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

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED B	Y THIS STATEMENT:				
Accounting Period	2019/2					
B Owner	Instructions: Give the full legal name of the owner of the rate title of the subsidiary, not that of the parent List any other name or names under which <i>If there were different owners during the ac a single statement of account and royalty fee parent</i> Check here if this is the system's first filling	corporation the owner conducts the business of the counting period, only the owner on the la syment covering the entire accounting pe	cable systen ast day of the erioo	n e accounting period should	·	123119
	LEGAL NAME OF OWNER/MAILING ADDRE	SS OF CABLE SYSTEM				
	Lafayette City Parish Consolid	lated Government				
	Lafayette Utilities System					
					123119	92019/2
					123119	2019/2
	700 St John Street, Suite 300 Lafayette, LA 70501-6761 INSTRUCTIONS: In line 1, give any busine	ss or trade names used to identify th	e business	and operation of the sys	tem unless	these
С	names already appear in space B. In line 2,	5				
System	1 IDENTIFICATION OF CABLE SYSTEM: LUS Fiber					
	AlLING ADDRESS OF CABLE SYSTEM: 700 St John Street, Suite 300 (Number, street, rural route, apartment, or suite number Lafayette, LA 70501 (City, town, state, zip code))				
D	Instructions: For complete space D instructions	ctions, see page 1b. Identify only the	frst commu	inity served below and re	elist on page	e 1b
Area	with all communities.					
Served	CITY OR TOWN	STATE				
First	Lafayette	LA				
Community	Below is a sample for reporting communit	ies if you report multiple channel line	e-ups in Spa	ace G.		
	CITY OR TOWN (SAMPLE)		ATE	CH LINE UP	SUB	GRP#
Sample	Alda		ND	A		1
	Alliance Gering		ND ND	BB		2 3
form in order to pro numbers. By provid	e: Section 111 of title 17 of the United States Code author ocess your statement of account. PII is any personal infor ding PII, you are agreeing to the routine use of it to estab pared for the public. The effect of not providing the PII rec	mation that can be used to identify or trace ar lish and maintain a public record, which include	n individual, su les appearing	ch as name, address and telep in the Offce's public indexes ar	phone nd in	

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\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

2/18/2020

completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
Lafayette City Parish Consolidated Government			123119	
Instructions: List each separate community served by the cable system. A "community in FCC rules: "a separate and distinct community or municipal entity (including unincorp areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The fra of system identification hereafter known as the "first community." Please use it as the fir	oorated communiti st community that	ies within unincorp you list will serve	orated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hor below the identified city or town.	-	-	ntheses	
If all communities receive the same complement of television broadcast stations (i.e., o all communities with the channel line-up "A" in the appropriate column below or leave th on a partially distant or partially permitted basis in the DSE Schedule, associate each re designated by a number (based on your reporting from Part 9).	ne column blank. I	f you report any st	ations	
When reporting the carriage of television broadcast stations on a community-by-commu channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	d a subscriber gro			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Lafayette	LA	Α		First
Broussard	LA	Α		Community
Youngsville	LA	A		
$\overline{\mathbf{w}}$				
Scott	LA	A		
Carencro	LA	A		
				See instructions for
				additional information
				on alphabetization.
				A .1.1
				Add rows as necessary
			•••••••••••••••••••••••••••••••••••••••	
				I

FORM SA3E. PAGE 1b.

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Nama	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	YSTEM		
Name	Lafayette City Parish Co	onsolidated	Gove	ernment					1231		
Е	SECONDARY TRANSMISSION	SERVICE: SU	JBSCR	IBERS AND R	ATES						
	In General: The information in s										
Secondary	system, that is, the retransmission about other services (including p										
Transmission	last day of the accounting period										
Service: Sub-	Number of Subscribers: Both	n blocks in spa	ce E ca	Il for the numb	er of subs	cribers to the ca					
scribers and	down by categories of secondar										
Rates	each category by counting the n separately for the particular serv							cnarged			
	Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the nit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate										
					iny standa	ard rate variation	s within a p	particular rate			
	category, but do not include disc Block 1: In the left-hand block				rios of sor	ondany transmis	sion sonvic	o that cable			
	systems most commonly provide										
	that applies to your system. Not										
	categories, that person or entity										
	subscriber who pays extra for ca first set" and would be counted of					d in the count ur	ider "Servio	ce to the			
	Block 2: If your cable system					service that are	different fi	rom those			
	printed in block 1 (for example, t										
	with the number of subscribers a sufficient.	and rates, in the	e right-h	nand block. A t	vo- or thre	e-word descript	ion of the s	service is			
		DCK 1					BLOC	K 2			
		NO. OF		DATE			2) // 0 F	NO. OF	DATE		
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAI	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE		
	Service to first set	1	0.032	\$ 24.95							
	Service to additional set(s)	•	0,002	ψ 24.55							
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		919	\$ 24.95							
	Converter										
	Residential	1	2,526	\$ 8.50							
	Non-residential		642	\$ 8.50							
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	S						
F	In General: Space F calls for ra		,		•	• •					
	not covered in space E, that is, t										
Services	service for a single fee. There ar furnished at cost or (2) services	•			0		• • • •				
Other Than	amount of the charge and the ur	nit in which it is									
Secondary	enter only the letters "PP" in the										
Fransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that							were not			
itatoo	Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a										
	brief (two- or three-word) description and include the rate for each.										
		BLO						BLOCK 2			
	CATEGORY OF SERVICE	RATE		GORY OF SER		RATE		ORY OF SERVICE			
	Continuing Services:	N /A		ation: Non-res	idential		HBO	-	\$ 17		
	Pay cable Add'l shappel	N/A		tel, hotel mmercial		PP PP	Cinemax		\$ 13		
	Pay cable—add'l channel Eiro protoction	N/A	_				Showtim	Ie	\$ 15 \$ 13		
	 Fire protection Burglar protection 	N/A N/A		y cable y cable-add'l cł	nannel	PP PP	Starz ESPN Ho	osnitality	\$ 13 \$ 114		
	Installation: Residential	IN/A		e protection		N/A	Playboy		\$ 114		
	• First set	N/A		rglar protection		N/A N/A	NFL Red		\$ 10		
	Additional set(s)			services:			Fox Spo		\$ 95		
	• FM radio (if separate rate)	N/A		connect		\$ 10.00		Digital Music	\$ 30		
	• Converter	N/A	• Dis	connect		\$ 5.00	Wallfish		\$ 35		
			• Ou	tlet relocation		\$ 60.00	Truck Ro	oll	\$ 20		
			• Mo	ve to new addr	ess	N/A	DVR Ser	vice	\$ 11		
		• Nove to new addr									

FORM SA3E. PAGE 3 LEGAL NAME OF OV		YSTEM:			SYSTEM ID	#
Lafayette City			Government		123119	Namo
PRIMARY TRANSMIT	TERS: TELEVISI	ON				
carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute program b Substitute program b Substitute Basis basis under specific l • Do not list the station station was carrie • List the station here basis. For further in the paper SA3 Column 1: List en cach multicast streat cast stream as "WET WETA-simulcast). Column 2: Give f ts community of lice on which your cable Column 3: Indica educational station, i (for independent mu For the meaning of t Column 4: If the planation of local set	e system during t ations in effect o 76.61(e)(2) and (asis, as explaine Stations: With FCC rules, regula on here in space d only on a subs e, and also in space information cond form. ach station's call m associated wit rA-2". Simulcast the channel num nse. For example system carried to the in each case of by entering the left ticast), "E" (for n hese terms, see station is outside vice area, see p have entered "Y	he accounting n June 24, 19 (4), or 76.63 (n ed in the next respect to any ations, or auth G—but do lis titute basis. ace I, if the stat cerning substri sign. Do not th h a station ac streams must ber the FCC H e, WRC is Ch he station. whether the sid etter "N" (for n oncommercia page (v) of the es" in column	g period, except 81, permitting the referring to 76.6 paragraph. y distant stations iorizations: t it in space I (the ation was carried tute basis station report origination cording to its over the reported in or has assigned to annel 4 in Wash tation is a network etwork), "N-M" (al educational), co e general instruct 4, you must con	(1) stations carrie the carriage of cert 1(e)(2) and (4))]; a s carried by your of the Special Stateme d both on a substit ns, see page (v) of n program service er-the-air designa column 1 (list each the television stat angton, D.C. This or K station, an inde for network multic or "E-M" (for nonco ctions located in the instant"), enter "Ye ions located in the mplete column 5, s	es". If not, enter "No". For an ex-	G Primary Transmitters: Television
cable system carried carried the distant st For the retransmi of a written agreeme he cable system an ion "E" (exempt). For explanation of these Column 6: Give to FCC. For Mexican of	ation on a part-ti ssion of a distan- int entered into o d a primary trans or simulcasts, als three categories the location of ea r Canadian station	me basis beca t multicast stro n or before Ju mitter or an a o enter "E". If s, see page (v ich station. Fo ons, if any, giv	eam that is not s une 30, 2009, be ssociation repre you carried the) of the general or U.S. stations, re the name of th	subject to a royalty etween a cable systemating the prima channel on any of instructions locate list the community ne community with	y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identifed.	
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cable system carried carried the distant st For the retransmi of a written agreeme the cable system an- tion "E" (exempt). For explanation of these Column 6: Give f FCC. For Mexican o Note: If you are utiliz 1. CALL SIGN I. CALL SIGN KATC KATC-CW KLFY KLFY-GetTV KADN KADN-MyNet KLPB KLPB-Kids KLPB-Create KXKW	ation on a part-ti ssion of a distant int entered into o d a primary trans or simulcasts, als three categories the location of ear r Canadian static cing multiple cha 2. B'CAST CHANNEL NUMBER 3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2 24.3 32.1	me basis beca t multicast stra n or before Ju mitter or an a o enter "E". If , see page (v ich station. Fc ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N-M N-M I I-M I-M E E E I-M	eam that is not s une 30, 2009, be ssociation repreyou carried the) of the general is or U.S. stations, re the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	subject to a royalty etween a cable systematic actions and of instructions locate list the community the community with space G for each AA 5. BASIS OF CARRIAGE	 payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ad in the paper SA3 form. to which the station is licensed by the owhich the station is identifed. channel line-up. 6. LOCATION OF STATION Lafayette, LA Baton Rouge, LA Baton Rouge, LA Carencro, LA Baton Rouge, LA Carencro, LA 	additional informatio
cable system carried carried the distant st For the retransmi of a written agreeme the cable system an- tion "E" (exempt). For explanation of these Column 6: Give the FCC. For Mexican on Note: If you are utilized 1. CALL SIGN KATC KATC KATC KATC-CW KLFY KLFY-GetTV KADN-MyNet KDCG-H&I KLPB-KidS KLPB-KidS KLPB-Create KXKW KAJN	ation on a part-ti ssion of a distant int entered into o d a primary trans or simulcasts, als three categories the location of ea r Canadian static zing multiple cha 2. B'CAST CHANNEL NUMBER 3.1 3.2 10.1 10.2 15.1 15.3 22.1 24.1 24.2 24.3 32.1 40	me basis beca t multicast stra n or before Ju mitter or an a o enter "E". If , see page (v ich station. Fc ons, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION N-M N-M I I-M I-M E E E I-M	eam that is not s une 30, 2009, be ssociation repreyou carried the) of the general is or U.S. stations, the the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	subject to a royalty etween a cable systematic actions and of instructions locate list the community the community with space G for each AA 5. BASIS OF CARRIAGE	 payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further id in the paper SA3 form. to which the station is licensed by the owhich the station is identifed. channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Lafayette, LA Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA Lafayette, LA Lafayette, LA 	additional information

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FORM SA3E. PAGE 3.

LEGAL NAME C	OF OWNER OF CABLE SY	/STEM:		S	YSTEM ID#	
Lafayette	City Parish Cons	olidated Government			123119	Name
PRIMARY TRANS	SMITTERS: TELEVISIO)N				
carried by your of FCC rules and m 76.59(d)(2) and substitute progra Substitute progra Substitute progra basis under spe • Do not list the s station was c • List the station basis. For fur in the paper S Column 1: Li each multicast s cast stream as " WETA-simulcass Column 2: G its community of on which your ca Column 3: In educational stati (for independent For the meaning Column 5: If cable system ca carried the dista For the retrar of a written agree the cable system ton "E" (exempt explanation of th	cable system during the egulations in effect or (4), 76.61(e)(2) and (4) are basis, as explaine tasis Stations: With recife FCC rules, regulate station here in space arried only on a subsisic here, and also in spatther information concestation is teach station's call stream associated with WETA-2". Simulcast st. Sive the channel number of the system carried the distant care with a subsisient of the station is outside all service area, see pay you have entered "You rried the distant station on a part-timesmission of a distant ement entered into on and a primary transition." For simulcasts, also on a part of the set three distant station on a part-timesmission of a distant ement entered into on and a primary transitioner set three categories.	he accounting period, except a June 24, 1981, permitting t 4), or 76.63 (referring to 76.1 d in the next paragraph. respect to any distant station titions, or authorizations: G—but do list it in space I (t titute basis. Ince I, if the station was carrie erning substitute basis static sign. Do not report origination a station according to its or streams must be reported in the FCC has assigned to be the for a station is a netwe tter "N" (for network), "N-M" be accounting the general instru- tion column 4, you must co be on during the accounting per me basis because of lack of multicast stream that is not an or before June 30, 2009, b mitter or an association repro- be neter "E". If you carried the see page (v) of the general	t (1) stations carrie he carriage of certa 51(e)(2) and (4))]; a s carried by your c he Special Stateme ed both on a substit ons, see page (v) of on program services ver-the-air designat column 1 (list each the television stati hington, D.C. This is ork station, an inde (for network multics or "E-M" (for nonco uctions located in the distant"), enter "Ye tions located in the complete column 5, s iod. Indicate by ent activated channel of subject to a royalty etween a cable sys esenting the primar e channel on any ot instructions located	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable syster capacity. y payment because it is the subj stem or an association represer ry transmitter, enter the designa her basis, enter "O." For a furth d in the paper SA3 form.	ler í on a ogram her ed ntify le r in nel hercial t). - m ject ting a- her	G Primary transmitters Television
FCC. For Mexica	an or Canadian statio	ns, if any, give the name of	the community with	which the station is licensed which the station is identifed.	a by the	
Note: II you are	uuiizing multiple char	nnel line-ups, use a separate		channel line-up.		
		-				
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE 4. DISTANT? OF (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

PRIMARY TRANSMITTER In General: In space G carried by your cable sy FCC rules and regulatio 76.59(d)(2) and (4), 76.1 substitute program basi Substitute Basis St basis under specifc FCC • Do not list the station I station was carried o • List the station here, a basis. For further info in the paper SA3 for	, identify every television starstem during the accounting ons in effect on June 24, 198 61(e)(2) and (4), or 76.63 (r s, as explained in the next p ations: With respect to any C rules, regulations, or auth here in space G—but do list only on a substitute basis. Ind also in space I, if the star pormation concerning substit	ation (including t g period, except 81, permitting the referring to 76.61 paragraph. / distant stations lorizations: t it in space I (the	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ca	123119 and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program nt and Program Log)—if the	Name G Primary Transmitters Television
In General: In space G carried by your cable sy FCC rules and regulatio 76.59(d)(2) and (4), 76.1 substitute program basi Substitute Basis St basis under specifc FCC • Do not list the station h station was carried o • List the station here, a basis. For further info in the paper SA3 for	, identify every television starstem during the accounting ons in effect on June 24, 198 61(e)(2) and (4), or 76.63 (r s, as explained in the next p ations: With respect to any C rules, regulations, or auth here in space G—but do list only on a substitute basis. Ind also in space I, if the star pormation concerning substit	y period, except 81, permitting the referring to 76.61 paragraph. / distant stations lorizations: t it in space I (the	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ca	d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters
carried by your cable sy FCC rules and regulatio 76.59(d)(2) and (4), 76.1 substitute program basi Substitute Basis St basis under specifc FCC • Do not list the station h station was carried o • List the station here, a basis. For further info in the paper SA3 for	stem during the accounting ons in effect on June 24, 198 61(e)(2) and (4), or 76.63 (r s, as explained in the next p ations: With respect to any C rules, regulations, or auth here in space G—but do list nly on a substitute basis. nd also in space I, if the sta pormation concerning substit	y period, except 81, permitting the referring to 76.61 paragraph. / distant stations lorizations: t it in space I (the	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ca	d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters
cast stream as "WETA- WETA-simulcast). Column 2: Give the its community of license on which your cable sys Column 3: Indicate i educational station, by e (for independent multica For the meaning of thes Column 4: If the stat planation of local servic Column 5: If you hav cable system carried the carried the distant static	station's call sign. Do not r associated with a station acc 2". Simulcast streams must channel number the FCC h a For example, WRC is Cha stem carried the station. In each case whether the st entering the letter "N" (for no ast), "E" (for noncommercial et erms, see page (v) of the tion is outside the local serve e area, see page (v) of the ve entered "Yes" in column e distant station during the a on on a part-time basis beca	tute basis station report origination cording to its over be reported in c mas assigned to t annel 4 in Washi tation is a networ etwork), "N-M" (f I educational), or e general instruct vice area, (i.e. "d general instruction 4, you must con accounting perio ause of lack of ac	ns, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This r rk station, an inde for network multica r "E-M" (for nonco titons located in the listant"), enter "Ye ons located in the nplete column 5, s od. Indicate by enti- ctivated channel c	ute basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example on for broadcasting over-the-air in nay be different from the channel bendent station, or a noncommercial ust), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	
the cable system and a tion "E" (exempt). For si explanation of these thr Column 6: Give the FCC. For Mexican or Ca	primary transmitter or an as imulcasts, also enter "E". If ee categories, see page (v) location of each station. Fo	ssociation repres you carried the c) of the general in or U.S. stations, I e the name of th	senting the primar channel on any oth nstructions located list the community le community with	to which the station is licensed by the which the station is identifed.	
