels on which the	number of activ e cable	rated channels, during the a		18
	to its subscribers and (2) the ca 1. Enter the total number of cha	ble system's total nnels on which the dcast stations vated channels rried television bro	number of activ e cable 	ated channels, during the a		
	 to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of action which the cable system ca 	ble system's total nnels on which th dcast stations vated channels rried television brc rrED IF FURTHER ment of account.)	number of activ e cable wadcast stations	ated channels, during the a	ccounting period.	18
Channels N Individual to	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television bros 2. Enter the total number of act on which the cable system ca and nonbroadcast services . INDIVIDUAL TO BE CONTACT	ble system's total nnels on which the dcast stations vated channels rried television brc	number of activ e cable wadcast stations	ated channels, during the a	ccounting period.	18
Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services . INDIVIDUAL TO BE CONTACT we can contact about this states	ble system's total nnels on which the dcast stations vated channels rried television brc TED IF FURTHER ment of account.) /s/Michael C	number of activ e cable badcast stations INFORMATION	vated channels, during the a	ccounting period.	18
Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of act on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this states Name	ble system's total nnels on which th dcast stations vated channels rried television brc FED IF FURTHER ment of account.) /s/Michael C. %um BURLINGTO	number of activ e cable padcast stations INFORMATIO allahan 4 ST., STE 2 ber, street, rural	vated channels, during the a	ccounting period.	18
Channels N Individual to Be Contacted for Further	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of act on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this states Name	ble system's total nnels on which th dcast stations vated channels rried television brc FED IF FURTHER ment of account.) /s/Michael C. %um BURLINGTO	number of activ e cable oadcast stations INFORMATIO allahan I ST., STE 2 ber, street, rural N, VT 05401 town, state, zjp)	vated channels, during the a	ccounting period.	18 378 802-540-0007
Channels N Individual to Be Contacted for Further Information	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of acti on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this stated Name Address	ble system's total nnels on which the dcast stations vated channels rried television brc TED IF FURTHER nent of account.) /s/Michael C. 200 CHURCI (Num BURLINGTO (City, mcallahan@	number of activ e cable oadcast stations INFORMATIO allahan 4.ST., STE 2 ber, stret, rural N, VT 05401 town, state, zip) burlingtonte be certified and h an electronic	vated channels, during the a	ccounting period.	18 378 802-540-0007 802-652-4220
Channels N Individual to Be Contacted for Further Information	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of action on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this state Name Address Email (optional) CERTIFICATION (This statement Signature Space O – this form without the statement Signature Space O – this for	ble system's total nnels on which the dcast stations vated channels rried television brc TED IF FURTHER nent of account.) /s/Michael C. 200 CHURCI (Num BURLINGTO (City, mcallahan@	number of activ e cable oadcast stations INFORMATIO allahan 4.ST., STE 2 ber, stret, rural N, VT 05401 town, state, zip) burlingtonte be certified and h an electronic	Alecon.com	ccounting period.	18 378 802-540-0007 802-652-4220
Channels N Individual to Be Contacted for Further Information	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of action on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this state Name Address Email (optional) CERTIFICATION (This statement Signature Space O – this form without the statement Signature Space O – this for	ble system's total nnels on which the dcast stations vated channels rried television brc TED IF FURTHER nent of account.) /s/Michael C. 200 CHURCI (Num BURLINGTO (City, mcallahan@	number of activ e cable inFORMATION allahan i ST., STE 2 be certifed and h an electronic be certifed and h an electronic town, state, zip) burlingtonte be certifed and h an electronic town state, zip)	Ale channels, during the a signed in accordance with C signed in accorda	ccounting period.	18 378 802-540-0007 802-652-4220 sigulations.) forget to enter an electronic
Channels N Individual to Be Contacted for Further Information	to its subscribers and (2) the ca 1. Enter the total number of cha system carried television broa 2. Enter the total number of action on which the cable system ca and nonbroadcast services INDIVIDUAL TO BE CONTACT we can contact about this state Name Address Email (optional) CERTIFICATION (This statement Signature Space O – this form without the statement Signature Space O – this for	ble system's total nnels on which the dcast stations vated channels rried television brc TED IF FURTHER nent of account.) /s/Michael C. 200 CHURCI (Num BURLINGTO (City, mcallahan@	number of activ e cable badcast stations iNFORMATIO allahan 1 ST., STE 2 ber, street, rural N, VT 05401 N, VT 05401 burlingtonte be certifed and h an electronic ne signature bo: Typed or prirr Title: (Title:	Alectric channels, during the a second channels, during the a second channels, during the a second channels, during the animal second channels, and the second channels of the second c	ccounting period.	18 378 802-540-0007 802-652-4220 sigulations.) forget to enter an electronic

Total Gross Receip	ts
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\$	783,039.57	
	ОК	Check figure
\$	783,039.57	1