	CHANN	EL LINE-UP	AC		
1. CALL	2. B'CAST 3. TYPE		5. BASIS OF	6. LOCATION OF STATION	

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME O	F OWNER OF CABLE SY	STEM:		SY	STEM ID#	
Lafayette (City Parish Cons	olidated Government	:		123119	Name
PRIMARY TRANS	MITTERS: TELEVISIO	N				
carried by your of FCC rules and re 76.59(d)(2) and (substitute progra Substitute B basis under spece • Do not list the s station was ca • List the station basis. For furt in the paper S Column 1: Li each multicast st cast stream as " WETA-simulcast Column 2: G its community of on which your ca Column 3: In educational static (for independent For the meaning Column 5: If cable system can carried the distar For the retran of a written agree the cable system ton "E" (exempt) explanation of th	able system during the egulations in effect or (4), 76.61(e)(2) and (4) m basis, as explained asis Stations: With right FCC rules, regulation here in space a arried only on a substitution here in space arried only on a substituter information concrescated with were and also in spatcher information concrescated with wETA-2". Simulcast station's call station's call station here, and also in spatcher information concrescated with wETA-2". Simulcast station's call station's call station is outside a system carried the distant station on the station is outside a system carried the distant station of these terms, see payou have entered "Ye rried the distant station on a part-tim smission of a distant ement entered into or and a primary transmatcher categories, and the categories, and a primary transmatcher categories, and the categories, an	he accounting period, except in June 24, 1981, permitting 4), or 76.63 (referring to 76. d in the next paragraph. espect to any distant station tions, or authorizations: G—but do list it in space I (titute basis. ce I, if the station was carrie erning substitute basis stati sign. Do not report origination a station according to its of streams must be reported in the FCC has assigned to be the fCC has assigned to be basis because of has a network the focal service area, (i.e. age (v) of the general instru- tion during the accounting per ne basis because of lack of multicast stream that is not be on the fore June 30, 2009, to be onter "E". If you carried the see page (v) of the general	ot (1) stations carrie the carriage of certa 61(e)(2) and (4))]; a ns carried by your c the Special Stateme ed both on a substit ons, see page (v) o on program services over-the-air designat o column 1 (list each o the television stati shington, D.C. This work station, an inde (for network multic or "E-M" (for nonco uctions located in the omplete column 5, s riod. Indicate by ent subject to a royalty between a cable sys resenting the primar e channel on any ot I instructions located	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subju- stem or an association represen ry transmitter, enter the designa ther basis, enter "O." For a furthe	er n a gram er d htify e ercial). n ect ting - er	G Primary Transmitters Television
		ns, if any, give the name of nnel line-ups, use a separate	•	n which the station is identifed. channel line-up.		
		CHANNEL LINE-UF	AD			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF OF OF (Yes or No)		6. LOCATION OF STATION		

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME	OF OWNER OF CABLE S	YSTEM:			SYSTEM ID#	
Lafavette	City Parish Cons	solidated G	overnment		123119	Namo
	ISMITTERS: TELEVISIO					
In Conorolu In	anaga Cidentifu avar	v tolovision st	tion (including	tranalator atationa	and low newer talevision stations)	
					and low power television stations) d only on a part-time basis under	G
					in network programs [sections	
					nd (2) certain stations carried on a	Primary
	ram basis, as explaine		•	(c)(z) and (+))], a		Transmitters
				carried by your ca	able system on a substitute program	Television
	ecifc FCC rules, regula					relevision
				e Special Stateme	nt and Program Log)—if the	
	carried only on a subs		and option (a)	e epecial claterine		
	,		tion was carried	d both on a substit	ute basis and also on some other	
	, i	,			the general instructions located	
in the paper	SA3 form.	0		, , , , , , , , , , , , , , , , , , , ,	0	
Column 1: l	ist each station's call	sign. Do not r	eport originatior	n program services	such as HBO, ESPN, etc. Identify	
each multicast	stream associated wit	h a station ac	cording to its ov	er-the-air designat	ion. For example, report multi-	
cast stream as	"WETA-2". Simulcast	streams must	be reported in a	column 1 (list each	stream separately; for example	
WETA-simulca:	st).					
			Ũ		on for broadcasting over-the-air in	
,		,	annel 4 in Wash	ington, D.C. This r	nay be different from the channel	
	cable system carried the					
					pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
· ·	<i>/</i> · (<i>,</i> .	``	mmercial educational multicast).	
	g of these terms, see					
			•	,	s". If not, enter "No". For an ex-	
	al service area, see pa				tating the basis on which your	
				•	ering "LAC" if your cable system	
	ant station on a part-til	•	•••		o , , ,	
					payment because it is the subject	
					tem or an association representing	
•					y transmitter, enter the designa-	
			•	U .	her basis, enter "O." For a further	
					d in the paper SA3 form.	
					to which the station is licensed by the	
FCC. For Mexic	can or Canadian static	ons, if any, giv	e the name of th	ne community with	which the station is identifed.	
	e utilizing multiple cha					
		CHANN	EL LINE-UP	AE		1
4.0411	2. B'CAST	3. TYPE	4. DISTANT?		6. LOCATION OF STATION	-
1. CALL	Z. B CAST	J. ITPE	4. DISTANT?	D. BASIS UF	0. LOGATION OF STATION	1

	CHANNEL LINE-OF			AL	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Lafayette City Parish Consolidated Government	123119	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power carried by your cable system during the accounting period, except (1) stations carried only on a part FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network program.	-time basis under	G
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 si substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on	tations carried on a	Primary Transmitters Television
 basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program 		Television
 station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and al basis. For further information concerning substitute basis stations, see page (v) of the general ins in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, 	structions located	
each multicast stream associated with a station according to its over-the-air designation. For exampl cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separa WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcas	le, report multi- tely; for example	
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent station).	, or a noncommercial	
(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial education is for the meaning of these terms, see page (v) of the general instructions located in the paper SA3 for Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "	rm. "No". For an ex-	
planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis cable system carried the distant station during the accounting period. Indicate by entering "LAC" if you carried the distant station on a part-time basis because of lack of activated channel capacity.	on which your	
For the retransmission of a distant multicast stream that is not subject to a royalty payment becau of a written agreement entered into on or before June 30, 2009, between a cable system or an assor the cable system and a primary transmitter or an association representing the primary transmitter, er	ciation representing	
tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter explanation of these three categories, see page (v) of the general instructions located in the paper S Column 6: Give the location of each station. For U.S. stations, list the community to which the state FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.	"O." For a further SA3 form. ation is licensed by the on is identifed.	
CHANNEL LINE-UP AF		

	CHANNEL LINE-OF			AF	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF	OWNER OF CABLE S	YSTEM:			SI	STEM ID#	
Lafayette Ci	ty Parish Cons	solidated G	overnment			123119	Name
PRIMARY TRANSM	ITTERS: TELEVISIO	ON					
carried by your cat	ole system during t	, he accounting	period, except	(1) stations carrie	and low power television station of only on a part-time basis und	er	G
76.59(d)(2) and (4) substitute program), 76.61(e)(2) and (i basis, as explaine	4), or 76.63 (r d in the next	eferring to 76.6 paragraph.	1(e)(2) and (4))]; a	ain network programs [sections and (2) certain stations carried o	on a	Primary Transmitters
	c FCC rules, regula	. ,		s carried by your c	able system on a substitute pro	ogram	Television
 Do not list the sta 		G-but do lis		e Special Stateme	ent and Program Log)—if the		
	er information conc				ute basis and also on some oth f the general instructions locate		
		sign. Do not r	eport origination	n program service	s such as HBO, ESPN, etc. Ide	ntify	
			•	•	tion. For example, report multi-		
cast stream as "WI WETA-simulcast).	ETA-2". Simulcast	streams must	be reported in	column 1 (list eacl	n stream separately; for exampl	e	
,	e the channel numl	ber the FCC h	as assigned to	the television stati	on for broadcasting over-the-ai	r in	
					may be different from the chanr		
on which your cabl	,						
					ependent station, or a noncomm ast), "I" (for independent), "I-M"		
		```			ommercial educational multicast		
For the meaning of Column 4: If the	f these terms, see e station is outside	page (v) of the the local serv	e general instru vice area, (i.e. "d	ctions located in th distant"), enter "Ye	ne paper SA3 form. es". If not, enter "No". For an ex-	,	
planation of local s							
,				•	stating the basis on which your	-	
carried the distant		•	• • •		tering "LAC" if your cable syster	n	
	•				payment because it is the subj	ject	
of a written agreen	nent entered into o	n or before Ju	ine 30, 2009, be	etween a cable sys	stem or an association represer	nting	
			•	• •	ry transmitter, enter the designa		
					her basis, enter "O." For a furth d in the paper SA3 form.	er	
					to which the station is licensed	by the	
				,	which the station is identifed.		
	ilizing multiple chai			•			
		CHANN	EL LINE-UP	AG			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF STATION	(Yes or No)	CARRIAGE (If Distant)			

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	6. LOCATION OF STATION

<ul> <li>Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</li> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream asociated with a station according to its over-the-air designation. For example, report multicast stream asociated with a station according to its over-the-air designation. For example, the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for independent), "I-M" (for independent), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a</li></ul>	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: (b) the special Statement and Program Log)—if the station was carried only on a substitute basis. To further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station according to Its over-the-air designation. For example, report multicast stream ascordiad with a station according to Its over-the-air designation. For example, report multicast stream ascordiad with a station according to Its over-the-air designation. For example, report multicast stream ascordiad with a station according to Its over-the-air designation. For example, report multicast stream ascordiad with a station according to Its over-the-air designation. For example, report multicast stream ascordiad with a station according to Its over-the-air designation. For example, report multicast stream ascordiad with a station according to Its over-the-air designation. For example, report multi-cast stream secord station according to Its over-the-air designation. For example, report multi-cast stream secord station according to Its over-the-air designation. For example, report multi-cast stream secord station according to Its over-the-air designation. For example, were station according to Its over-the-air designation. For example, were station acc	Lafayette City Parish Consolidated Government	123119	Name
Carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), or 76.63 (ref(P(2) and (4)), or 76.63 (ref(P(2) and (4))); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph. Is the station here, ind also in space —but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. Is the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream associated with a station is a network station, nor a noncommercial more and with a station see assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent), "LM" (for independent	PRIMARY TRANSMITTERS: TELEVISION		
<ul> <li>substitute program basis, as explained in the next paragraph.</li> <li>Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations:</li> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station here and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-s". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</li> <li>Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</li> <li>Column 3: Indicate in each case whether the station is a network station, an independent, "I-M" (for independent multicast). "E" (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational durational multicast).</li> <li>For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yos". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cabl</li></ul>	carried by your cable system during the accounting period, except (1) stations carried only on a part-time	basis under	G
<ul> <li>basis under specifc FCC rules, regulations, or authorizations:</li> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</li> <li>Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.</li> <li>Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter 'N' (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).</li> <li>For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station o</li></ul>	substitute program basis, as explained in the next paragraph.		Primary Transmitters Television
<ul> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</li> <li>Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) or the general instructions located in the paper SA3 form.</li> <li>Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on 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 cable system or an associatio</li></ul>	Do not list the station here in space G-but do list it in space I (the Special Statement and Program Log	ı)—if the	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi- cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the locatio	<ul> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also c basis. For further information concerning substitute basis stations, see page (v) of the general instruct</li> </ul>		
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). <b>Column 2:</b> Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. <b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. <b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. <b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian		N, etc. Identify	
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex- planation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadia	cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately;		
on which your cable system carried the station. <b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. <b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex- planation of local service area, see page (v) of the general instructions located in the paper SA3 form. <b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is dentifed.		over-the-air in	
educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. <b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex- planation of local service area, see page (v) of the general instructions located in the paper SA3 form. <b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.	on which your cable system carried the station.		
Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex- planation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for indepen (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial education	dent), "I-M"	
Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.		For an ex-	
carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.	Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on		
<ul> <li>the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.</li> </ul>	carried the distant station on a part-time basis because of lack of activated channel capacity.	,	
<ul> <li>tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further</li> <li>explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.</li> <li>Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the</li> <li>FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.</li> </ul>			
explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.		0	
	explanation of these three categories, see page (v) of the general instructions located in the paper SA3 f	orm.	
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.		identifed.	
	Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.		

		CHANN	EL LINE-UP	AH	
1. CALL SIGN	2. B'CAST CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Lafayette City Parish Consolidated Government	123119	Name
PRIMARY TRANSMITTERS: TELEVISION		
<b>In General:</b> In space G, identify every television station (including translator stations and low carried by your cable system during the accounting period, except (1) stations carried only or FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain networ 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 (4), or 76.63 (referring to 76.61(e)(2)) and (4), or	n a part-time basis under on the programs [sections	G
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable syst		Primary Transmitters Television
<ul> <li>basis under specifc FCC rules, regulations, or authorizations:</li> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and P station was carried only on a substitute basis.</li> </ul>	Program Log)—if the	
<ul> <li>List the station here, and also in space I, if the station was carried both on a substitute basis basis. For further information concerning substitute basis stations, see page (v) of the gen in the paper SA3 form.</li> </ul>		
Column 1: List each station's call sign. Do not report origination program services such as		
each multicast stream associated with a station according to its over-the-air designation. For		
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for brown of the stream of t		
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be c	5	
on which your cable system carried the station.		
Column 3: Indicate in each case whether the station is a network station, an independent		
educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (f		
(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercia For the meaning of these terms, see page (v) of the general instructions located in the paper	,	
Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not,		
planation of local service area, see page (v) of the general instructions located in the paper S		
Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating th	e basis on which your	
cable system carried the distant station during the accounting period. Indicate by entering "LA carried the distant station on a part-time basis because of lack of activated channel capacity.		
For the retransmission of a distant multicast stream that is not subject to a royalty paymen of a written agreement entered into on or before June 30, 2009, between a cable system or a	,	
the cable system and a primary transmitter or an association representing the primary transm		
tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis		
explanation of these three categories, see page (v) of the general instructions located in the p Column 6: Give the location of each station. For U.S. stations, list the community to which	the station is licensed by the	
FCC. For Mexican or Canadian stations, if any, give the name of the community with which th		
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel	line-up.	
CHANNEL LINE-UP AI		

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME (	OF OWNER OF CABLE SY	/STEM:			SYSTEM ID	#
Lafayette	City Parish Cons	olidated G	overnment		123119	9 Name
PRIMARY TRAN	SMITTERS: TELEVISIO	DN				
carried by your	cable system during t	, he accounting	period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections	G
76.59(d)(2) and substitute progra	(4), 76.61(e)(2) and ( am basis, as explaine	4), or 76.63 (r d in the next p	eferring to 76.6 paragraph.	1(e)(2) and (4))]; a	able system on a substitute program	Primary Transmitters
basis under spe • Do not list the	cifc FCC rules, regula station here in space	ations, or autho G—but do list	orizations:		ent and Program Log)—if the	Television
<ul> <li>List the station basis. For fur in the paper 3</li> </ul>	rther information conc SA3 form.	ace I, if the sta erning substitu	ute basis statio	ns, see page (v) o	ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify	
each multicast s	stream associated wit	h a station acc	ording to its ov	er-the-air designa	tion. For example, report multi- n stream separately; for example	
	Give the channel num		•		on for broadcasting over-the-air in	
on which your c	able system carried th	ne station.		-	may be different from the channel	
educational stat (for independen	tion, by entering the le	etter "N" (for ne oncommercial	etwork), "N-M" ( educational), c	for network multic or "E-M" (for nonco	ast), "I" (for independent), "I-M" mmercial educational multicast).	