3.75 Fee Space 9 Gross Receipts Space 9 Gross Receipts 783,039.57 783,039.57 ОК ОК

Subgroup Gross Receipts Total

Subgroup		Subgroup/Community Name	Gross Receipts
FIRST	1	BURLINGTON	\$ 783,039.57
SECOND	2		
THIRD	3		
FOURTH	4		
FIFTH	5		
SIXTH	6		
SEVENTH	7		
EIGHTH	8		
NINTH	9		
TENTH	10		
ELEVENTH	11		
TWELVTH THIRTEENTH	12		
FOURTEENTH	13 14		
FIFTEENTH	14		
SIXTEENTH	15		
SEVENTEENTH	10		
EIGHTEENTH	18		
NINTEENTH	10		
TWENTIETH	20		
TWENTY-FIRST	20		
TWENTY-SECOND	22		
TWENTY-THIRD	23		
TWENTY-FOURTH	24		
TWENTY-FIFTH	25		
TWENTY-SIXTH	26		
TWENTY-SEVENTH	27		
TWENTY-EIGHTH	28		
TWENTY-NINTH	29		
THIRTIETH	30		
THIRTY-FIRST	31		
THIRTY-SECOND	32		
THIRTY-THIRD	33		
THIRTY-FOURTH	34		
THIRTY-FIFTH	35		
THIRTY-SIXTH	36		
THIRTY-SEVENTH	37		
THIRTY-EIGHTH	38		
THIRTY-NINTH	39		
FORTIETH	40		
FORTY-FIRST	41		
FORTY-SECOND	42		
FORTY-THIRD	43		
FORTY-FOURTH	44		
FORTY-FIFTH	45		
FORTY-SIXTH	46		
FORTY-SEVENTH	47		
FORTY-EIGHTH FORTY-NINTH	48 49		
FIFTIETH	49 50		
FIFTY-FIRST	50 51		
FIFTY-SECOND	51		
FIFTY-THIRD	52		
FIFTY-FOURTH	54		
FIFTY-FIFTH	55		
FIFTY-SIXTH	56		
FIFTY-SEVENTH	57		
FIFTY-EIGHTH	58		
FIFTY-NINTH	59		
SIXTIETH	60		
SIXTY-FIRST	61		
SIXTY-SECOND	62		
SIXTY-THIRD	63		
	64		
SIXTY-FOURTH	64		
SIXTY-FOURTH SIXTY-FIFTH	64 65		

SIXTY-EIGHTH	68
SIXTY-NINTH	69
SEVENTIETH	70
SEVENTY-FIRST	71
SEVENTY-SECOND	72
SEVENTY-THIRD	73
SEVENTY-FOURTH	74
SEVENTY-FIFTH	75
SEVENTY-SIXTH	76
SEVENTY-SEVENTH SEVENTY-EIGHTH	77 78
SEVENTY-NINTH	78 79
EIGHTIETH	79 80
EIGHTY-FIRST	80 81
EIGHTY-SECOND	82
EIGHTY-THIRD	83
EIGHTY-FOURTH	84
EIGHTY-FIFTH	85
EIGHTY-SIXTH	86
EIGHTY-SEVENTH	87
EIGHTY-EIGHTH	88
EIGHTY-NINTH	89
NINTIETH	90
NINETY-FIRST	91
NINETY-SECOND	92
NINETY-THIRD	93
NINETY-FOURTH	94
NINETY-FIFTH	95
NINETY-SIXTH	96
NINETY-SEVENTH	97
NINETY-EIGHTH	98
NINETY-NINTH	99
ONE HUNDREDTH	100
ONE HUNDRED FIRST	101
ONE HUNDRED SECOND	102
	103
	104
ONE HUNDRED FIFTH	105
ONE HUNDRED SIXTH ONE HUNDRED SEVENTH	106 107
ONE HUNDRED SEVENTH	107
ONE HUNDRED EIGHTH	108 109
ONE HUNDRED TENTH	109
ONE HUNDRED ELEVENTH	110
ONE HUNDRED TWELVTH	112
ONE HUNDRED THIRTEENTH	112
ONE HUNDRED FOURTEENTH	113
ONE HUNDRED FIFTEENTH	115
ONE HUNDRED SIXTEENTH	116
ONE HUNDRED SEVENTEENTH	117
ONE HUNDRED EIGHTEENTH	118
ONE HUNDRED NINTEENTH	119
ONE HUNDRED TWENTIETH	120
ONE HUNDRED TWENTY-FIRST	121
ONE HUNDRED TWENTY-SECOND	122
ONE HUNDRED TWENTY-THIRD	123
ONE HUNDRED TWENTY-FOURTH	124
ONE HUNDRED TWENTY-FIFTH	125
ONE HUNDRED TWENTY-SIXTH	126
ONE HUNDRED TWENTY-SEVENTH	127
ONE HUNDRED TWENTY-EIGHTH	128
ONE HUNDRED TWENTY-NINTH	129
ONE HUNDRED THIRTIETH	130
ONE HUNDRED THIRTY-FIRST	131
ONE HUNDRED THIRTY-SECOND	132
ONE HUNDRED THIRTY-THIRD	133
ONE HUNDRED THIRTY-FOURTH	134
ONE HUNDRED THIRTY-FIFTH	135
ONE HUNDRED THIRTY-SIXTH	136
ONE HUNDRED THIRTY-SEVENTH	137
ONE HUNDRED THIRTY-EIGHTH	138
ONE HUNDRED THIRTY-NINTH	139
ONE HUNDRED FORTIETH	140
	141
ONE HUNDRED FORTY-SECOND	142

ONE HUNDRED FORTY-THI	RD 143
ONE HUNDRED FORTY-FOU	JRTH 144
ONE HUNDRED FORTY-FIF	TH 145
ONE HUNDRED FORTY-SIX	TH 146
ONE HUNDRED FORTY-SEV	/ENTH 147
ONE HUNDRED FORTY-EIG	HTH 148
ONE HUNDRED FORTY-NIN	ITH 149
ONE HUNDRED FIFTIETH	150
ONE HUNDRED FIFTY-FIRS	T 151
ONE HUNDRED FIFTY-SECO	DND 152
ONE HUNDRED FIFTY-THIR	D 153
ONE HUNDRED FIFTY-FOU	RTH 154
ONE HUNDRED FIFTY-FIFT	H 155
ONE HUNDRED FIFTY-SIXT	H 156
ONE HUNDRED FIFTY-SEVE	NTH 157
ONE HUNDRED FIFTY-EIGH	ITH 158
ONE HUNDRED FIFTY-NINT	TH 159
ONE HUNDRED SIXTIETH	160

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
WCAX	3	N	BURLINGTON, VT	0.250	
WVNY	4	N	BURLINGTON, VT	0.250	
WPTZ	5	N	PLATTSBURGH, NY	0.250	
WPTZ-2	325	N	PLATTSBURGH, NY	0.250	
WNNE	8	N	PLATTSBURGH, NY	0.250	
WETK	6	E	BURLINGTON, VT	0.250	
WETK-2	306	E	BURLINGTON, VT	0.250	
WETK-3	307	E	BURLINGTON, VT	0.250	
WETK-4	308	E	BURLINGTON, VT	0.250	
WFFF	9 62	1	BURLINGTON, VT	1.000	
WFFF-2 WFFF-3	103	1	BURLINGTON, VT BURLINGTON, VT	1.000 1.000	
WCFE	103	1		1.000	
WCFE WCFE-2	311	1	PLATTSBURGH, NY PLATTSBURGH, NY	1.000	
CBFT	11	1	MONTREAL, CA	1.000	0
CFCF	11	1	MONTREAL, CA	1.000	0
CBMT	12	1	MONTREAL, CA	1.000	0
WETK-5	310	E	BURLINGTON, VT	0.250	0
VVETR-5	510	L	Boneingron, vi	#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				, #N/A	
				, #N/A	
				#N/A	
				#N/A	
				, #N/A	
				#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	

	2. B'cast Channel	3. Type of	202	Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			, #N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#IN/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
				#N/A	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
CHAMPLAIN BROADBAND, LLC	20192

Instructions: Use this sheet to enter any notes or other information that you feel might assist the Copyright Examiner in the examination of your Statement of Account.



FORM SA3E. PAGE 1b.							
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#				
CHAMPLAIN BROADBAND, LLC 062624							
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as define in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a forn of system identification hereafter known as the "first community." Please use it as the first community on all future filings Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parenthese:							
below the identified city or town							
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any station on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group designated by a number (based on your reporting from Part 9)							
When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a numbe (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below							
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	-			
BURLINGTON	VT	Α	1	First			
				Community			
				See instructions for			
				additional information on alphabetization.			
				on alphabetization.			
				Add rows as necessary.			
	1	1		1			