Column 4: If		the local serv	ice area, (i.e. "o	distant"), enter "Ye	s". If not, enter "No". For an ex-	
Column 5: If cable system ca	f you have entered "Ye arried the distant station	es" in column on during the a	<ol> <li>you must con accounting perior</li> </ol>	mplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system	
For the retrai		multicast stre	am that is not s	subject to a royalty	capacity. payment because it is the subject stem or an association representing	
the cable syster tion "E" (exempt	n and a primary trans t). For simulcasts, also	mitter or an as o enter "E". If y	sociation repre	senting the prima channel on any ot	ry transmitter, enter the designa- her basis, enter "O." For a further	
Column 6: O	Give the location of ea	ch station. For	U.S. stations,	list the community	d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
	utilizing multiple char			•		
-		CHANN	EL LINE-UP	A.J		-
1. CALL	2. B'CAST			5. BASIS OF	6. LOCATION OF STATION	-
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		

		UIAIII		AU	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME	OF OWNER OF CABLE SY	/STEM:			S	YSTEM ID#	
Lafayette	City Parish Cons	olidated Gove	ernment			123119	Name
PRIMARY TRAN	ISMITTERS: TELEVISIO	DN					
carried by your	cable system during t	he accounting per	iod, except	(1) stations carrie	and low power television stati d only on a part-time basis und ain network programs [sections	ler	G
76.59(d)(2) and substitute progr	l (4), 76.61(e)(2) and ( am basis, as explaine	4), or 76.63 (refer d in the next parag	ring to 76.6 graph.	1(e)(2) and (4))]; a	and (2) certain stations carried	on a	Primary Transmitters
	Basis Stations: With recifc FCC rules, regula			s carried by your c	able system on a substitute pro	ogram	Television
Do not list the		G-but do list it in		e Special Stateme	ent and Program Log)—if the		
basis. For fu in the paper	rther information conc SA3 form.	erning substitute I	oasis statio	ns, see page (v) o	ute basis and also on some ot f the general instructions locate s such as HBO, ESPN, etc. Ide	ed	
		•	0		tion. For example, report multi-	-	
			0	0	n stream separately; for examp		
WETA-simulcas			!	4			
			•		on for broadcasting over-the-a may be different from the chan		
on which your c	able system carried th	ne station.		0	pendent station, or a noncomr		
					ast), "I" (for independent), "I-M		
For the meaning	g of these terms, see	page (v) of the gei	neral instru	ctions located in th	ommercial educational multicas ne paper SA3 form. es". If not, enter "No". For an ex		
planation of loc	al service area, see pa	age (v) of the gene	eral instruct	ions located in the			
carried the dista	ant station on a part-ti	ne basis because	of lack of a	ctivated channel o			
					r payment because it is the sub stem or an association represe		
					ry transmitter, enter the design		
					her basis, enter "O." For a furth	ner	
					d in the paper SA3 form. to which the station is license	d by the	
					which the station is identifed.		
Note: If you are	e utilizing multiple char	nnel line-ups, use	a separate	space G for each	channel line-up.		
		CHANNEL	LINE-UP	AK			
1. CALL	2. B'CAST			5. BASIS OF	6. LOCATION OF STATION		
SIGN		-	(oc or No)		S. LOOKTION OF STATION		

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM: SYSTEM	
Lafayette City Parish Consolidated Government 12	23119 Name
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. <b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program	Primary Transmitte Televisio
<ul> <li>basis under specifc FCC rules, regulations, or authorizations:</li> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was a substitute basis</li> </ul>	
<ul> <li>station was carried only on a substitute basis.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.</li> </ul>	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify	
each multicast stream associated with a station according to its over-the-air designation. For example, report multi-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example	
WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in	
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel	
on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial	1
educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M"	
(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).	
For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. <b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex-	
planation of local service area, see page (v) of the general instructions located in the paper SA3 form. <b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system	
carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing	
the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa- tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further	
explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the	ie
FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.	
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.	

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OV	WNER OF CABLE S	YSTEM:			SYSTEM I	
Lafayette City	y Parish Cons	solidated G	overnment		1231	19 ^{Name}
PRIMARY TRANSMIT	TERS: TELEVISIO	ON				
carried by your cable	e system during t	he accounting	period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under in network programs [sections	G
76.59(d)(2) and (4), substitute program b	76.61(e)(2) and ( basis, as explaine	4), or 76.63 (r d in the next p	eferring to 76.6 paragraph.	1(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters
Substitute Basis basis under specifc		. ,		s carried by your c	able system on a substitute program	Television
•	on here in space	G-but do list		ne Special Stateme	nt and Program Log)—if the	
	information cond				ute basis and also on some other the general instructions located	
		sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify	
			•	•	ion. For example, report multi-	
cast stream as "WE⊺ WETA-simulcast).	IA-2". Simulcast	streams must	be reported in o	column 1 (list each	stream separately; for example	
,	the channel num	ber the FCC h	as assigned to	the television station	on for broadcasting over-the-air in	
			Ũ		may be different from the channel	
on which your cable						
					pendent station, or a noncommercial	
		· ·	,. · · ·		ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of t Column 4: If the	these terms, see station is outside	page (v) of the the local serv	e general instru ice area, (i.e. "c	ctions located in th distant"), enter "Ye	e paper SA3 form. s". If not, enter "No". For an ex-	
	have entered "Y	es" in column	4, you must cor	mplete column 5, s	tating the basis on which your	
cable system carried carried the distant st		0	01	,	ering "LAC" if your cable system	
	•				payment because it is the subject	
					tem or an association representing	
					y transmitter, enter the designa-	
					her basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
					which the station is identified.	
Note: If you are utiliz						
		CHANN	EL LINE-UP	AM		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)			
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		

SIGN	CHANNEL		(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
	1				

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Lafayette City Parish Consolidated Government	123119 Name
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power t carried by your cable system during the accounting period, except (1) stations carried only on a part- FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network prog	ime basis under G
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 st substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a stationary of the system of the s	Transmitte
<ul> <li>basis under specifc FCC rules, regulations, or authorizations:</li> <li>Do not list the station here in space G—but do list it in space I (the Special Statement and Program station was carried only on a substitute basis.</li> </ul>	Log)—if the
<ul> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and als basis. For further information concerning substitute basis stations, see page (v) of the general inst in the paper SA3 form.</li> </ul>	
Column 1: List each station's call sign. Do not report origination program services such as HBO, I	
each multicast stream associated with a station according to its over-the-air designation. For example cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separat WETA-simulcast).	
Column 2: Give the channel number the FCC has assigned to the television station for broadcast	ng over-the-air in
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different on which your cable system carried the station.	
Column 3: Indicate in each case whether the station is a network station, an independent station,	
educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for indep (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educa	
For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 for <b>Column 4:</b> If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "	n.
planation of local service area, see page (v) of the general instructions located in the paper SA3 form <b>Column 5:</b> If you have entered "Yes" in column 4, you must complete column 5, stating the basis	on which your
cable system carried the distant station during the accounting period. Indicate by entering "LAC" if yo carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment becau	
of a written agreement entered into on or before June 30, 2009, between a cable system or an assoc	
the cable system and a primary transmitter or an association representing the primary transmitter, en	
tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter	
explanation of these three categories, see page (v) of the general instructions located in the paper S/ Column 6: Give the location of each station. For U.S. stations, list the community to which the state	
FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station	-
<b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.	

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	
Lafayette City	Parish Cons	olidated G	overnment		123119	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	DN				
carried by your cable s	system during t	he accounting	period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program ba	მ.61(e)(2) and ( sis, as explaine	4), or 76.63 (r d in the next p	eferring to 76.6 paragraph.	1(e)(2) and (4))]; a	ain network programs [sections nd (2) certain stations carried on a	Primary Transmitters
				s carried by your c	able system on a substitute program	Television
<ul> <li>basis under specifc F(</li> <li>Do not list the station station was carried</li> </ul>	here in space	G-but do list		e Special Stateme	ent and Program Log)—if the	
<ul> <li>List the station here,</li> </ul>	and also in spa formation conc	ice I, if the sta			ute basis and also on some other the general instructions located	
		-			s such as HBO, ESPN, etc. Identify	
			0	0	ion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	A-2 . Simulcast	streams must	be reported in o	column 1 (list each	stream separately; for example	
	e channel num	per the FCC h	as assigned to	the television stati	on for broadcasting over-the-air in	
its community of licens	se. For example	e, WRC is Cha	annel 4 in Wash	nington, D.C. This	may be different from the channel	
on which your cable s				-		
					pendent station, or a noncommercial	
	•	``	<i>/</i> · (		ast), "I" (for independent), "I-M"	
For the meaning of the	ese terms, see	page (v) of the	e general instruc	ctions located in th	mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex-	
planation of local serv	, I	0 ( )	0			
				•	stating the basis on which your ering "LAC" if your cable system	
carried the distant stat		•	•••		<b>č</b>	
					payment because it is the subject	
					tem or an association representing	
,				0 1	y transmitter, enter the designa-	
					her basis, enter "O." For a further	
					d in the paper SA3 form.	
				,	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizin		, ,				
	.a manapie onai					4
	1	CHANN	EL LINE-UP	AO		
	O DIOAOT		4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	J. DASIS OI	0. LOCATION OF STATION	
1. CALL SIGN	2. B CAST CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION	
					0. LOCATION OF STATION	

LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			S	SYSTEM ID#	Name
Lafayette City	Parish Cons	olidated (	Government			123119	Name
PRIMARY TRANSMITTI	ERS: TELEVISIO	DN					
carried by your cables FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas <b>Substitute Basis S</b> basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo <b>Column 1:</b> List eace each multicast stream cast stream as "WETA WETA-simulcast). <b>Column 2:</b> Give the its community of licens on which your cable sy <b>Column 3:</b> Indicate educational station, by (for independent multi For the meaning of the <b>Column 5:</b> If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th <b>Column 6:</b> Give the FCC. For Mexican or C	system during the ions in effect or 5.61(e)(2) and (ions in effect or 5.61(e)(2) and (ions in effect or 5.61(e)(2) and (ions is a sexplaine <b>Stations:</b> With response of the inspace of the inspace only on a subsect on the instant on the insert only on the insert only on the insert only on the distant station is outside the distant station is outside the distant station on a part-timicion of a distant the entered into on a primary transmissimulcasts, also a primary transmissimulcasts, also a canadian station of ear Canadian station of the insert on the insert	he accountin h June 24, 19 4), or 76.63 ( d in the next respect to an ations, or aut G—but do lis titute basis. ace I, if the st sign. Do not h a station ac streams mus ber the FCC e, WRC is Cf he station. whether the s or er the FCC e, WRC is Cf he station. whether the s sitter "N" (for r on commercia page (v) of the the local ser age (v) of the me basis becommulticast str n or before J mitter or an a ponter "E". If , see page (v) ch station. F ns, if any, giv	g period, except 981, permitting th (referring to 76.6 paragraph. y distant stations horizations: st it in space I (th ation was carried itute basis station report origination coording to its over t be reported in or has assigned to f has a netwo has a	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a s carried by your c e Special Stateme d both on a substit ns, see page (v) o n program services er-the-air designat column 1 (list each the television stati ington, D.C. This ington, D.C. This for network multic r "E-M" (for nonco ctions located in the inplete column 5, s od. Indicate by ent ctivated channel o ubject to a royalty stween a cable sys senting the primar channel on any ot instructions locate list the community with	s". If not, enter "No". For an e paper SA3 form. stating the basis on which you ering "LAC" if your cable syste capacity. payment because it is the su stem or an association represe y transmitter, enter the design her basis, enter "O." For a furt d in the paper SA3 form.	Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder Inder In	G Primary Transmitters Television
Note: If you are utilizir	ng multiple char		•		channel line-up.		
		<b>.</b>					
	1	CHANN	IEL LINE-UP	АР			

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWN	ER OF CABLE SY	/STEM:			S	YSTEM ID#	Name
Lafayette City F	Parish Cons	olidated G	overnment			123119	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the stat planation of local servi Column 5: If you has cable system carried th carried the distant stati For the retransmiss	G, identify even ystem during ti ons in effect or .61(e)(2) and ( is, as explaine <b>tations</b> : With n C rules, regula here in space only on a subs and also in spa formation conc rm. h station's call associated with -2". Simulcast e channel numb e. For example stem carried th in each case v entering the le cast), "E" (for m se terms, see p ation is outside ce area, see pa ave entered "Yn he distant statio on on a part-tin ion of a distant	y television sta he accounting n June 24, 194 4), or 76.63 (r d in the next p respect to any ations, or auth G—but do list titute basis. ace I, if the sta serning substit sign. Do not r h a station acc streams must ber the FCC h e, WRC is Cha ne station. whether the st tter "N" (for monocommercial page (v) of the the local serv age (v) of the es" in column on during the a multicast stree	period, except 31, permitting the eferring to 76.6 baragraph. distant stations orizations: tit in space I (the tition was carried ute basis station eport origination cording to its ow be reported in the as assigned to annel 4 in Wash ation is a network), "N-M" ( e ducational), co e general instruct 4, you must con accounting period use of lack of a permitting the statistical statistics and the statistics of a permitting the statistics of the statistics accounting period	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a s carried by your c the Special Stateme d both on a substit ns, see page (v) o n program service: er-the-air designal column 1 (list each the television stati nington, D.C. This pork station, an inde for network multic or "E-M" (for nonco ctions located in the distant"), enter "Ye ions located in the mplete column 5, s od. Indicate by ent activated channel of subject to a royalty	s". If not, enter "No". For an ex paper SA3 form. stating the basis on which your ering "LAC" if your cable syste capacity. payment because it is the sub	der son a ogram her ed entify ile ir in nel nercial " t). c- m	G Primary Transmitters Television
the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the	a primary trans simulcasts, also ree categories e location of ea Canadian statio	mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give nnel line-ups,	ssociation repre you carried the of the general r U.S. stations, e the name of th	esenting the primar channel on any ot instructions locate list the community he community with space G for each	stem or an association represe y transmitter, enter the design her basis, enter "O." For a furth d in the paper SA3 form. to which the station is license which the station is identifed. channel line-up.	a- ner	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	IER OF CABLE SY	YSTEM:			S	SYSTEM ID#	
Lafayette City I	Parish Cons	solidated G	overnment			123119	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
carried by your cable s	system during the	he accounting	period, except	(1) stations carrie	and low power television stat d only on a part-time basis un ain network programs [section	der	G
	6.61(e)(2) and (	4), or 76.63 (r	eferring to 76.6		and (2) certain stations carried		Primary Transmitters
Substitute Basis S	Stations: With r	respect to any	distant stations	s carried by your c	able system on a substitute p	rogram	Television
<ul> <li>basis under specifc FC</li> <li>Do not list the station station was carried</li> </ul>	here in space	G-but do lis		e Special Stateme	ent and Program Log)—if the		
<ul> <li>List the station here, basis. For further in in the paper SA3 for</li> </ul>	and also in spa formation conc rm.	ace I, if the sta erning substit	ute basis station	ns, see page (v) o	ute basis and also on some o f the general instructions locat s such as HBO, ESPN, etc. Id	ted	
		0			tion. For example, report multi	-	
	-2". Simulcast	streams must	be reported in o	column 1 (list each	stream separately; for example	ple	
WETA-simulcast). Column 2: Give the	e channel numb	ber the FCC h	as assigned to t	the television stati	on for broadcasting over-the-a	air in	
			•		may be different from the chai		
on which your cable sy				-			
					pendent station, or a noncom ast), "I" (for independent), "I-M		
	•	```	,. · · · ·		mmercial educational multica		
For the meaning of the Column 4: If the st	ese terms, see ation is outside	page (v) of the the local serv	e general instructive vice area, (i.e. "c	ctions located in th listant"), enter "Ye	ne paper SA3 form. s". If not, enter "No". For an e	,	
planation of local servi Column 5: If you ha					paper SA3 form. stating the basis on which you	r	
carried the distant stat	ion on a part-tir	me basis beca	ause of lack of a	ctivated channel o	ering "LAC" if your cable syste capacity. payment because it is the sul		
					stem or an association represe		
					y transmitter, enter the design		
explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	her basis, enter "O." For a furt d in the paper SA3 form. to which the station is license		
	Canadian statio	ons, if any, giv	e the name of th	ne community with	which the station is identifed.		
Note. Il you are utilizif	ig multiple char	-			опаппетше-ир.		