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	STEM ID			
Name	CHAMPLAIN BROADBA	AND, LLC							06262			
_	SECONDARY TRANSMISSION	N SERVICE: S	UBSCR	BERS AND F	RATES							
Е	In General: The information in s	space E should	d cover	all categories	of seconda	ry transmission	service of	the cable				
	system, that is, the retransmissi	on of television	n and ra	dio broadcast	s by your s	ystem to subscr	ibers. Give	e information				
Secondary	about other services (including p	• •	•		•		those exis	sting on the				
Transmission	last day of the accounting period											
Service: Sub- scribers and	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											
Rates	each category by counting the number of billings in that category (the number of persons or organizations charged											
Hutoo	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,											
	with the number of subscribers a sufficient.	and rates, in th	ie right-	hand block. A	two- or thre	ee-word descrip	tion of the	service is				
	BLC			BLOC	K 2							
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT			NO. OF SUBSCRIBERS	DATE			
	Residential:	SUBSCRIB	EKS	RATE	CATE	EGORY OF SEI	VICE	SUBSCRIBERS	RATE			
	Service to first set		1,481	\$ 45.00	PREMIU	м		51	\$ 136.0			
	Service to additional set(s)		1,401	φ -5.00				10	\$ 10.0			
	• FM radio (if separate rate)				НВО			143	\$ 15.0			
	Motel, hotel				CINEMA	X		55	\$ 13.0			
	Commercial		247	\$ 45.00	SHOWTI			79	\$ 13.0			
	Converter			•	STARZ			67	\$ 13.0			
	Residential				STARZ E	INCORE		55	\$ 9.0			
	Non-residential											
	SERVICES OTHER THAN SEC	ONDARY TR	ANSMIS	SSIONS: RAT	ES							
F	In General: Space F calls for ra	ate (not subscri	ber) info	ormation with i	espect to a	all your cable sy	stem's ser	vices that were				
F	not covered in space E, that is,											
0	service for a single fee. There a											
Services Other Than	furnished at cost or (2) services											
Secondary	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 1: Give the standard ra	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										
		it your cable sy	listed in block 1 and for which a separate charge was made or established. List these other services in the form of a									
ransmissions:	Block 2: List any services that	• •			-	-	rvices in th	le ionn or a				
ransmissions:	Block 2: List any services that	separate char	ge was	made or estab	-	-	rvices in th					
ransmissions:	Block 2: List any services tha listed in block 1 and for which a	separate char	ge was de the r	made or estab	-	-	rvices in th	BLOCK 2				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE	separate char ption and inclu	ge was de the r CK 1 CATEC	made or estab rate for each. GORY OF SEF	Nished. List	-			RATE			
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	separate char ption and inclu BLO RATE	ge was de the r CK 1 CATEC Install	made or estab rate for each. GORY OF SEF ation: Non-re	Nished. List	t these other se	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	separate char ption and inclu BLO	ge was de the r CK 1 CATEC Install	made or estat ate for each. GORY OF SEF ation: Non-re- tel, hotel	Nished. List	RATE	CATEGC	BLOCK 2				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	separate char ption and inclu BLO RATE	ge was de the r CK 1 CATEC Install • Mo • Col	made or estab ate for each. GORY OF SEF ation: Non-rea tel, hotel mmercial	Nished. List	t these other se RATE \$ 75.00 \$ 75.00	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection	separate char ption and inclu BLO RATE	ge was de the r CK 1 CATEC Install • Mo • Co • Pay	made or estab rate for each. GORY OF SEF ation: Non-re- tel, hotel mmercial y cable	Nished. List	RATE	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection	separate char ption and inclu BLO RATE	ge was de the r CK 1 CATEC Install • Mo • Co • Pa	made or estab rate for each. GORY OF SEF ation: Non-re- tel, hotel mmercial y cable y cable-add'l c	Nished. List	t these other se RATE \$ 75.00 \$ 75.00	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	separate char ption and inclu BLO RATE \$9-15	ge was de the r CK 1 CATEC Install • Mo • Col • Pa • Fire	made or estab rate for each. GORY OF SEF ation: Non-res tel, hotel mmercial y cable y cable-add'l c e protection	Nished. List	t these other se RATE \$ 75.00 \$ 75.00	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set	separate char ption and inclu BLO RATE	ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Pa • Fire • Bu	made or estab rate for each. GORY OF SEF ation: Non-re- tel, hotel mmercial y cable y cable-add'l c e protection rglar protection	Nished. List	t these other se RATE \$ 75.00 \$ 75.00	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	separate char ption and inclu BLO RATE \$9-15	ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Pa • Fire • Bui Other	made or estab rate for each. GORY OF SEF ation: Non-re- tel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services:	Nished. List	RATE \$ 75.00 \$ 75.00 \$9-15	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	separate char ption and inclu BLO RATE \$9-15	ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Fire • Bu • Cher • Re	made or estab rate for each. GORY OF SEF ation: Non-rest tel, hotel mmercial y cable y cable y cable-add'l c e protection rglar protection services: connect	Nished. List	t these other se RATE \$ 75.00 \$ 75.00	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	separate char ption and inclu BLO RATE \$9-15	ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Pa • Fire • Bun • Co • Pa • Fire • Bun • Co • Co • Pa	made or estab rate for each. GORY OF SEF ation: Non-re- tel, hotel mmercial y cable y cable-add'l c e protection rglar protection services: connect connect	Nished. List	RATE \$ 75.00 \$ 75.00 \$9-15 \$ 25.00	CATEGC	BLOCK 2 ORY OF SERVICE				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	separate char ption and inclu BLO RATE \$9-15	ge was de the r CK 1 CATEC Install • Mo • Col • Pay • Pay • Fire • Bui • Bui • Re • Dis • Ou	made or estab rate for each. GORY OF SEF ation: Non-rest tel, hotel mmercial y cable y cable y cable-add'l c e protection rglar protection services: connect	Nished. List	RATE \$ 75.00 \$ 75.00 \$9-15	CATEGC	BLOCK 2 ORY OF SERVICE				

LEGAL NAME OF OWNER OF CABLE SYSTEM:

LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#		
CHAMPLAIN B	ROADBAND	D, LLC			062624	Name	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
PRIMARY TRANSMITT In General: In space (carried by your cables FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Basis S basis under specifc S • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you h cable system carried tt carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the FCC. For Mexican or 0	PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) arried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on <i>z</i> substitute program basis, as explained in the next paragraph Substitute Togram basis, as explained in the next paragraph Do not list the station here in space G—but do list it in space 1 (the Special Statement and Program Log)—If the station was carried only on a substitute basis - List the station here, and also in space 1, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air it ts community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network multicast), "T" (for independent), "I-M for independent multicast), "E" (for noncommercial educational nutticast), "G indipendent), "I-M for independent multicast), "E"						
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)		6. LOCATION OF STATION		

-	OWNER OF CABLE SY	STEM:			SYSTEM ID#	ŧ
CHAMPLA	N BROADBAN				062624	Name
PRIMARY TRANS	MITTERS: TELEVISI	ON				
carried by your ca FCC rules and re 76.59(d)(2) and (substitute program Substitute Ba basis under spece • Do not list the s station was ca • List the station H basis. For furti in the paper S Column 1: Lis each multicast str cast stream as "V WETA-simulcast) Column 2: Gi its community of on which your ca Column 3: Ince educational static (for independent For the meaning Column 4: If the planation of local Column 5: If y cable system car carried the distant For the retranse of a written agree	able system during i gulations in effect of 4), 76.61(e)(2) and m basis, as explaine asis Stations: With ifc FCC rules, regul tation here in space urried only on a subs here, and also in sp her information com A3 form. It each station's call ream associated wil VETA-2". Simulcast). ve the channel num license. For exampl ble system carried t dicate in each case on, by entering the la multicast), "E" (for r of these terms, see the station is outside service area, see p you have entered "Y ried the distant stati at station on a part-ti smission of a distan	the accountin on June 24, 19 (4), or 76.63 (ed in the next respect to an ations, or autil e G—but do lis stitute basis ace I, if the st cerning subst I sign. Do not th a station ac streams mus ber the FCC I e, WRC is Cr he station whether the s etter "N" (for r noncommercia page (v) of the c's" in column fon during the ime basis bec t multicast str on or before J	g period except 981, permitting t (referring to 76.6 paragraph y distant station horizations: st it in space I (the report origination coording to its origination to be reported in has assigned to hannel 4 in Was station is a netwe network), "N-M" al educational), he general instructor a coounting per cause of lack of ream that is not une 30, 2009, b	(1) stations carri he carriage of ce 51(e)(2) and (4))] is carried by your he Special State ed both on a subs ons, see page (v) on program service ver-the-air design column 1 (list ea the television stathington, D.C. Thi ork station, an in (for network multi or "E-M" (for non uctions located in t distant"), enter "" tions located in t implete column 5 iod. Indicate by e activated channe subject to a roya etween a cable s	, stating the basis on which you ntering "LAC" if your cable syster I capacity Ity payment because it is the subjec ystem or an association representin	G Primary Transmitters: Television
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Name	LEGAL NAME OF C							SYSTEM ID# 062624
H Primary Transmitters: Radio	all-band basis of Special Instruct receivable if (1) on the basis of For detailed infi located in the p Column 1: lo Column 2: S Column 3: li signal, indicate Column 4: C	t every radio s whose signals ctions Conce) it is carried b monitoring, to ormation about paper SA3 forr dentify the cal State whether f the radio star this by placin Give the statio	station ca were "g erning A by the syster be rece ut the the n. I sign of the static tion's sig g a chec n's locati	arried on a separate and disc enerally receivable" by your c II-Band FM Carriage: Under stem whenever it is received a ived at the headend, with the copyright Office regulations each station carried. on is AM or FM. nal was electronically proces k mark in the "S/D" column. ion (the community to which the the community with which the	able system duri Copyright Office at the system's h system's FM an on this point, se sed by the cable he station is lice	ing the account regulations, a leadend, and tenna, during e page (vi) of system as a s nsed by the F	nting pe an FM si (2) it can certain the gen separate	riod. gnal is generally n be expected, stated intervals. eral instructions e and discrete
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION

FORM SA3E. PAGE 5.						A	ACCOUNTING	PERIOD: 2019/2
LEGAL NAME OF OWNER OF						SY	STEM ID# 062624	Name
SUBSTITUTE CARRIAGI In General: In space I, ident substitute basis during the a explanation of the programm form.	ify every no	nnetwork televis eriod, under spe	sion program broadcast by ecific present and former F0	a distant statio CC rules, regu	lations, or authoriz	zations. F	or a further	Substitute
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? • Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. • LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball. 76ers vs. Bulls." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the condian stations, if any, the community with 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 licensed by the FCC or, in the case of Mexican or Canadian stations were acarried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system form 601:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."							Carriage: Special Statement and Program Log	
s	UBSTITUT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRI 6. TIMES		7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM			

	LEGAL NAME OF	OWNER OF CABLI	E SYSTEM:						SY	STEM ID#	
Name	CHAMPLAIN	N BROADBA	ND, LLC							062624	
	PART-TIME CA	ARRIAGE LOG									
J 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.m12:00 p.m." 										
			DATES	AND HOURS	DF F	PART-TIME CAR	RIAGE				
		WHEN	I CARRIAGE OCCU	IRRED			WHEN	I CARRIAGE O	CCUR	RED	
	CALL SIGN		HOUF	RS		CALL SIGN	DATE		OURS		
		DATE	FROM	то			DATE	FROM		то	
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	SA3E. PAGE 7.								
	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name				
CH	AMPLAIN BROADBAND, LLC			062624	-				
Inst all a (as pag	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.								
			() anount (. g. coo roccipio/					
 Instru Con Con If you fee If you account 	 COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. 								
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ik 3 below.	e enter	ea on IIr						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be e elow.	entered	l on line	2 in block					
▶ If pa	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below.	uld be	entered	on line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.								
	Line 1. Enter the amount of gross receipts from space K \$ 783,039.57 Line 2. Multiply the amount in line 1 by 0.01064								
	Enter the result here. This is your minimum fee.	\$		8,331.54					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule.	nn 4, ya od?	ou must	check					
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	19,309.76					
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE			0.00					
	schedule. If none, enter zero								
	Line 3. Add lines 1 and 2 and enter here	\$		19,309.76					
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		\$	19,309.76	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 zero.			0.00	submitting additional deposits under				
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE								
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		20,034.76	appropriate form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.)	See pa	ge (i) of	the					