	I	CHANN	EL LINE-UP	AR			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		

		•••••		<i>,</i>	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF	OWNER OF CABLE SY	/STEM:		SY	STEM ID#	
Lafayette C	ity Parish Cons	olidated Government			123119	Name
PRIMARY TRANS	MITTERS: TELEVISIO	)N				
carried by your ci FCC rules and re 76.59(d)(2) and (i substitute program <b>Substitute Ba</b> basis under spec • Do not list the si station was ca • List the station if basis. For furth in the paper S <b>Column 1:</b> Lise each multicast sti cast stream as "V WETA-simulcast) <b>Column 2:</b> Gi its community of on which your cal <b>Column 3:</b> Ince educational static (for independent For the meaning <b>Column 4:</b> If the planation of local <b>Column 5:</b> If y cable system carried the distan For the retrans of a written agreet the cable system tion "E" (exempt).	able system during the gulations in effect or 4), 76.61(e)(2) and ( m basis, as explaine <b>isis Stations:</b> With r fifc FCC rules, regulat tation here in space rried only on a substi- nere, and also in space her information conce A3 form. st each station's call ream associated with VETA-2". Simulcast st bicense. For example bicense. For example bicate in each case v on, by entering the le multicast), "E" (for no of these terms, see p he station is outside service area, see pa you have entered "Ye ried the distant static t station on a part-fir smission of a distant ment entered into or and a primary transit. For simulcasts, also	The accounting period, except in June 24, 1981, permitting th 4), or 76.63 (referring to 76.6 d in the next paragraph. respect to any distant stations: G—but do list it in space I (th titute basis. Ince I, if the station was carried erning substitute basis station sign. Do not report origination in a station according to its ow streams must be reported in the FCC has assigned to be the FCC has assigned to be station. whether the station is a network the "N" (for network), "N-M" ( poncommercial educational), of page (v) of the general instruct the local service area, (i.e. " age (v) of the general instruct on during the accounting peri- me basis because of lack of a multicast stream that is not sin or before June 30, 2009, be mitter or an association report	(1) stations carrier ne carriage of certa 1(e)(2) and (4))]; a s carried by your ca e Special Stateme d both on a substitu ns, see page (v) of n program services er-the-air designat column 1 (list each the television station ington, D.C. This r prk station, an inde for network multica or "E-M" (for nonco ctions located in the implete column 5, so od. Indicate by ent activated channel c subject to a royalty etween a cable sys esenting the primar channel on any oti	ute basis and also on some oth the general instructions located s such as HBO, ESPN, etc. Ider ion. For example, report multi- stream separately; for example on for broadcasting over-the-air may be different from the chann pendent station, or a noncomm ast), "I" (for independent), "I-M" mmercial educational multicast e paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable systen apacity. payment because it is the subj tem or an association represen y transmitter, enter the designa ner basis, enter "O." For a further	er í n a gram er d htify e in hel ercial ).	G Primary Transmitters Television
				to which the station is licensed	by the	
		ns, il any, give the name of t nnel line-ups, use a separate		which the station is identifed. channel line-up.		
		CHANNEL LINE-UP	AS			
1. CALL	2. B'CAST	3. TYPE 4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF (Yes or No)	CARRIAGE			

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME C	OF OWNER OF CABLE SY	STEM:			SYSTEM	/ID#	
Lafayette	City Parish Cons	olidated (	Government		123	3119	Name
PRIMARY TRANS	SMITTERS: TELEVISIO	DN					
In General: In s carried by your of FCC rules and m 76.59(d)(2) and substitute progra Substitute progr	space G, identify even cable system during th egulations in effect or (4), 76.61(e)(2) and ( am basis, as explaine <b>basis Stations:</b> With in cifc FCC rules, regula station here in space carried only on a subs here, and also in space ther information conce SA3 form. ist each station's call stream associated with "WETA-2". Simulcast it). Sive the channel numk f license. For example able system carried th ndicate in each case w ion, by entering the let t multicast), "E" (for m g of these terms, see p 'you have entered "Yu trins tation on a part-tim nsmission of a distant ement entered into on m and a primary trans i). For simulcasts, also	y television s ne accountin n June 24, 19 4), or 76.63 i d in the next espect to an titions, or aut G—but do lis titute basis. ice I, if the st erning subst sign. Do not n a station ac streams mus ber the FCC b, WRC is Ch e e station. whether the s tter "N" (for r boncommercia bage (v) of the the local ser age (v) of the local ser age	g period, except 981, permitting th (referring to 76.6 paragraph. by distant stations horizations: st it in space I (th tation was carried itute basis station report origination coording to its ov the reported in or has assigned to has a network), "N-M" ( al educational), or egeneral instruct of you must con eacounting perio accounting perio association repre- f you carried the poly of the general	(1) stations carrie the carriage of certa 1(e)(2) and (4))]; a s carried by your of the Special Stateme d both on a substit ns, see page (v) o n program service er-the-air designal column 1 (list each the television stati nington, D.C. This ork station, an inder for network multic or "E-M" (for noncoc ctions located in the mplete column 5, so od. Indicate by enf ictivated channel of subject to a royalty etween a cable sys- senting the primar channel on any ot instructions located	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system		G Primary Transmitters Television
FCC. For Mexica	an or Canadian statio	ns, if any, gi	ve the name of th	ne community with	which the station is identifed.		
Note: If you are	utilizing multiple char		· ·		cnannei iine-up.		
		CHANN	NEL LINE-UP	AT			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		

		1		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME (	OF OWNER OF CABLE SY	YSTEM:			SYSTEM ID#	
Lafayette	123119	Name				
PRIMARY TRAN	SMITTERS: TELEVISIO	ON				
carried by your	cable system during t	he accounting	period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under	G
					ain network programs [sections and (2) certain stations carried on a	Primary
( )( )	am basis, as explaine		0	r(e)(2) and (4))], a	and (2) certain stations carried on a	Transmitters
				s carried by your c	able system on a substitute program	Television
	cifc FCC rules, regula	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , , ,	
• Do not list the	station here in space	G-but do lis	t it in space I (th	e Special Stateme	ent and Program Log)—if the	
	arried only on a subs					
	rther information conc				ute basis and also on some other f the general instructions located	
		sign. Do not	report originatio	n program services	s such as HBO, ESPN, etc. Identify	
each multicast s	tream associated wit	h a station ac	cording to its ov	er-the-air designat	tion. For example, report multi-	
cast stream as '	WETA-2". Simulcast	streams mus	be reported in	column 1 (list each	n stream separately; for example	
WETA-simulcas	/					
			0		on for broadcasting over-the-air in	
	•		annel 4 in Wasr	ington, D.C. This i	may be different from the channel	
	able system carried the		tation is a netwo	rk station an inde	pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
					mmercial educational multicast).	
	of these terms, see the station is outside				ne paper SA3 form. s". If not, enter "No". For an ex-	
	al service area, see pa					
					stating the basis on which your	
,		0	01	,	ering "LAC" if your cable system	
	int station on a part-til					
					payment because it is the subject stem or an association representing	
					y transmitter, enter the designa-	
					her basis, enter "O." For a further	
					d in the paper SA3 form.	
					to which the station is licensed by the	
					which the station is identifed.	
Note: If you are	utilizing multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AU		1
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	1

	CHANNEL LINE-UP			AU	
1. CALL	2. B'CAST	3. TYPE		5. BASIS OF	6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
		1			

LEGAL NAME OF OWNER OF CABLE SY	YSTEM:			SYSTEM ID#	
Lafayette City Parish Cons	123119	Nomo			
In General: In space G, identify ever		, U		•	G
carried by your cable system during t	•		• •		G
FCC rules and regulations in effect or					<b>.</b>
76.59(d)(2) and (4), 76.61(e)(2) and (	· · · ·	•	1(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary
substitute program basis, as explaine			operiod by your or	able system on a substitute program	Transmitters
			s carried by your ca	able system on a substitute program	Television
basis under specifc FCC rules, regula			a Spacial Statema	nt and Dragram Lag) if the	
<ul> <li>Do not list the station here in space</li> </ul>		it in space I (th	e opecial otateme	ni and Frogram Log)—II the	
<ul> <li>station was carried only on a subs</li> <li>List the station here, and also in spa</li> </ul>		tion was corries	t both on a substitu	Ite basis and also on some other	
basis. For further information conc					
in the paper SA3 form.	Serring Substit		13, 366 page (V) 01	and general instructions located	
	sian. Do not r	eport origination	n program services	such as HBO, ESPN, etc. Identify	
each multicast stream associated with	0				
cast stream as "WETA-2". Simulcast					
WETA-simulcast).		so reported in t			
Column 2: Give the channel numl	ber the FCC h	as assigned to t	the television station	on for broadcasting over-the-air in	
its community of license. For example	e, WRC is Cha	annel 4 in Wash	ington, D.C. This r	nay be different from the channel	
on which your cable system carried th	,		5 , -	,	
Column 3: Indicate in each case	whether the st	ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
educational station, by entering the le	etter "N" (for n	etwork), "N-M" ( [•]	for network multica	ast), "I" (for independent), "I-M"	
(for independent multicast), "E" (for n	oncommercia	educational), o	r "E-M" (for nonco	mmercial educational multicast).	
For the meaning of these terms, see	page (v) of the	e general instruc	ctions located in th	e paper SA3 form.	
Column 4: If the station is outside					
planation of local service area, see pa					
Column 5: If you have entered "Ye			•		
cable system carried the distant station	•	• • •		s , ,	
carried the distant station on a part-ti					
For the retransmission of a distant					
of a written agreement entered into o					
the cable system and a primary trans			0 1		
tion "E" (exempt). For simulcasts, also			,		
explanation of these three categories					
				to which the station is licensed by the	
FCC. For Mexican or Canadian statio	, , , ,		,		
Note: If you are utilizing multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
			437		1
	CHANN	EL LINE-UP	AV		

		CHANN	EL LINE-UP	AV	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
Lafayette City I	12311	9 Name						
PRIMARY TRANSMITT	ERS: TELEVISIO	N						
carried by your cable s	system during th	ne accounting	period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections	G		
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (4 sis, as explained	4), or 76.63 (r d in the next p	eferring to 76.6 paragraph.	1(e)(2) and (4))]; a	and (2) certain stations carried on a	Primary Transmitters		
Substitute Basis S basis under specifc FC				s carried by your c	able system on a substitute program	Television		
	here in space	G—but do lis		ne Special Stateme	ent and Program Log)—if the			
	formation conce				ute basis and also on some other f the general instructions located			
		0			s such as HBO, ESPN, etc. Identify			
			0	0	tion. For example, report multi-			
WETA-simulcast).			·	,	n stream separately; for example			
			0		on for broadcasting over-the-air in may be different from the channel			
on which your cable sy	•							
Column 3: Indicate	in each case w	hether the st	ation is a netwo	ork station, an inde	pendent station, or a noncommercial			
	•	•	, · · · ·		ast), "I" (for independent), "I-M"			
For the meaning of the	se terms, see p	bage (v) of the	e general instru	ctions located in th				
planation of local servi					es". If not, enter "No". For an ex-			
•		• • •	•		stating the basis on which your			
•				•	ering "LAC" if your cable system			
carried the distant stat	•							
					payment because it is the subject			
•					stem or an association representing ry transmitter, enter the designa-			
,				0 1	her basis, enter "O." For a further			
	0 /	10()	0		d in the paper SA3 form.			
					to which the station is licensed by the			
				•	which the station is identifed.			
		inei ine-ups,	use a separate	space G for each	спаппенше-ир.			
		CHANN	EL LINE-UP	AW				
		CHANN 3. TYPE	<b>EL LINE-UP</b> 4. DISTANT?	AW 5. BASIS OF	6. LOCATION OF STATION	-		
Note: If you are utilizir					6. LOCATION OF STATION	_		
Note: If you are utilizir	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	_		

SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	

Name	LEGAL NAME OF C			^{∦:} dated Government				SYSTEM ID# 123119
Н		t every radio s	tation ca	rried on a separate and discre nerally receivable" by your ca				
Primary Transmitters: Radio	receivable if (1) on the basis of i For detailed info located in the pa <b>Column 1:</b> Io <b>Column 2:</b> S <b>Column 3:</b> If signal, indicate <b>Column 4:</b> G Mexican or Can	it is carried by monitoring, to prmation about aper SA3 form Jentify the call tate whether to the radio stati this by placing Sive the station adian stations	v the syst be receive t the the sign of e he station on's sign a check i's location	-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s Copyright Office regulations o each station carried. In is AM or FM. hal was electronically processes mark in the "S/D" column. on (the community to which the the community with which the	the system's hea ystem's FM ante n this point, see ed by the cable s e station is licens station is identifie	adend, and (2) nna, during ce page (vi) of the ystem as a se ed by the FCC ed).	it can b rtain sta e genera parate a	e expected, ated intervals. al instructions nd discrete he case of
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION

LEGAL NAME OF OWNER OF	CABLE SYST	EM:				S	YSTEM ID#	
Lafayette City Parish (	Consolida	ted Govern	nent				123119	Name
SUBSTITUTE CARRIAGE	E: SPECIA		IT AND PROGRAM LOG					
In General: In space I, ident substitute basis during the a explanation of the programm	ify every nor ccounting pe	nnetwork televis eriod, under spe	ion program broadcast by a cific present and former FC0	C rules, regula	ations, or autho	rizations. F	or a further	<b>I</b> Substitute
1. SPECIAL STATEMENT		NING SUBST	ITUTE CARRIAGE					Carriage:
<ul> <li>During the accounting per broadcast by a distant stat</li> </ul>		r cable system	carry, on a substitute basis	s, any nonne			⊠No	Special Statement and Program Log
Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUTE In General: List each subst clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broa the case of Mexican or Can Column 5: Give the mor first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	", leave the <b>PROGRA</b> titute progra ice, please a of every no distant stat gulations, oo Lucy" or "NE n was broad sign of the s adcast static hadian static th and day ve "5/7." es when the Example: a er "R" if the and regulatic ogramming	MS im on a separa attach addition nnetwork telev ion and that your authorization t use general of A Basketball: dcast live, enter station broadca on's location (thons, if any, the when your syster substitute pro a program carri- listed program ons in effect du	te line. Use abbreviations v al pages. ision program (substitute pr ur cable system substituted s. See page (vi) of the gene categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "N isting the substitute program the community to which the s community with which the s tem carried the substitute p gram was carried by your c ed by a system from 6:01:1 was substituted for program iring the accounting period;	wherever pos rogram) that, d for the prog eral instructio "basketball". o." n. station is lice station is ider rogram. Use able system. 5 p.m. to 6:2 mming that y enter the let	ust complete th sible, if their m during the acc ramming of an- ons located in th List specific p nsed by the FC tified). numerals, with List the times 8:30 p.m. shou our system wa- ter "P" if the lis	e program eaning is ounting other station ne paper rogram CC or, in n the month accurately uld be s required ted pro	on h	Program Log
s	UBSTITUT	E PROGRAM			EN SUBSTITU IAGE OCCUR		7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY	6. TIMI FROM —		FOR DELETION	
		0,122 01011						
	+							
					_			
					_			
					_			
					_			
					_			
					_			

FORM SA3E. PAGE 5.

ACCOUNTING PERIOD: 2019/2

### ACCOUNTING PERIOD: 2019/2

ACCOUNTING	PERIOD: 2019/2							г		SA3E. PAGE 6.
Name	LEGAL NAME OF C								S	YSTEM ID#
Hame	Lafayette Ci	ty Parish Co	nsolidated Gov	ernment						123119
J Part-Time Carriage Log	time carriage du hours your syst Column 1 (C column 5 of spa Column 2 (D curred during th • Give the mont "4/10." • State the start television statio "app." Example	is space ties in i ue to lack of act em carried that <b>all sign):</b> Give ace G. <b>Pates and hour</b> he accounting p h and day when ing and ending n's broadcast d : "12:30 a.m.– 3	n the carriage occur times of carriage to ay, you may give ar	acity, you are re more space, pl y distant station each station, lis red. Use numer the nearest qua approximate e	equir ease n wh st the rals, arter endir	ed to complete t e attach addition lose basis of car e dates and hour with the month f r hour. In any car ng hour, followed	his log giving th al pages. riage you identi rs when part-tim first. Example: f se where carria I by the abbrevi	e total dates an fied by "LAC" in ne carriage oc- or April 10 give ge ran to the er ation	I	ne
			DATES	AND HOURS	OF F	PART-TIME CAF	RRIAGE			
		WHEN	CARRIAGE OCCL					I CARRIAGE O	CCUF	RRED
	CALL SIGN		HOUF	RS	1	CALL SIGN	Н		IOURS	
		DATE	FROM	то			DATE	FROM		то
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					l					

FORM	SA3E. PAGE 7.						
LEGA	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name				
Laf	ayette City Parish Consolidated Government	123119	Name				
Inst all a (as i page	DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's sec dentifed in space E) during the accounting period. For a further explanation of how to c e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ondary transmission service	K Gross Receipts				
<ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If your feet</li> <li>If your according</li> <li>If patients</li> <li>If patients</li> </ul>	<b>RIGHT ROYALTY FEE</b> <b>ctions</b> : Use the blocks in this space L to determine the royalty fee you owe: uplete block 1, showing your minimum fee. uplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the and rom block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable p ompanying this form and attach the schedule to your statement of account. rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	arts of the DSE Schedule e entered on line 1 of	L Copyright Royalty Fee				
If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be	entered on line 2 in block					
▶ If pa	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered on line					
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K						
	Line 2. Multiply the amount in line 1 by 0.01064						
	Enter the result here. This is your minimum fee.	\$ 21,635.53					
Block 2	<ul> <li>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting period yes—Complete the DSE schedule.</li> <li>X No—Leave block 3 below blank and complete the DSE schedule.</li> </ul>	nn 4, you must check od?					