ACCOUNTING PERIO	JD. 2013/2	FORM SA3E. PAGE 8
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CHAMPLAIN BROADBAND, LLC	SYSTEM ID# 062624
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	stations
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	18
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	378
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) Name /s/Michael Callahan Telephone	802-540-0007
Information	Address 200 CHURCH ST., STE 200 (Number, street, rural route, apartment, or suite number) BURLINGTON, VT 05401 (City, town, state, zip)	4000
	Email mcallahan@burlingtontelecom.com Fax (optional) 802-652-	4220
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office reguling to the statement of the statement of the boxes.) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) 	
	 (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s 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 identifed as own 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 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)] 	system as identified ner of the cable system
	X /s/ Michael Loucy 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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus comp	
	Title: GENERAL MANAGER (Title of official position held in corporation or partnership) Date: March 19, 2020	
form in order to proc numbers. By providi search reports prep	I : Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying informatio cess your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name ing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce ared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account an f statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of lay	e, address and telephon s's public indexes anc

U.S. Copyright Office

FORM SA3E, F	PAGE9
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CHAMPLAIN BROADBAND, LLC	SYSTEM ID# 062624	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLU The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of lowing sentence: "In determining the total number of subscribers and the gross amounts paid service of providing secondary transmissions of primary broadcast transmit scribers and amounts collected from subscribers receiving secondary trans	the Copyright Act by adding the fol- I to the cable system for the basic ters, the system shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vir paper SA3 form. During the accounting period did the cable system exclude any amounts of gross r made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below.	eceipts for secondary transmissions	Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a resul For an explanation of interest assessment, see page (viii) of the general instruction		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	x days	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	\$ - (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-ra contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ate.pdf. For further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for	one day late.	
NOTE: If you are filing this worksheet covering a statement of account already sub please list below the owner, address, first community served, accounting period, an filing.		
Owner Address		
First community served Accounting period ID number		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to coll	ect 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 it may affect the legal suffciency of the fing, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.

2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

DSE SCHEDULE. PAGE 11.

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

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

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

Each of the second, third, and fourth DSEs0.701% of gross receiptsThe fifth and each additional DSE0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE • If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

 Identify the communities/areas represented by each subscriber group.
 For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

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

 $\ensuremath{6}\xspace.$ Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows: • When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains

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

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

EXAMPLE:

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

		Distant Stations Carried		Identification of	of Subscriber	Groups		
In most cases	under current FCC	STATION	DSE	CITY	OUTSIDE LC	•	GRO	SS RECEIPTS
	airvale would be within		1.0	0111	SERVICE AREA OF		FROM SUBSCRIBERS	
	e area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B			\$310,000.00
	I of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A an			100,000.00
	ld be within the local	D (part-time)	0.139	Bodega Bay	Stations A an			70,000.00
• •	of stations B, D, and E.	E (network)	0.25	Fairvale	Stations B, D			120,000.00
		TOTAL DSEs	2.472		,	SS RECEIPTS		\$600,000.00
Santa Rosa Stations A and C 35 mile zone		Minimum Fee Total Gross			\$600,000.00 x .01064 \$6,384.00			
		First Subscriber Group		Second Subsc	riber Group		Third Subscriber Group	
		(Santa Rosa)		(Rapid City and	Bodega Bay)		(Fairvale)	
	Fairvale	Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
Rapid City		DSEs	2.472	DSEs		1.083	DSEs	1.389
,		Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
	Dadaga	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
4	Bodega Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
		Base rate fee	\$6,497.20	Base rate fee	-	\$1,907.71	Base rate fee	\$1,604.03
Station an 35 mil	dE	Total Base Rate Fee: \$6,4 In this example, the cable s				3, line 1 (page	7)	

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#											
1	CHAMPLAIN BROADBAND, LLC 062624											
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	l.		п	3.00							
•	Instructions:											
2	In the column headed "Call S	Sign": list the ca	Il signs of all distant stations	s identified by th	ne letter "O" in column 5							
Computation of DSEs for	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- mercial educational station, give the DSE as ".25."											
Category "O"	CATEGORY "O" STATIONS: DSEs											
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	CBFT	1.000										
	CBMT	1.000										
	CFCF	1.000										
Add rows as												
necessary.												
Remember to copy all												
formula into new												
rows.												