Block 3	Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$					
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00					
	Line 3. Add lines 1 and 2 and enter here	\$ -					
Block 4	<ul> <li>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</li> <li>Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7</li> </ul>	<u>\$ 21,635.53</u>	Cable systems submitting				
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero.	r <u>0.00</u>	additional deposits under				
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the appropriate				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.         Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 22,360.53	form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. ( general instructions located in the paper SA3 form for more information.)	See page (i) of the					

ACCOUNTING PERI	IOD: 2019/2 FORM SA	3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:     SY       Lafayette City Parish Consolidated Government     SY	STEM ID# 123119
<b>M</b> Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations       15         2. Enter the total number of activated channels on which the cable system carried television broadcast stations       295	
N Individual to Be Contacted	<b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> : (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Chad Governale Telephone 337-291-8128	
	Address 700 St John Street, Suite 300 (Number, street, rural route, apartment, or suite number)	
	Lafayette, LA 70501 (City, town, state, zip)	
	Email cgovernale@lus.org Fax (optional) 337-210-4558	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.	
Certifcation	• 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; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X "/s/" Kayla Miles Brooks	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings. Typed or printed name: <b>Kayla Miles Brooks</b>	
	Title: Interim Communications Director (Title of official position held in corporation or partnership)	
	Date: February 18, 2020	
Privacy Act Notice	e: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th	

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in th completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

FORM SA3E. PAGE9
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government	SYSTEM ID# 123119	Name
SPECIAL STATEMENT CONCERNING GROSS RECE The Satellite Home Viewer Act of 1988 amended Title 17, section 1 lowing sentence: "In determining the total number of subscribers and the gros service of providing secondary transmissions of primary bro scribers and amounts collected from subscribers receiving s	111(d)(1)(A), of the Copyright Act by adding the fol- as amounts paid to the cable system for the basic adcast transmitters, the system shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the n paper SA3 form.		Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any ammade by satellite carriers to satellite dish owners?	ounts of gross receipts for secondary transmissions	
YES. Enter the total here and list the satellite carrier(s) below.	\$	
	Name Mailing Address	
You must complete this worksheet for those royalty payments subn For an explanation of interest assessment, see page (viii) of the ge		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	xdays	
Line 3 Multiply line 2 by the number of days late and enter the sur	n here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block space L, (page 7)		
* To view the interest rate chart click on <i>www.copyright.gov/lice</i> contact the Licensing Division at (202) 707-8150 or licensing@	@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest a NOTE: If you are filing this worksheet covering a statement of acco please list below the owner, address, first community served, account	ount already submitted to the Copyright Offce,	
filing.		
Owner Address		
First community served		
Accounting period ID number		
Accounting period ID number Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Cop	pyright Offce to collect the personally identifying information (PII) requested or	n th

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

#### INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec 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 LISTEE IN SPACE G OF SA3E (LONG FORM)

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

Independent: its type-value is	1.00
• Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that 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 particula station's DSE for the accounting period.

#### TOTAL OF DSEs

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

#### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee anc 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 nor subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment

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

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable sys-

tems 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-tim∉ and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

## 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 distantthat 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 DSF 1.064% of gross receipts

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

## 0.330% of gross receipts PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

If any of the stations were partially distant:

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

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of

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

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

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

TOTAL DSEs

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

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

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

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

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

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

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

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

CITY

Santa Rosa

Rapid City

Fairvale

Bodega Bay

DSE

1.0

1.0

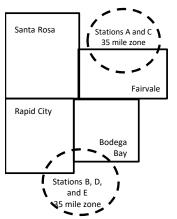
0.083

0.139

0.25

2.472

Distant Stations Carried STATION In most cases under current FCC rules, all of Fairvale would be within A (independent) B (independent) the local service area of both stations C (part-time) A and C and all of Rapid City and Bodega Bay would be within the local D (part-time) service areas of stations B, D, and E. E (network)



Minimum Fee Total Gross Receipts		\$600,000.00			
		x .01064			
		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B. D. and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D ,E

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600,000.00

FROM SUBSCRIBERS

## DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#Lafayette City Parish Consolidated Government123119										
1											
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line				0.00						
2	Instructions:										
Computation	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."										
Category "O"	CATEGORY "O" STATIONS: DSEs										
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as											
necessary.											
Remember to copy											
all formula into new											
rows.											
		LI		LL		II					

DSE SCHEDULE. PAGI	
SYSTEM	
123 [,]	119

	LEGAL NAME OF	OWNER OF CABLE SYSTEM:					S	YSTEM ID#
Name	Lafayette Ci	ty Parish Consolidat	ed Government					123119
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all dista Provide the figure in colu- to correspond with the infore For each station, give the Divide the figure in colu- at least to the third decire For each independents value as ".25." Multiply the figure in colu- to column	he number of hours mation given in space he total number of he umn 2 by the figure in nal point. This is the station, give the "type Jumn 4 by the figure	your cable system e J. Calculate or burs that the stat n column 3, and g "basis of carriag e-value" as "1.0." in column 5, and	n carried the sta ly one DSE for e on broadcast ov jive the result in e value" for the s For each networ give the result in	tion during the accounting each station. er the air during the acco decimals in column 4. Th	ounting period. his figure must cational station, less than the	
Capacity		C	ATEGORY LAC	STATIONS	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3. NU JRS OI ED BY ST	JMBER HOURS ATION AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	E 6. DS	E
			÷	=		X	=	
			÷ ÷			x x	=	
			÷		:	x	=	
			÷			×	=	
			÷	=		X	=	
			÷ ÷			x x	=	
	Add the DSEs	OF CATEGORY LAC S of each station. Im here and in line 2 of p		a,		0.00		
<b>4</b> Computation of DSEs for Substitute- Basis Stations	<ul> <li>Was carried tions in effe</li> <li>Broadcast of space I).</li> <li>Column 2: at your option.</li> <li>Column 3: Column 4:</li> </ul>	ect on October 19, 1976 ( one or more live, nonnetwo For each station give the This figure should corres Enter the number of days Divide the figure in colurr	itution for a program as shown by the lett ork programs during t number of live, non spond with the inform s in the calendar yea an 2 by the figure in c	that your system ar "P" in column that optional carri- network program- nation in space I. r: 365, except in column 3, and giv	was permitted t 7 of space I); and age (as shown by s carried in subs a leap year. re the result in co	o delete under FCC rules	2 of were deleted s than the third	m).
		SU	BSTITUTE-BAS	IS STATION	S: COMPUTA	TION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		+				÷		=
		+				÷		=
		-				÷		=
	Add the DSEs	OF SUBSTITUTE-BAS	IS STATIONS:			0.00	]	
5		ER OF DSEs: Give the am s applicable to your system		in parts 2, 3, and	4 of this schedule	e and add them to provide	the tota	
Total Number	1. Number o	f DSEs from part 2●				•	0.00	
of DSEs	2. Number o	f DSEs from part 3●				▶ <u> </u>	0.00	
	3. Number o	f DSEs from part 4 ●				•	0.00	
	TOTAL NUMBE	R OF DSEs				Þ		0.00

Lafayette City	y Parish Conso	lidated Go	vernment					123119	Name
Instructions: Blo In block A:	ock A must be com	pleted.							
<ul> <li>If your answer i schedule.</li> </ul>	f "Yes," leave the r			7 of the DSE sche	edule blank ar	nd complete p	art 8, (page 16) of	the	6
<ul> <li>If your answer i</li> </ul>	f "No," complete bl			ELEVISION M					Computation of
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in									
effect on June 24	l, 1981?							0	
	mplete part 8 of the		O NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7	,		
X No—Com	plete blocks B and	I C below.							
		BLOC	K B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulations	ons prior to Ju dule. (Note: Tl	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permit	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	<ul> <li>Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station</li> <li>BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.</li> <li>PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to</li> </ul>								
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		В	LOCK C: CO	MPUTATION OF	- 3.75 FEE				
Line 1: Enter th	e total number of	DSEs from	part 5 of this	schedule				-	
Line 2: Enter th	e sum of permitte	ed DSEs fror	n block B ab	ove				-	
	t line 2 from line ′ leave lines 4–7 b					rate.	u <del></del>	0.00	
Line 4: Enter gr	oss receipts from	n space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent
	line 41 0 0075		I						partially permited/
Line 5: Multiply	line 4 by 0.0375	and enter su	Im here				x		partially nonpermitted carriage?
Line 6: Enter to	tal number of DS	Es from line	3				. <u></u>	-	If yes, see part 9 instructions.
Line 7: Multiply	line 6 by line 5 a	nd enter her	e and on line	2, block 3, space	e L (page 7)			0.00	

SYSTEM ID#

LEGAL NAME OF OWNER OF CABLE SYSTEM:       SYSTEM ID#         Lafayette City Parish Consolidated Government       123119									Name	
BLOCK A: TELEVISION MARKETS (CONTINUED)										
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6	
									Computation 3.75 Fee	
									0.70100	
	[									
	[									

								[	DSE SCHEDULE. PAGE 14.			
Name	LEGAL NAME OF OWN								SYSTEM ID#			
Nume	Lafayette City F	Parish Consoli	dated Gove	ernment					123119			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	<ul> <li>Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.</li> <li>Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule</li> <li>Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981</li> <li>Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1)</li> <li>Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters</li> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.</li> <li>A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).</li> <li>B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)).</li> <li>S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form.</li> <li>Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule</li> <li>Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be enterer in block B, column 3 of part 6 for this station.</li> <li>IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division.</li> </ul>											
	1. CALL	2. PERMITTED L		TIONS CARRIE		PART-TIME AN		TUTE BASIS RESENT	6. PERMITTED			
	SIGN	2. PRIOR DSE		ERIOD		RRIAGE		DSE	6. PERMITTED DSE			
	51614	DOL		LINIOD	CA	INNAGE		DOL	DGL			
	Instructions: Block A	must be complete	ed									
7	In block A:	emplet										
Computation		"Yes," complete b	ocks B and C,	below.								
of the		•			part 8 of t	the DSE sched	lule.					
Syndicated	If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.											
Exclusivity	BLOCK A: MAJOR TELEVISION MARKET											
Surcharge	<ul> <li>Is any portion of the of</li> </ul>	cable system within	a top 100 majo	or television marl	ket as defr	ned by section 7	76.5 of FCC	rules in effect J	une 24, 1981?			
·		blocks B and C .				lo—Proceed to	nart 8					
							part o					
	BLOCK B: Ca	arriage of VHF/Gra	de B Contour	Stations		BLOC	K C: Compu	utation of Exem	pt DSEs			
	Is any station listed in	block B of part 6 t	he primary str	eam of a	Was ar	nv station lister	d in block B	of part 7 carrie	d in any commu-			
	commercial VHF stati				nity ser	rved by the cat	ole system p	prior to March 3				
	or in part, over the ca				to form	er FCC rule 76	6.159)					
	Yes—List each s	tation below with its	appropriate peri	mitted DSE	Y	′es—List each s	tation below	with its appropria	ate permitted DSE			
	X No—Enter zero a	and proceed to part 8	l.		XN	lo—Enter zero a	and proceed	to part 8.				
		r		· · · · · · · · · · · · · · · · · · ·			1 1	1				
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N DSE			
		1 1										
								-				
							· · · · · · · · · · · · · · · · · · ·					
			TOTAL DSEs	0.00				TOTAL DS	Es 0.00			

DSE SCHEDULE. PAGE15.

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Lafayette City Parish Consolidated Government	SYSTEM ID# 123119	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	2,033,414.51	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC?		
	Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     X Yes—Complete part 9 of this schedule.     No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1) • <u>\$</u>		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?           Image: system retransmit the signals of any partially distant television stations during the accounting period?           Image: system retransmit the signals of any partially distant television stations during the accounting period?           Image: system retransmit the signals of any partially distant television stations during the accounting period?           Image: system retransmit the signals of any partially distant television stations during the accounting period?           Image: system retransmit the signals of any partially distant television stations during the accounting period?           Image: system retransmit the signals of any partially distant television stations during the accounting period?           Image: system retransmit television stations during the accounting period?           Image: system retransmit television stations during television stat		
4a	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D	SE	
	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

DSE	SCHEE	ULE.	PAGE	16

Name			STEM ID#
		Lafayette City Parish Consolidated Government	123119
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	_
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	L
		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> .
<b>8</b> Computation of Base Rate Fee	You m 6 was • In blo • If you • If you blank What i were lo	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below to is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers bocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X       Yes—Complete part 9 of this schedule.         No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	-
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	_
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	-
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	-
		E. Add lines A, and D. This is your base rate fee. Enter here	]
		and in block 3, line 1, space L (page 7) Base Rate Fee	0.00
			<u> </u>

LEGAL N	AME OF OWNER OF CABLE SYSTEM: S	YSTEM ID#	Name
Lafay	ette City Parish Consolidated Government	123119	Name
Section 4	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		•
-	A. Enter 0.01064 of gross receipts		8
	(the amount in section 1)		
	B. Enter 0.00701 of gross receipts		Commutation
	(the amount in section 1) <b>F</b>		Computation of
			Base Rate Fee
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) <u>\$</u>		
	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)	0.00	
	Base Rate Fee S	0.00	
IMPOR	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast	signals shall	
	I be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel li		9
Space			9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to s from subscribers located within the station's local service area, from your system's total gross receipts. To take adva		Computation
	on, you must:	inage of the	of Base Rate Fee
Firet: [	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the	e came	and
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the		Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for ea	ch group.	Exclusivity Surcharge
-	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B belov		Partially Distant
	cable system is wholly located outside all major television markets, complete block A only.	. nonovor,	Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially
	: For each community served, determine the local service area of each wholly distant and each partially distant station	i you	Permitted Stations
	to that community.		
•	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were local the station's local service area. A subscriber located outside the local service area of a station is distant to that statio		
	ne token, the station is distant to the subscriber.)	r (ana, by	
-	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Ea		
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a will have only one subscriber group when the distant stations it carried have local service areas that coincide.	a cable	
	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system	a's subscriber	
groups			
In each	a section:		
	fy the communities/areas represented by each subscriber group.		
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of ibers in the group.	the	
• lf:			
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in p	arts 2, 3,	
, .	of this schedule; or,	, -,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in bloc 6 of this schedule.	kВ,	
•	to of this schedule. he DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
		ruotiona	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general inst paper SA3 form.	UCUONS	
•	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the pre	0	
	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need t		
	calculations on the form.	o show your	

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM IC
Name	Lafayette City Parish Consolidated Government	12311
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals	_
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these	
	subscriber groups may be partially distant.	
	Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant	
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K.	
	Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	•
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE			nent			S	YSTEM ID# 123119	Name
В				TE FEES FOR EACH				
		SUBSCRIBER GROU	Р		SECOND	SUBSCRIBER GROU	IP	9
COMMUNITY/ AREA	Lafayet	te		COMMUNITY/ AREA	Broussa	ard		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
						-		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	<u>\$ 1,987,</u>	371.59	Gross Receipts Secor	nd Group	<u>\$</u> 1	7,903.26	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	ld Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA	Youngs	sville		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
		-						
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 24,	674.05	Gross Receipts Fourth	n Group	\$	1,107.01	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th	ie base rat	e fees for each subscr	iber group	as shown in the boxes a	bove.			
Enter here and in block			U 1			\$	0.00	

FORM SA3E. F	PAGE 19.
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LEGAL NAME OF OWNE			ment			SI	STEM ID# 123119	Name			
BL				TE FEES FOR EACH							
		SUBSCRIBER GROU	JP			SUBSCRIBER GROU		9			
COMMUNITY/ AREA	Carenc	ro	COMMUNITY/ AREA 0								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE						
						-		Base Rate Fee			
								and			
								Syndicated Exclusivity			
		-						Surcharge			
								for			
								Partially			
								Distant Stations			
								otationo			
Total DSEs			0.00	Total DSEs	4		0.00				
Gross Receipts First G	roup	s 2,	358.60	Gross Receipts Secor							
	loup	<u> </u>	000.00			\$	0.00				
Base Rate Fee First Group     \$     0.00				Base Rate Fee Secor	nd Group	\$	0.00				
	SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROU					
COMMUNITY/ AREA			0	COMMUNITY/ AREA							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
		-									
		-									
						-					
		-									
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00				
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00				
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$					

FORM SA3E. PAG
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LEGAL NAME OF OWNE Lafayette City Pari			ment			SY	STEM ID# 123119	Name
BL				TE FEES FOR EACH				
	NINTH	SUBSCRIBER GROU			TENTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
						-		Exclusivity
								Surcharge
						-		for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
	EVENTH	SUBSCRIBER GROU		ii	TWELVTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the			riber group	as shown in the boxes	above.			
Enter here and in block	3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OWNE			ment			SY	YSTEM ID# 123119	Name
				TE FEES FOR EAC				
	RTEENTH	SUBSCRIBER GROU		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		_						Base Rate Fee
								and
								Syndicated
		-						Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIF	TEENTH	SUBSCRIBER GROU	JP		SIXTEENTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EACH				
SEVEN COMMUNITY/ AREA	NTEENTH	SUBSCRIBER GROU	JP 0	EIC COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
	DOL		DOL		DOL	ONLE OIGH	DOL	Base Rate Fee
								and
		-				-		Syndicated
		-						Exclusivity Surcharge
						-		for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	<u>\$</u>	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon		\$	0.00	
	ITEENTH	SUBSCRIBER GROU						
COMMUNITY/ AREA			0	COMMUNITY/ AREA		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th	e base rat	te fees for each subsc	riber group	as shown in the boxes	above.			
Enter here and in block						\$		

CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Base	TWENTY-FIRS         MMUNITY/ AREA         ALL SIGN       DSE         Sign and the second secon	T SUBSCRIBER GROU	JP 0	TWEN COMMUNITY/ AREA	TY-SECOND	SUBSCRIBER GRO	0				
0       COMMUNITY/AREA       0       Com         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       Str       Str         Community       Community       Community       Community       Str       Str       Str         Community       Community       Community       Community       Community       Str       Str       Str         Community       Community       Community       Community       Community       Str	ALL SIGN DSE ALL SIGN SIGN SIGN SIGN SIGN SIGN SIGN SIGN		0	COMMUNITY/ AREA	A		0				
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       Syn       Syn         ALL SIGN       DSE       CALL SIGN       DSE       Syn       Syn       Syn         Syn       0.00       Gross Receipts Second Group       S       0.00       Syn       Syn       Syn         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE	ALL SIGN DSE  ALL SIGN DSE  ALL SIGN BEREICHTERE  ALL SIGN BEREICHTERE  ALL SIGN BEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREICHTEREI	CALL SIGN	DSE			CALL SIGN	DSE				
Base Rate Fee Second Group \$ 0.00 S 0.00 Base Rate Fee Second Group \$ 0.00 S 0.00 Base Rate Fee Second Group \$ 0.00 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIG	al DSEs ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
Sym Sym Sym Sym Sym Sym Sym Sym	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
Image: Second Group       Image: Second Group<	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
Sum Sum Sum Sum Sum Sum Sum Sum	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
St         0.00         0.00         Total DSEs         0.00         Stereipts Second Group         \$         0.00         Stereipts Second Group         \$         0.00         Stereipts Second Group         \$         0.00         Base Rate Fee Second Group         \$         0         CALL SIGN       DSE         CALL SIGN       D<	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
Image: Second Group       Image: Second Group<	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
Str         Image: Str         <	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
\$       0.00       Gross Receipts Second Group       \$       0.00         \$       0.00       Base Rate Fee Second Group       \$       0.00         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O         O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O         O       O       O       O         O       O       O       O         O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O <td>ss Receipts First Group e Rate Fee First Group TWENTY-THIRI</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
\$       0.00       Gross Receipts Second Group       \$       0.00         \$       0.00       Base Rate Fee Second Group       \$       0.00         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O <td>ss Receipts First Group e Rate Fee First Group TWENTY-THIRI</td> <td>П</td> <td></td> <td></td> <td></td> <td>-</td> <td></td>	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI	П				-					
\$       0.00       Gross Receipts Second Group       \$       0.00         \$       0.00       Base Rate Fee Second Group       \$       0.00         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O <td>ss Receipts First Group e Rate Fee First Group TWENTY-THIRI</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
\$       0.00       Gross Receipts Second Group       \$       0.00         \$       0.00       Base Rate Fee Second Group       \$       0.00         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         O       O       O	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
\$       0.00       Gross Receipts Second Group       \$       0.00         \$       0.00       Base Rate Fee Second Group       \$       0.00         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
\$       0.00       Gross Receipts Second Group       \$       0.00         \$       0.00       Base Rate Fee Second Group       \$       0.00         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O         O       O       O       O       O         O       O       O       O       O	ss Receipts First Group e Rate Fee First Group TWENTY-THIRI										
\$       0.00       Base Rate Fee Second Group       \$       0.00         SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE       O         O       O       O       O       O       O         O       O       O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE       O         O       O       O       O       O       O         O       O       O       O       O       O         O       O       O       O       O       O       O         O       O       O       O       O       O       O       O         O       O       O       O       O       O       O       O       O       O         O       O       O       O       O	e Rate Fee First Group TWENTY-THIRI										
SUBSCRIBER GROUP       TWENTY-FOURTH SUBSCRIBER GROUP         O       COMMUNITY/ AREA       O         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O         CALL SIGN       DSE       CALL SIGN       DSE         O       O       O       O         O       O       O       O         O       O       O       O         O       O       O       O         O       O       O       O         O       O       O       O         O       O       O       O	TWENTY-THIRI	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00				
O       COMMUNITY/ AREA       O         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       DSE       DSE         CALL SIGN       DSE       DSE       DSE		\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00				
CALL SIGN       DSE       CALL SIGN       DSE         Image: Call Sign       Image: Call Sign <td></td> <td>D SUBSCRIBER GROU</td> <td></td> <td>11</td> <td></td> <td>SUBSCRIBER GRO</td> <td>UP</td>		D SUBSCRIBER GROU		11		SUBSCRIBER GRO	UP				
O.00 Total DSEsO.00	MMUNITY/ AREA		0 COMMUNITY/ AREA 0				0				
	ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	al DSEs		0.00	Total DSFs			0.00				
	ss Receipts Third Group				th Group	\$					
		\$	5.00		0.000	<b>₹</b>					
\$         0.00         Base Rate Fee Fourth Group         \$         0.00	e Rate Fee Third Group	\$		11			11				

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC				
TWEN COMMUNITY/ AREA	ry-fifth	SUBSCRIBER GROU	JP 0	TWE COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
	202							Base Rate Fee
								and
								Syndicated
		-						Exclusivity Surcharge
						-		for
								Partially
								Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	<u>\$</u>	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Seco		\$	0.00	
	EVENTH	SUBSCRIBER GROU		TWEN				
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		_						
		_						
						-		
		]				<b>I</b>		
						-		
						I		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th	e base rai	te fees for each subso	riber group	as shown in the boxes	above.			
Enter here and in block						\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#Lafayette City Parish Consolidated Government123119								Name
				TE FEES FOR EAC		BER GROUP		
	Y-NINTH	SUBSCRIBER GROU	JP 0	1	P 0	9		
COMMUNITY/ AREA				COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee
								and
								Syndicated Exclusivity
		-						Surcharge
								for
								Partially
								Distant Stations
								otations
Total DSEs	ļļ	ł	0.00	Total DSEs	Į	11	0.00	
		•	0.00			•	0.00	
Gross Receipts First Gr	oup	<u>\$</u>	0.00	Gross Receipts Seco	na Group	<u>\$</u>	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	Y-FIRST	SUBSCRIBER GROU		1		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		I				II		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP         THIRTY-THIRD SUBSCRIBER GROUP         THIRTY-THIRD SUBSCRIBER GROUP         COMMUNITY/ AREA         CALL SIGN       DSE       CALL SIGN	0 DSE 0.00 0.00 0.00 0.00
COMMUNITY/ AREA       0       COMMUNITY/ AREA         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN         CALL SIGN       DSE       CALL SIGN       DSE       DSE         CALL SIGN       DSE       CALL SIGN       DSE       DSE         COMBUNITY/ AREA       DSE       CALL SIGN       DSE       SGross Receipts Second Group       S         ThiRTY-FIFTH SUBSCRIBER GROUP       ThiRTY-FIFTH SUBSCRIBER GROUP       ThiRTY-SIXTH SUBSCRIBER GROUP       COMMUNITY/ AREA       COMMU	DSE DSE 0.00 0.00 0.00 0.00
Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group       Image: Second Group       Image: Second Group         Image: Second Group	0.00 0.00 0.00 0.00
Total DSEs       0.00         Total DSEs       0.00         Stoss Receipts First Group       \$         Stoss Receipts First Group       \$         Stase Rate Fee First Group       \$         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         COMMUNITY/ AREA       0	0.00 0.00 0.00 0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
iross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
s       0.00       Gross Receipts Second Group       s         ase Rate Fee First Group       s       0.00       Base Rate Fee Second Group       s         THIRTY-FIFTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP       THIRTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       0       COMMUNITY/ AREA	0.00
Base Rate Fee First Group     \$       THIRTY-FIFTH SUBSCRIBER GROUP     THIRTY-SIXTH SUBSCRIBER GROUP       COMMUNITY/ AREA     0	0.00
THIRTY-FIFTH SUBSCRIBER GROUP     THIRTY-SIXTH SUBSCRIBER GROUP       OMMUNITY/ AREA     0	0
OMMUNITY/ AREA 0 COMMUNITY/ AREA	•
	•
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	
	DSE
otal DSEs <b>0.00</b> Total DSEs	0.00
ross Receipts Third Group	0.00
ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP THIRTY-SEVENTH SUBSCRIBER GROUP THIRTY-EIGHTH SUBSCRIBER GROUP								
THIRTY-SEVENTH SUBSCRIBER GROUP       COMMUNITY/ AREA     0				THIR COMMUNITY/ AREA	9			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				Computation of
					DOL		DOL	Base Rate Fee
								and
						-		Syndicated
		-						Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
							0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon		\$	0.00	
	Y-NINTH	SUBSCRIBER GROU			JP			
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
		]				<b>I</b>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth Group \$ 0.00				
Base Rate Fee: Add th	e base rat	te fees for each subsc	riber group	as shown in the boxes	above.			
Enter here and in block 3, line 1, space L (page 7)								

		SUBSCRI	TE FEES FOR EACH								
	SUBSCRIBER GROU		m		SUBSCRIBER GROU						
0					OMMUNITY/ AREA 0						
DSE	CALL SIGN	CALL SIGN	DSE	ALL SIGN DSE CALL SIGN DSE							
		DSE					CALL SIGN DSE CAL				
0.00			Total DSEs	0.00			al DSEs				
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	oss Receipts First G				
0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	e Rate Fee First G				
	SUBSCRIBER GROU		FORT	JP	\$ SUBSCRIBER GROU		FOR				
0.00							FOR				
			FORT	JP			FOR' MUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' MUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' IMUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' MUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' MUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' IMUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' MMUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' /MUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' MMUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR MMUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR MMUNITY/ AREA				
0	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR' MMUNITY/ AREA				
0 DSE	SUBSCRIBER GROU	-FOURTH	FORTY     COMMUNITY/ AREA     CALL SIGN	JP 0	SUBSCRIBER GROU	RTY-THIRD	FOR MMUNITY/ AREA ALL SIGN				
0 DSE 0.00	SUBSCRIBER GROU	-FOURTH	FORTY COMMUNITY/ AREA	JP 0 DSE 0.00	SUBSCRIBER GROU	RTY-THIRD	FOR MMUNITY/ AREA				
0 DSE	SUBSCRIBER GROU	2-FOURTH	FORTY     COMMUNITY/ AREA     CALL SIGN	JP 0	SUBSCRIBER GROU		FOR DMMUNITY/ AREA CALL SIGN				
0 DSE 0.00	SUBSCRIBER GROU	2-FOURTH	COMMUNITY/ AREA	JP 0 DSE 0.00	SUBSCRIBER GROU		ase Rate Fee First G FOR' DMMUNITY/ AREA CALL SIGN CALL SIGN tal DSEs ross Receipts Third C				

			ATE FEES FOR EAC			123119	
	H SUBSCRIBER GRO				I SUBSCRIBER GRO	UP	
OMMUNITY/ AREA 0			COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE		
		DOL					
al DSEs		0.00	Total DSEs	•		0.00	
oss Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
e Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FORTY-SEVENTH SUBSCRIBER GROUP							
	H SUBSCRIBER GRO				I SUBSCRIBER GRO		
	H SUBSCRIBER GRO	OUP 0	FOI COMMUNITY/ ARE/		I SUBSCRIBER GRO	UP 0	
MUNITY/ AREA	H SUBSCRIBER GRO				I SUBSCRIBER GRO		
MUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
IMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
IMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
/MUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
IMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
MMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
DMMUNITY/ AREA		0 DSE	COMMUNITY/ ARE	A DSE		0 DSE	
DMMUNITY/ AREA	CALL SIGN	0 DSE	COMMUNITY/ ARE	A DSE	CALL SIGN	0 DSE	
MMUNITY/ AREA	CALL SIGN	0 DSE	COMMUNITY/ ARE	A DSE	CALL SIGN	0 DSE	

LEGAL NAME OF OWNER			ment			SY	STEM ID# 123119	Name
				TE FEES FOR EACH		BER GROUP		
	Y-NINTH	SUBSCRIBER GROU	JP 0			9		
COMMUNITY/ AREA				COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee
						-		and
								Syndicated Exclusivity
		-						Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secor	nd Group	\$	0.00	
FIFT	Y-FIRST	SUBSCRIBER GROU	JP	FIFT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						+		
Total DSEs	1 1		0.00	Total DSEs		11	0.00	
				- Creating				
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourt	n Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourt	n Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER Lafayette City Pari			nent			SY	STEM ID# 123119	Name
				TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUF		
FIFT COMMUNITY/ AREA	Y-1HIRD	SUBSCRIBER GROL	^{IP} 0	FIFT COMMUNITY/ AREA	。 0	9		
			v	CONMONT I/ AREA			v	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
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								Stations
	LI		0.00	Total DSEs		ļļ	0.00	
Total DSEs								
Gross Receipts First Gr	oup	<u>\$</u>	0.00	Gross Receipts Secon	id Group	<u>\$</u>	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
	Y-FIFTH	SUBSCRIBER GROU		1	FTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-				-		
Total DSEs	<u>                                     </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
		·				·		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			ment			SI	STEM ID# 123119	Name
				TE FEES FOR EAC				
FIFTY-S	EVENTH	SUBSCRIBER GROU	JP	FIF	Р	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				<b>3</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
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								Distant
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Total DSEs	II	ļ	0.00	Total DSEs	ļ	11	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
FIFT	Y-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	I SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			ment			S	STEM ID# 123119	Name
				TE FEES FOR EAC				
	TY-FIRST	SUBSCRIBER GROU		SIXT		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				<b>J</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SIXT	Y-THIRD	SUBSCRIBER GROU	JP	SIXT	TY-FOURTH	I SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE Lafayette City Pari			nent			SY	STEM ID# 123119	Name
				TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROUI		
SIX COMMUNITY/ AREA	TY-FIFTH	SUBSCRIBER GROU	<u>лр</u> О	SIZ COMMUNITY/ AREA	<u> </u>	9		
			Ŭ					Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	ld Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SIXTY-S	EVENTH	SUBSCRIBER GROU	JP	SIXT	Y-EIGHTH	SUBSCRIBER GROUI	D C	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
					0	-		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	i Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				II				
Base Rate Fee: Add the Enter here and in block			nder group	as snown in the doxes a	adove.	\$		

LEGAL NAME OF OWNE			ment			SY	STEM ID# 123119	Name
				TE FEES FOR EAC		IBER GROUP		
	Y-NINTH	SUBSCRIBER GROU		1		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
						-		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVEN	TY-FIRST	SUBSCRIBER GROU	JP	SEVENT	Y-SECOND	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
T ( ) D C T				TILESE		11		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC		IBER GROUP		
	TY-THIRD	SUBSCRIBER GRO	UP 0			9		
COMMUNITY/ AREA			U	COMMUNITY/ ARE			0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
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Total DSEs	-!	<u> </u>	0.00	Total DSEs			0.00	
	roup	¢	0.00		and Croup	¢	0.00	
Gross Receipts First G	noup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	NTY-FIFTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
ise Rate Fee: Add th ter here and in block			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU		
SEVENTY-S COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GROU	JP 0	SEVEN COMMUNITY/ AREA	9			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	Computation of			
	DOL		DGL	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
		-						and
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						-		Distant
								Stations
							0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	0.00			
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$ SUBSCRIBER GROU	0.00	
	Y-NINTH	SUBSCRIBER GROU						
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		-				-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th	e base rat	te fees for each subsc	riber aroup	as shown in the boxes	s above.			