Name		OWNER OF CABLE SYSTEM: N BROADBAND, LLC						062624
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 2 be carried ou Column 2 give the type- Column 0	CAPACITY st the call sign of all dista 2: For each station, give t correspond with the infor 3: For each station, give t 4: Divide the figure in colu t at least to the third deci 5: For each independent value as ".25." 5: Multiply the figure in colu point. This is the station's	he number of hor mation given in s he total number of umn 2 by the figu mal point. This is station, give the " olumn 4 by the fig	urs your cable system space J. Calculate or of hours that the stati re in column 3, and g the "basis of carriag type-value" as "1.0." ure in column 5, and	n carried the stat ly one DSE for e on broadcast over jive the result in e e value" for the s For each networ give the result in	ion during the accounting ach station. er the air during the acco decimals in column 4. Th tation. k or noncommercial edu	ounting period. his figure must cational station, less than the	
Capacity		C	CATEGORY L	AC STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	-	€ 6. DS	SE
			÷			×	=	
						×		
						x x	=	
			÷				=	
			÷	=			=	
			÷	=		x		
			÷	-		x	=	
	Add the DSEs	S OF CATEGORY LAC S of each station. um here and in line 2 of p		dule,		0.00		
4 Computation of DSEs for Substitute- Basis Stations	 Was carried tions in effections in effections in effections in effections of the space I). Column 2: at your option. Column 3: Column 4: 	ve the call sign of each st d by your system in subsi ect on October 19, 1976 (one or more live, nonnetw For each station give the This figure should corre Enter the number of days Divide the figure in colun This is the station's DSE	itution for a prog (as shown by the ork programs duri number of live, r spond with the in s in the calendar nn 2 by the figure	ram that your system letter "P" in column ing that optional carri nonnetwork program formation in space I. year: 365, except in in column 3, and giv	was permitted to 7 of space I); and age (as shown by s carried in subst a leap year. re the result in co	o delete under FCC rules the word "Yes" in column itution for programs that plumn 4. Round to no les	2 of were deleted s than the third	rm).
		SU	IBSTITUTE-B	ASIS STATION	S: COMPUTA	TION OF DSEs		
	1. CALL	2. NUMBER	3. NUMBER		1. CALL	2. NUMBER	3. NUMBER	4. DSE
	SIGN	OF PROGRAMS	OF DAYS IN YEAR		SIGN	OF PROGRAMS	OF DAYS IN YEAR	
		-		=		÷		=
		*				÷		=
								=
				=		-		=
			+	=		÷	•	=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p		dule,		0.00]	
5		ER OF DSEs: Give the am s applicable to your syster		ixes in parts 2, 3, and	4 of this schedule	and add them to provide	the total	
Total Number	1. Number o	of DSEs from part 2 ●				•	3.00	
of DSEs	2. Number o	of DSEs from part 3 ●			!	·	0.00	
	3. Number o	of DSEs from part 4 ●)	·	0.00	
	TOTAL NUMBE	ER OF DSEs				>		3.00

ACCOUNTING PERIOD:	2019/2
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	DWNER OF CABLE S BROADBAND,						S	YSTEM ID# 062624	Name
In block A: • If your answer if schedule.		mainder of pa		7 of the DSE sched	lule blank and	l complete par	t 8, (page 16) of th	e	6
	"No," complete blo			FELEVISION M	ARKETS				Computation of
effect on June 24,	1981?	utside of all m schedule—D	najor and smal	ler markets as defi	ned under sec		CC rules and regu	lations in	3.75 Fee
		BLOO	CK B: CARF	RIAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulatio e DSE Scheo	ns prior to Jun Jule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	ther explanati	ion of permitte	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	 (Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursua *F A station pre 	les and regul ed pursuant to on as defined al educationa d station (76.6 r DSE schedi ant to individu viously carrie IHF station wi	ations cited be o the FCC mar in 76.5(kk) (70 I station [76.59 (see paragi ule). al waiver of F(d on a part-tim ithin grade-B c	e or substitute bas ontour, [76.59(d)(5	e in effect on 5.57, 76.59(b),)(1), 76.63(a) 3(a) referring stitution of gra is prior to Jun	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered st e 25, 1981	6.63(a) referring to .61(e)(1) ations in the		
Column 3:	*(Note: For those this schedule to c	e stations ider determine the	ntified by the le DSE.)	parts 2, 3, and 4 o ttter "F" in column 2	2, you must co	omplete the wo	 T	1	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
CBMT	D	1.00							
CBFT	D	1.00							
CFCF	D	1.00							
	1	<u> </u>	1	1		1		3.00	
		E	BLOCK C: CC	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	e total number of							3.00	
Line 2: Enter the	e sum of permitte	d DSEs from	n block B abo	ve				3.00	
				of DSEs subject 7 of this schedule		ate.		0.00	
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tot	al number of DSI	Es from line	3					-	carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter here	e and on line	2, block 3, space	L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

	OWNER OF CABLE						S	YSTEM ID# 062624	
			A: TELE	/ISION MARKET	S (CONTIN	IUED)			•
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	. 2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
	D/ Kelle						D, tere		Computation
									3.75 Fee
					•				
		.							
			.						
						h			1

						DSE SCHEDULE. PAGE 14.		
Name	LEGAL NAME OF OWN					SYSTEM ID#		
Nume	CHAMPLAIN B	ROADBAND, LL	С			062624		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fr A—Part-time sp 76.59) B—Late-night pi 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compar in block	or to June 25, 1981, 1 call sign for each dist the DSE for this stat the accounting period the basis of carriage CC rules and regulat ecialty programming (d)(1),76.61(e)(1), or rogramming: Carriag (e)(3)). arriage under certain rail instructions in the the station's DSE foi e the DSE figures lis (B, column 3 of part	under former FCC rules g ant station identifed by t ion for a single accountir d and year in which the on which the station wa ions cited below pertain Carriage, on a part-time 76.63 (referring to 76.6° e under FCC rules, secti FCC rules, regulations, paper SA3 form. the current accounting j ted in columns 2 and 5 a 6 for this station. in columns 2, 3, and 4 n	governing part-time he letter "F" in colur ng period, occurring carriage and DSE o s carried by listing of to those in effect on e basis, of specialty 1(e)(1)). ons 76.59(d)(3), 76 or authorizations. F period as computed nd list the smaller o	one of the following letters:	edule. d June 30, 1981. es, sections o nge (vi) of the hedule. gure should be entered		
	4.0411				TIME AND SUBSTITUTE BAS			
	1. CALL SIGN	2. PRIOR DSE	3. ACCOUNTING PERIOD	4. BASIS (CARRIAG		6. PERMITTED DSE		
	SIGN	DSE	PERIOD	CARRIAG	DSE	DSE		
7 Computation of the		"Yes," complete bloc		ete part 8 of the DS	E schedule.			
Syndicated			BLOCK A: MAJO	R TELEVISION	MARKET			
Exclusivity								
Surcharge	 Is any portion of the or 	cable system within a	top 100 major television n	narket as defned by	section 76.5 of FCC rules in eff	ect June 24, 1981?		
	Yes—Complete	e blocks B and C .		X No—Pro	oceed to part 8			
	BLOCK B: C	arriage of VHF/Grade	e B Contour Stations		BLOCK C: Computation of E	Exempt DSEs		
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places a grad	e primary stream of a de B contour, in whole	nity served by	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)			
	Yes—List each s	tation below with its ap	propriate permitted DSE	Yes—Lis	st each station below with its app	ropriate permitted DSE		
		and proceed to part 8.			er zero and proceed to part 8.			
	CALL SIGN	DSE C.	ALL SIGN DSE	CALL S	IGN DSE CAI	LL SIGN DSE		
					<u> </u>			
					[
					[
					E E			
		тс	TAL DSEs 0.0		тот	AL DSEs 0.00		
				<u> </u>				

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SYSTEM ID: CHAMPLAIN BROADBAND, LLC 062624	Namo						
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE							
Section 1	Enter the amount of gross receipts from space K (page 7) \$ 783,039.57	7						
Section 2	A. Enter the total DSEs from block B of part 7	0 Computation						
	B. Enter the total number of exempt DSEs from block C of part 7	0						
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	Surcharge						
• ls an	y portion of the cable system within a top 50 television market as defined by the FCC?	_						
	Yes—Complete section 3 below. X No—Complete section 4 below.	_						
	SECTION 3: TOP 50 TELEVISION MARKET	_						
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.							
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.							
	A. Enter 0.00599 of gross receipts (the amount in section1)							
	B. Enter 0.00377 of gross receipts (the amount in section.1)							
	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.	-						
0.0	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.							
	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 DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)							
	B. Enter 0.00189 of gross receipts (the amount in section 1)							
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here							
	D. Multiply line B by line C and enter here							
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge							

ACCOUNTING PERIOD	. 2019/2		DULE. PAGE 16.
Name			SYSTEM ID#
		CHAMPLAIN BROADBAND, LLC	062624
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	
Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u>.</u>
8	You m 6 was	i uctions: nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of pa s checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	art
Computation	• If you	ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	• If you blank	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bel k	ow
	What i were lo	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers located within that station's local service area and others were located outside that area. For the definition of a station's "loca se area," see page (v) of the general instructions.	al
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did v	your cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	57
	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,"	
			.00
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	E 4
		(the amount in section 1)▶ <u>\$</u> 8,331.4	54
		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. 10,978.2	21
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)]
			19,309.76

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
CHAI	IPLAIN BROADBAND, LLC 062624	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1)	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1) \blacktriangleright	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) \blacktriangleright	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
•	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	of Base Rate Fee
First: [Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
	so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. er, if your cable system is wholly located outside all major television markets, complete block A only.	Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
-	For each community served, determine the local service area of each wholly distant and each partially distant station you	Stations
	to that community. : For each wholly distant and each partially distant station you carried, determine which of your subscribers were located	
outside	the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
•	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
	i section:	
	fy the communities/areas represented by each subscriber group.	
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group.	
• lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
2) any	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
•	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions paper SA3 form.	
• Comp page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the tota or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show trual calculations on the form.	

News	LEGAL NAME OF OWNER OF CABLE SYSTEM: S'	STEM ID#
Name	CHAMPLAIN BROADBAND, LLC	062624
	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	e
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNER CHAMPLAIN BRO						s	O62624	Name
B	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
	SUBSCRIBER GROU	Р		UP	•			
COMMUNITY/ AREA BURLINGTON				COMMUNITY/ ARE	A		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	<u>\$</u> 783	,039.57	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	P					
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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 Fou	urth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	us shown in the boxes	above.	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CHAMPLAIN BROADBAND, LLC 062624								Name
FIRST SUBSCRIBER GROUP				ATE FEES FOR EACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP			9	
COMMUNITY/ AREA BURLINGTON			COMMUNITY/ AREA 0				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
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group		\$ 783,039.57		Gross Receipts Second Group \$ 0.00			0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA 0			COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						n =		
		-						
		-						
						H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group		\$	0.00	Gross Receipts Fourth Group		\$	0.00	
Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group		\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	above.	\$	0.00	

	SYSTEM ID#						
CHAMPLAIN BROADBAND, LEC	062624						
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 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:							
First 50 major television market	Second 50 major television market						
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							
Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as							
Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.							
 Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 							
FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP						
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
	Line 3: Subtract line 2 from line 1 and enter here. This is the						
total number of DSEs for	total number of DSEs for						
this subscriber group	this subscriber group						
	subject to the surcharge						
	SYNDICATED EXCLUSIVITY SURCHARGE						
First Group	Second Group						
THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP						
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs						
Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the						
total number of DSEs for	total number of DSEs for						
this subscriber group	this subscriber group subject to the surcharge						
	computation						
SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY SURCHARGE						
Third Group	Fourth Group						
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	0 1						
	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comments this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs for this subscriber group subject to the surcharge computation						