Enter here and in block			U F			\$		

		SUBSCR		BASE RA			R				
	ATE FEES FOR EACH SUBSCRIBER GROUP EIGHTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				EIGHTY-FIRST SUBSCRIBER GROUP						
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DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
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0.00			Total DSEs	0.00	-		al DSEs				
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0.00	\$	d Group	Base Rate Fee Secon	0.00	se Rate Fee First Group \$ 0.00						
		•			Ļ	Group	se kate Fee First G				
	SUBSCRIBER GROU		EIGHT	JP		HTY-THIRD	EIGH				
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0 DSE	SUBSCRIBER GROU		EIGHT	JP		HTY-THIRD	EIGH IMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH IMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH IMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH IMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
DSE		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0 DSE	SUBSCRIBER GROU		EIGH MMUNITY/ AREA				
<u> </u>		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU		EIGH MMUNITY/ AREA ALL SIGN				
DSE		/-FOURTH	EIGHTY COMMUNITY/ AREA	JP 0 DSE	SUBSCRIBER GROU		EIGH DMMUNITY/ AREA CALL SIGN				
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	solidated Gover					123119	N
	COMPUTATION O		TE FEES FOR EAG		RIBER GROUP	UP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
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CALL SIGN DSE	CALL SIGN	N DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base I
							a
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otal DSEs		0.00	Total DSEs		11	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00	
	H SUBSCRIBER GRO		EIGHTY-EIGHTH SUBSCRIBER GROUP				
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						1	
			•				
otal DSEs		0.00	Total DSEs			0.00	
otal DSEs ross Receipts Third Group	S	0.00	Total DSEs Gross Receipts Fou	Irth Group	S	0.00	
				Irth Group			
	S S				S S		

LEGAL NAME OF OWNER			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROL		
EIGHT COMMUNITY/ AREA	Y-NINTH	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	9			
		1				Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated
								Exclusivity
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								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	0.00			
Base Rate Fee First Gr	Base Rate Fee First Group \$ 0.00				nd Group	\$	0.00	
NINET	Y-FIRST	SUBSCRIBER GROU	JP	NINET	Y-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-		
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

			nment				123119	N	
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EACH SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBER GROUP					
OMMUNITY/ AREA			0	COMMUNITY/ ARE			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Com	
	DOL						DOL	Base	
								-	
								Syn Exc	
								Sur	
								_	
								Pa Di	
								Sta	
			0.00				0.00		
otal DSEs			0.00		Total DSEs 0.00				
ross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	ond Group	<u>\$</u>	0.00		
ase Rate Fee First Group \$ 0.00				Base Rate Fee Seco	ond Group	\$	0.00		
NINET	Y-FIFTH	SUBSCRIBER GRO	UP	NINETY-SIXTH SUBSCRIBER GROUP					
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs			0.00	Total DSEs		11	0.00		
		¢	0.00		rth Croup	¢	0.00		
ross Receipts Third Gr	Jup	<u>\$</u>	0.00	Gross Receipts Four	an Group	\$	0.00		
	nun	s	0.00	Base Rate Fee Four	rth Group	\$	0.00		
ase Rate Fee Third Gr	oup	-							

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	of			
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
						Ţ.		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	0.00			
Base Rate Fee First Group \$ 0.00				Base Rate Fee Secon				
NINET	Y-NINTH	SUBSCRIBER GROU	JP	ONE HU				
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
					h. O			
Gross Receipts Third G	roup	<u>\$</u>	0.00	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th	e base rat	<b>te fees</b> for each subsc	riber group	as shown in the boxes	above.			
Enter here and in block						\$		

LEGAL NAME OF OWNE Lafayette City Pari			nent			SY	STEM ID# 123119	Name
	Parts Consumated Government       123119         BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP       ONE HUNDRED SECOND SUBSCRIBER GROUP         ONE HUNDRED FIRST SUBSCRIBER GROUP       ONE HUNDRED SECOND SUBSCRIBER GROUP       O         AUNITY/ AREA       0       COMMUNITY/ AREA       0         L SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         L SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         L SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         L SIGN       DSE       CALL SIGN       DSE       Call SIGN       DSE         L SIGN       DSE       CALL SIGN       DSE       Call SIGN       DSE         L SIGN       DSE       CALL SIGN       DSE       Gomputation of Base Rate       Base Rate         L SIGN       DSE       CALL SIGN       DSE       Station       Station         Station       Total DSEs       0.00       Gross Receipts Second Group       Station         DSEs       0.00       Base Rate Fee Second Group       Station       Station         ONE HUNDRED THIRD SUBSCRIBER GROUP       ONE HUNDRED FOURTH SUBSCRIBER GROUP       ONE HUNDRED FOURTH SUBSCRIBER GROUP         N				Q			
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								Base Rate Fee
								-
		-						Surcharge
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	D THIRD	SUBSCRIBER GROU		1	D FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the	e base rat	e fees for each subsc	riber aroun	as shown in the hoxes	above			
Enter here and in block						\$		

LEGAL NAME OF OWNE Lafayette City Pari			nent			SY	STEM ID# 123119	Name
				TE FEES FOR EACH				
ONE HUNDRED FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				ONE HUNDF COMMUNITY/ AREA	P 0	9		
					Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
						-		and
								Syndicated
								Exclusivity
								Surcharge
		-						for Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs		···	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	0.00			
	Base Rate Fee First Group \$ 0.00			Base Rate Fee Secon				
	SEVENTH	SUBSCRIBER GROU		11	DEIGHTH	SUBSCRIBER GROU	P 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth Group \$			0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth Group \$			0.00		
	Base Rate Fee: Add the base rate fees for each subscriber grou Enter here and in block 3, line 1, space L (page 7)				avove.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EACH				
ONE HUNDRED NINTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				ONE HUNDF		I SUBSCRIBER GROU	UP 0	9
							Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
		-						
		1						
			0.00			ļļ	0.00	
Total DSEs				Total DSEs 0.00				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secor				
ONE HUNDRED E	LEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED TWELVTH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group		\$	0.00	Gross Receipts Fourth Group \$ 0.00			0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Paga Data East Add	<b>beec</b> ==	to food for each autor	ribor group	as shown in the hours	abova			
Base Rate Fee: Add th Enter here and in block			ander group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name	
				TE FEES FOR EACH					
ONE HUNDRED THI	RTEENTH	SUBSCRIBER GROU	<u>ле</u> О	ONE HUNDRED FOU	JRTEENTH	SUBSCRIBER GRO	UP 0	9	
			Ŭ				•	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	_ <u> </u>		0.00	Total DSEs	<u> </u>		0.00		
Gross Receipts First G	lroup	\$	0.00	Gross Receipts Secor	d Group	\$	0.00		
<b>Base Rate Fee</b> First G	iroup	\$	0.00	Base Rate Fee Secor	d Group	\$	0.00		
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED S					
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
		=							
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
			riber group	as shown in the boxes	above.				
Enter here and in bloc	k 3, line 1,	space L (page 7)				\$			

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LEGAL NAME OF OWNE			nent			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC				
DNE HUNDRED SEVEN	ITEENTH	SUBSCRIBER GROU		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
						-		Base Rate Fee
		-				-		and Sundianted
								Syndicated Exclusivity
		-						Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEa		11	0.00	
				Total DSEs				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ITEENTH	SUBSCRIBER GROU		ONE HUNDRED T				
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-		
		-				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th	e base rat	te fees for each subsc	riber aroun	as shown in the boxes	above.			
Enter here and in block 3, line 1, space L (page 7)								

LEGAL NAME OF OWNE			iment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC				
ONE HUNDRED TWEN	ITY-FIRST	SUBSCRIBER GRO	UP 0	ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP				9
COMMUNITY/ AREA			U	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
		-						Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	0.00			
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP	<u> </u>	ONE HUNDRED TWE				
COMMONT T/ AREA			v					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		]						
		-						
						T		
Total DSEs	1		0.00	Total DSEs			0.00	
· · · · · · · · · · · · · · · · · · ·		0.00	Gross Receipts Four	rth Group	\$	0.00		
	P	· ·			croop			
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th	e hase rat	e fees for each subs	criber group	as shown in the hove	sabove			
Enter here and in block			onoor group		5 abuve.	\$		

LEGAL NAME OF OWNE			nment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAG				
ONE HUNDRED TWEN	NTY-FIFTH	SUBSCRIBER GROU	P 0	ONE HUNDRED T	ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP			9
			v				V	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	ļ		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NE HUNDRED TWENTY	SEVENTH	SUBSCRIBER GROU		ONE HUNDRED TW				
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							• • •	
Total DSEs 0.00			Total DSEs			0.00		
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxe	es above.	s		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC				
	NTY-NINTH	SUBSCRIBER GROUP	, 0		。 0	9		
COMMUNITY/ AREA			U	COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
		-						Stations
							0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED THI	RTY-FIRST	SUBSCRIBER GROUP	)	ONE HUNDRED THIF	RTY-SECONE	SUBSCRIBER GROUP	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		]				T		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				ATE FEES FOR EAC				
ONE HUNDRED THIF	RTY-THIRD	SUBSCRIBER GROUP	, 0					9
COMMUNITY AREA			U	COMMUNITY AREA	COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
		-						Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	0.00			
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
ONE HUNDRED THIF	RTY-FIFTH	SUBSCRIBER GROUP	, 0	ONE HUNDRED T				
COMMONITIT AREA			U					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
		0.00	Gross Receipts Four	rth Group	\$	0.00		
	P	· ·						
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th	e base rat	te fees for each subs	criber aroun	as shown in the boxe	s above			
Enter here and in block						\$		

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LEGAL NAME OF OWNE			nent			SY	STEM ID# 123119	Name	
			BASE RA	TE FEES FOR EACH					
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP	0	ONE HUNDRED THIR	TY-EIGHTH	SUBSCRIBER GROUP	0	9	
			U						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon		\$	0.00		
	TY-NINTH	SUBSCRIBER GROUP			FORTIETH	SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add th	e base rat	te fees for each subsc	riber group	as shown in the boxes a	above.				
Enter here and in block	3, line 1, s	space L (page 7)				\$			

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC				
ONE HUNDRED FOF	RTY-FIRST	SUBSCRIBER GROUF	, 0	ONE HUNDRED FOR	, 0	9		
COMMUNITY AREA			U		U	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs	<b></b>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GROUP		11		I SUBSCRIBER GROUF		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	۸ 		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
		-						
Total DSEs			0.00	Total DSEs	1	······	0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Dees Data Es	- h							
Base Rate Fee: Add th Enter here and in block			criber group	as snown in the boxes	adove.	\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EACH				
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP	0	ONE HUNDRED FO		I SUBSCRIBER GROUP	0	9
COMMUNITY AREA			U	COMMONT I/ AREA	U	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
		-						and Syndicated
								Exclusivity
		-						Surcharge
								for Partially
								Distant
		-						Stations
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th	ne base ra	<b>te fees</b> for each subsc	riber group	as shown in the boxes	above.			
Enter here and in block	3, line 1,	space L (page 7)				\$		

LEGAL NAME OF OWNE			ment			S	YSTEM ID# 123119	Name
				TE FEES FOR EACH				
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU	<u>лр</u> О	ONE HUNDRED	) FIFTIETH	SUBSCRIBER GROU	JP 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
		-						
			0.00		ļ	11	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	d Group	\$	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Secor	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	/-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		=						
		-				+		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee. Add th	ne base rat	te fees for each subsc	riber aroun	as shown in the boxes	above			
Enter here and in block						\$		

LEGAL NAME OF OWNE Lafayette City Pari			nent			SY	STEM ID# 123119	Name	
				TE FEES FOR EACH					
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU	р 0	COMMUNITY/ AREA	-FOURTH	SUBSCRIBER GROUP	, 0	9	
			v						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
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		_						Surcharge	
						-		for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00		
ONE HUNDRED FIFT	Y-FIFTH	SUBSCRIBER GROU			TY-SIXTH	SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add the			riber group	as shown in the boxes a	above.				
Enter here and in block	3, line 1, s	space L (page 7)				\$			

LEGAL NAME OF OWNE			nment			S	YSTEM ID# 123119	Name
				TE FEES FOR EAC				
ONE HUNDRED FIFTY	-SEVENTH	SUBSCRIBER GROUI	∍ 0	ONE HUNDRED F	<u> </u>	9		
			v		V	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
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								Distant
								Stations
		-						
Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROUI		1		I SUBSCRIBER GROUP	<u> </u>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			1					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	s above.	\$		

			ment				123119
BI				TE FEES FOR EACH			
<b></b>		SUBSCRIBER GROU	JP			SUBSCRIBER GRO	JUP
OMMUNITY/ AREA	Lafaye	ite		COMMUNITY/ AREA	Brouss	ard	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
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otal DSEs			0.00	Total DSEs			0.00
oss Receipts First G	roup	<u>\$</u> 1,987	,371.59	Gross Receipts Secor	nd Group	\$	17,903.26
ise Rate Fee First G	roup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00
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		SUBSCRIBER GROU	JP			I SUBSCRIBER GRO	JUP
OMMUNITY/ AREA	Young	sville		COMMUNITY/ AREA	Scott		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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otal DSEs			0.00	Total DSEs			0.00
ross Receipts Third C	Group	<u>\$</u> 24	,674.05	Gross Receipts Fourth	n Group	\$	1,107.01
ase Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00
			criber group	as shown in the boxes	above.	¢	0.00

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		solidated Goverr					123119
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	<mark></mark>						
tal DSEs	<u> </u>		0.00			<u> </u>	0.00
				Total DSEs			
oss Receipts First G	roup	\$ 2	2,358.60	Gross Receipts Sec	cond Group	\$	0.00
<b>se Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
	SEVENTH	SUBSCRIBER GRC	UP		EIGHTH	I SUBSCRIBER GRO	UP
MMUNITY/ AREA			0	COMMUNITY/ ARE	EA		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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tal DSEs	<u> </u>		0.00	Total DSEs		11	0.00
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oss Receipts Third (	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00
ase Rate Fee Third G	froup	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00
ise Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00
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	ne base rat			Base Rate Fee Fou		\$\$	0.00

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al DSEs			0.00	Total DSEs			0.00
oss Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00
Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
	ELEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	I SUBSCRIBER GRC	UP
/MUNITY/ ARE/	4		0	COMMUNITY/ ARE	EA		0
LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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al DSEs			0.00	Total DSEs			0.00
oss Receipts Third	d Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00
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se Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00
se Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00
		\$				\$	0.00
Rate Fee: Add	the <b>base ra</b>	te fees for each subspace L (page 7)		Base Rate Fee For		<u>\$</u>	0.00

afayette City Parish Con						
			ATE FEES FOR EAG			
THIRTEENTH OMMUNITY/ AREA	SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GRC	0 0
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tal DSEs		0.00	Total DSEs			0.00
oss Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
e Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
	\$ SUBSCRIBER GRO		Base Rate Fee Sec		\$ SUBSCRIBER GRC	•
FIFTEENTH			Base Rate Fee Sec	SIXTEENTH		•
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FIFTEENTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTEENTH	SUBSCRIBER GRC	0 0
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FIFTEENTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTEENTH	SUBSCRIBER GRC	0 0
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FIFTEENTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTEENTH	SUBSCRIBER GRC	0 0
FIFTEENTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTEENTH	SUBSCRIBER GRC	0 0
FIFTEENTH	SUBSCRIBER GRC	DUP 0 DSE	COMMUNITY/ ARE	SIXTEENTH	SUBSCRIBER GRC	UP 0 DSE
FIFTEENTH DMMUNITY/ AREA	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTEENTH	SUBSCRIBER GRC	0 0
DMMUNITY/ AREA	SUBSCRIBER GRC	DUP 0 DSE	COMMUNITY/ ARE	SIXTEENTH A DSE	SUBSCRIBER GRC	UP 0 DSE
FIFTEENTH DMMUNITY/ AREA	SUBSCRIBER GRC	DUP 0 DSE 0	COMMUNITY/ ARE COMMUNITY/ ARE CALL SIGN	SIXTEENTH A DSE	SUBSCRIBER GRC	UP 0 DSE 0

NLL SIGN       DSE       CALL SIGN       DSE       0.00         NI DSEs       0.00       Total DSEs       0.00       Gross Receipts Second Group       3       0.00         se Receipts First Group       3       0.00       Base Rate Fee Second Group       3       0.00         NINTEENTH SUBSCRIBER GROUP       TWENTIETH SUBSCRIBER GROUP       TWENTIETH SUBSCRIBER GROUP       0.00       MUNITY/ AREA       0         NLL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         NIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         NIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         NIL SIGN       DSE <th>ſ</th> <th></th> <th>COMPLITATION O</th> <th></th> <th>TE FEES FOR FAC</th> <th></th> <th></th> <th></th>	ſ		COMPLITATION O		TE FEES FOR FAC			
MUNITY/ AREA       0       COMMUNITY/ AREA       0         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       0.00       Gross Receipts Second Group       5       0.00         INDREENTH SUBSCRIBER GROUP       TOTAL DSE       COMMUNITY/ AREA       0         MUNITY/ AREA       O       COMMUNITY/ AREA       0         MUNITY/ AREA       O       COMMUNITY/ AREA       0         MUNITY/ AREA       O       COMMUNITY/ AREA       0         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         ALL SIGN       DSE       CALL SIGN       DSE					11			UP
ALL SIGN       DSE       CALL SIGN       DSE       D.00         IN DSEs       0.00       5       0.00       Total DSEs       0.00       Gross Receipts Second Group       5       0.00       Socold Scoold Scoold Group       5       0.00       Socold Scoold S	DMMUNITY/ AREA				11			
Image: Second Structure       Image: Second Structure <th>CALL SIGN</th> <th>DSE</th> <th>CALL SIGN</th> <th>DSE</th> <th>CALL SIGN</th> <th>DSE</th> <th>CALL SIGN</th> <th>DSE</th>	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ss Receipts First Group <u>\$ 0.00</u> e Rate Fee First Group <u>\$ 0.00</u> NINTEENTH SUBSCRIBER GROUP MUNITY/ AREA 0 COMMUNITY/ AREA 0 ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DS								
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al DSEs			0.00	Total DSEs			0.00
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e Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
TWE	NTY-THIRD	SUBSCRIBER GRO	UP	TWE	NTY-FOURTH	SUBSCRIBER GRO	UP
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s Receipts Thirc Rate Fee Thirc Rate Fee: Add	Group	\$	0.00	Gross Receipts Fou	irth Group		0.00
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TWEN	NIY-FIFTH	SUBSCRIBER GRO	DUP 0	TW COMMUNITY/ ARE		SUBSCRIBER GRC	0 0
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tal DSEs			0.00	Total DSEs			0.00
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e Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
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ipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0	
	0.00
Fee Third Group     \$     0.00       Base Rate Fee Fourth Group     \$	0.00
II	
Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	0.00
ind in block 3, line 1, space L (page 7) \$	0.00

FORM SA3E. PAGE 19.

LEGAL NAME OF OW Lafayette City P			nment			5	SYSTEM ID# 123119	Name
				ATE FEES FOR EA				
TH COMMUNITY/ ARE		SUBSCRIBER GRO	000 0	COMMUNITY/ ARE		SUBSCRIBER GRO	0 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
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		-						and
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								Distant Stations
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		SUBSCRIBER GRO				SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	A		0	COMMUNITY/ ARE	EA		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Thir	a Group	\$	0.00	Gross Receipts For	urth Group	\$	0.00	
Base Rate Fee Thin	d Group	\$	0.00	Base Rate Fee For	urth Group	\$	0.00	
Base Pate Foot Ad	the bace re	to foos for each auto	scriber group	II	es above			
Enter here and in blo	ock 3, line 1,	space L (page 7)	sonner group	as shown in the box	53 aDUVE.	\$		

		SUBSCRIBER GRO		TE FEES FOR EA		I SUBSCRIBER GRO	UP
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			_				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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al DSEs			0.00	Total DSEs			0.00
s Receipts First	Group	\$	0.00		cond Group	\$	0.00
e Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
		SUBSCRIBER GRO				I SUBSCRIBER GRC	
/MUNITY/ ARE	4		0	COMMUNITY/ ARE	:A		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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al DSEs			0.00	Total DSEs		Gross Receipts Fourth Group \$	
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	d Group	\$	0.00		urth Group	\$	0.00
tal DSEs oss Receipts Thir	·	<u>\$</u>	0.00	Gross Receipts For		\$	0.00
	·	\$ \$				\$ \$	
ss Receipts Thin	·		0.00	Gross Receipts For			0.00
Receipts Thin	d Group	\$	0.00	Gross Receipts Fou Base Rate Fee Fou	irth Group		0.00
Receipts Thin Rate Fee Thin Rate Fee: Add	d Group	\$	0.00	Gross Receipts For	irth Group		0.00

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V AREA       0       COMMUNITY/ AREA         N       DSE       CALL SIGN       DSE       CALL SIGN       DSE         N       DSE       DSE       DSE       DSE       DSE       DSE         N       DSE       DSE <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>								
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ee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.0	al DSEs			0.00	Total DSEs			0.00
ee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.0	oss Receipts Thir	rd Group	\$	0.00	Gross Receipts Fourth Group \$		0.00	
	oo Data Eas Thir	d Croup		0.00	Basa Bata Fas Fas	uth Crown	¢	0.00
II e: Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.	SE RALE FEE I NI	u Group	Þ	0.00	Base Rate Fee Fol	artin Group	\$	0.00
e: Add the base rate fees for each subscriber group as shown in the boxes above.					11			
nd in block 3, line 1, space L (page 7)	Rate Fee: Ad	d the <b>base rat</b>	e fees for each sub	scriber group	as shown in the boxe	es above.		

LEGAL NAME OF OWN			ment			5	5YSTEM ID# 123119	Mamaa
				ATE FEES FOR EAG		RIBER GROUP		
FO	RTY-FIFTH	SUBSCRIBER GRO	UP	F	ORTY-SIXTH	I SUBSCRIBER GRC	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
						····		for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
		[						
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY	-SEVENTH	SUBSCRIBER GRO	UP	FO	RTY-EIGHTH	I SUBSCRIBER GRC	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				1		
						I		
							•	1
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloc			criber group	as shown in the boxe	es above.	\$		
	. ,							

afayette City Par							
				TE FEES FOR EA			
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRC	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	:A		0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				-			
						-	
				-			
al DSEs	-		0.00	Total DSEs			0.00
oss Receipts First Group		\$ 0.00		Gross Receipts Second Group		\$ 0.00	
e Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
FIF	TY-FIRST	SUBSCRIBER GRO	)UP	FIF		SUBSCRIBER GRC	
/MUNITY/ AREA					-TY-SECOND	SUBSCRIBER GRC	
			0	COMMUNITY/ ARE		SUBSCRIDER ORC	0
LL SIGN	DSE	CALL SIGN	0 DSE			CALL SIGN	
LL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
LL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
LL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
LLL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN		CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
ALL SIGN		CALL SIGN	1	COMMUNITY/ ARE	A		0
	DSE	CALL SIGN	1	COMMUNITY/ ARE	A		0
al DSEs		CALL SIGN		COMMUNITY/ ARE CALL SIGN			
tal DSEs				COMMUNITY/ ARE CALL SIGN			0 DSE
CALL SIGN	Group			COMMUNITY/ ARE CALL SIGN	Irth Group		0 DSE
al DSEs	Group		DSE	COMMUNITY/ ARE CALL SIGN	Irth Group	S	0 DSE 0.00 0.00
al DSEs oss Receipts Third G se Rate Fee Third G se Rate Fee: Add th	Broup Broup	\$ \$ \$ e fees for each subs	DSE	COMMUNITY/ ARE CALL SIGN	A DSE DSE In the second	S	0 DSE 0.00 0.00
DSEs s Receipts Third C Rate Fee Third C	Broup Broup	\$ \$ \$ e fees for each subs	DSE	COMMUNITY/ ARE CALL SIGN CALL SIGN Total DSEs Gross Receipts Fou Base Rate Fee Fou	A DSE DSE In the second	S	0 DSE 0.00 0.00

				ATE FEES FOR EA				
H OMMUNITY/ AREA	FIFTY-THIRD SUBSCRIBER GROUP			FIFTY-FOURTH SUBSCRIBER GROUP				
			Ŭ		-~		Ŭ	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
		-						
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		-				-		
tal DSEs			0.00	Total DSEs			0.00	
oss Receipts First Group \$ 0.00		0.00	Gross Receipts Se	cond Group	\$ 0.00			
e Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
FI	FTY-FIFTH	SUBSCRIBER GRO	)UP		FIFTY-SIXTH	SUBSCRIBER GRC	UP	
MMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		_						
		-						
		-						
		-						
		-						
tal DSEs			0.00	Total DSEs			0.00	
	Group	\$	0.00	Total DSEs Gross Receipts For	urth Group	<u>s</u>	0.00	
	Group				urth Group	<u>\$</u>		
otal DSEs ross Receipts Third ase Rate Fee Third	·				·	<u>s</u>		
oss Receipts Third	·	<u>\$</u>	0.00	Gross Receipts For	·		0.00	
ss Receipts Third <b>Se Rate Fee</b> Third	Group	\$	0.00	Gross Receipts For Base Rate Fee For	urth Group		0.00	
Receipts Third Rate Fee Third Rate Fee: Add	Group the <b>base rat</b>	\$	0.00	Gross Receipts For	urth Group		0.00	

afayette City Parish Con							
			ATE FEES FOR EAC				
FIFTY-SEVENTH SUBSCRIBER GROUP			FIFTY-EIGHTH SUBSCRIBER GROUP				
		-				-	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-						
al DSEs	11	0.00	Total DSEs		11	0.00	
oss Receipts First Group \$		0.00	Gross Receipts Second Group		\$ 0.00		
e Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
			Base Rate Fee Sec	•			
FIFTY-NINTH	\$ SUBSCRIBER GRC			SIXTIETH	\$ SUBSCRIBER GRC		
FIFTY-NINTH		OUP	Base Rate Fee Sec	SIXTIETH		UP	
FIFTY-NINTH		OUP		SIXTIETH		UP	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH	SUBSCRIBER GRC	)UP 0	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC	UP 0	
FIFTY-NINTH DMMUNITY/ AREA	SUBSCRIBER GRC	DUP 0 DSE	COMMUNITY/ ARE	SIXTIETH	SUBSCRIBER GRC		
FIFTY-NINTH MMUNITY/ AREA	SUBSCRIBER GRC	DUP 0 DSE 0	COMMUNITY/ ARE COMMUNITY/ ARE CALL SIGN	SIXTIETH A DSE	SUBSCRIBER GRC	UP 0 DSE	
FIFTY-NINTH DMMUNITY/ AREA	SUBSCRIBER GRC	DUP 0 DSE	COMMUNITY/ ARE	SIXTIETH A DSE	SUBSCRIBER GRC		
DMMUNITY/ AREA	SUBSCRIBER GRC	DUP 0 DSE 0	COMMUNITY/ ARE COMMUNITY/ ARE CALL SIGN	SIXTIETH A DSE	SUBSCRIBER GRC	UP 0 DSE	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP         SIXTY-FIRST SUBSCRIBER GROUP       SIXTY-SECOND SUBSCRIBER GROUP         DMMUNITY/ AREA       0       COMMUNITY/ AREA         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN         DATE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN	JP 0 DSE		
OMMUNITY/ AREA     O     COMMUNITY/ AREA	0		
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN         Image: Contract of the second state of	DSE		
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN         Image: Control of the state of t	DSE		
al DSEs 0.00 Total DSEs	0.00		
ss Receipts First Group	\$ 0.00		
e Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	Base Rate Fee Second Group \$ 0.00		
SIXTY-THIRD SUBSCRIBER GROUP SIXTY-FOURTH SUBSCRIBER GRO	JP		
	0		
ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE		
	DOL		
al DSEs Total DSEs	0.00		
	0.00		
ss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$			
bss Receipts Third Group			
oss Receipts Third Group       \$       0.00       Gross Receipts Fourth Group       \$         se Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$	0.00		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP         SIXTY-FIFTH SUBSCRIBER GROUP       SIXTY-SIXTH SUBSCRIBER GROUP         OMMUNITY/ AREA       COMMUNITY/ AREA       COMMUNITY/ AREA         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE	0
OMMUNITY/ AREA       O       COMMUNITY/ AREA         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN	
tal DSEs	E
tal DSEs	;E
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ss Receipts First Group <u>\$ 0.00</u> Gross Receipts Second Group <u>\$ 0.00</u>	0
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Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	
SIXTY-SEVENTH SUBSCRIBER GROUP SIXTY-EIGHTH SUBSCRIBER GROUP IMUNITY/ AREA 0 COMMUNITY/ AREA	0
IMUNITY/ AREA O COMMUNITY/ AREA	U
LL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	E
I DSEs 0.00 Total DSEs 0.00	
ss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	U U
se Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	00

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SIX OMMUNITY/ AREA	SIXTY-NINTH SUBSCRIBER GROUP			SEVENTIETH SUBSCRIBER GROUP				
			U				U	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
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		-				-		
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otal DSEs		-	0.00	Total DSEs			0.00	
oss Receipts First Group \$ 0.00		0.00	Gross Receipts Sec	ond Group	\$ 0.00			
e Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	ITY-FIRST	SUBSCRIBER GRO		SEVEN	ITY-SECOND	SUBSCRIBER GRC	)UP	
MMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
				· · · · · · · · · · · · · · · · · · ·				
tal DSEs			0.00	Total DSEs			0.00	
	Group	S	0.00	Total DSEs Gross Receipts Fou	Inth Group	S	0.00	
	Group	<pre></pre>			Irth Group	S		
tal DSEs oss Receipts Third		S S			·	S S		
oss Receipts Third		s s	0.00	Gross Receipts Fou	·		0.00	
ss Receipts Third e Rate Fee Third	Group	\$	0.00	Gross Receipts Fou Base Rate Fee Fou	rth Group		0.00	
Receipts Third Rate Fee Third Rate Fee: Add t	Group he <b>base rat</b>	\$	0.00	Gross Receipts Fou	rth Group		0.00	

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		COMPUTATION OF						
	TY-THIRD	SUBSCRIBER GROU		SEVENTY-FOURTH SUBSCRIBER GROUP				
MMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
al DSEs		-	0.00	Total DSEs		++	0.00	
		0.00	Gross Receipts Second Group		\$	0.00		
						<u>.</u>		
Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
SEVEN	ITY-FIFTH	SUBSCRIBER GROU	UP	SEV	/ENTY-SIXTH	I SUBSCRIBER GRO	UP	
MUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		[]						
al DSEs			0.00	Total DSEs			0.00	
		\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
ss Receipts Third (								
oss Receipts Third (		1						
oss Receipts Third ( se Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
e Rate Fee Third (		\$				\$	0.00	
Rate Fee Third ( Rate Fee: Add ti	he base rat	\$ te fees for each subso				\$	0.00	

			ment				123119	
		COMPUTATION OF						
		SUBSCRIBER GRO		SEVENTY-EIGHTH SUBSCRIBER GROUP				
MMUNITY/ AREA			0	COMMUNITY/ ARE	EA		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		-						
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		-						
al DSEs	_	11	0.00	Total DSEs	Į	<b>!</b> !	0.00	
		0.00		and Crown	\$ 0.00			
s Receipts First (	Joup	\$	0.00	Gross Receipts Sec	Cond Group	<u>&gt;</u>	0.00	
e Rate Fee First (	Rate Fee First Group \$		0.00	Base Rate Fee Sec	Base Rate Fee Second Group \$ 0.00		0.00	
SEVEN	ITY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	I SUBSCRIBER GRO	UP	
IMUNITY/ AREA			0	COMMUNITY/ ARE	EA		0	
LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-						
al DSEs			0.00	Total DSEs			0.00	
ss Receipts Third	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
se Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
e Rate Fee Third	Group	\$	0.00	Base Rate Fee For	urth Group	\$	0.00	
		\$				\$	0.00	
Rate Fee: Add 1	the base rat	\$ te fees for each subso				\$	0.00	

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		SUBSCRIBER GRO		ATE FEES FOR EACH SUBSCRIBER GROUP				
DMMUNITY/ AREA			COMMUNITY/ AREA					
		1				П		
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
al DSEs	4		0.00	Total DSEs		11	0.00	
					•			
s Receipts First C	broup	\$ 0.00		Gross Receipts Sec	cond Group	\$ 0.00		
e Rate Fee First (	Froun	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	ITY-THIRD	SUBSCRIBER GRO	0P 0	11		SUBSCRIBER GRO	909 0	
IMUNITY/ AREA			U	COMMUNITY/ ARE	:A		U	
LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
				-				
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		I						
al DSEs			0.00	Total DSEs			0.00	
	Group	<u> </u>	0.00	Total DSEs Gross Receipts Fou	urth Group	<u>\$</u>	0.00	
tal DSEs oss Receipts Third	-		0.00	Gross Receipts Fou		\$	0.00	
	-	<u>\$</u> <u>\$</u>				\$ \$		
ss Receipts Third	-	<u>\$</u> \$	0.00	Gross Receipts Fou			0.00	
Receipts Third <b>Rate Fee</b> Third	Group	\$	0.00	Gross Receipts Fou Base Rate Fee Fou	urth Group		0.00	
Receipts Third	Group he <b>base rat</b>	\$	0.00	Gross Receipts Fou	urth Group		0.00	

		solidated Gover					123119	
				TE FEES FOR EA				
EI OMMUNITY/ ARE		SUBSCRIBER GRO	OUP 0	EIGHTY-SIXTH SUBSCRIBER GROUP			0 0	
		U						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
al DSEs			0.00			11	0.00	
		-		Total DSEs				
ss Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	cona Group	\$	0.00	
e <b>Rate Fee</b> Firs	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
EIGHT	Y-SEVENTH	SUBSCRIBER GRO	OUP	EIG	HTY-EIGHTH	I SUBSCRIBER GRO	DUP	
MUNITY/ ARE	A		0	COMMUNITY/ ARE	EA		0	
LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
al DSEs			0.00	Total DSEs		11	0.00	
	d Croup	¢	0.00		urth Croup	<u> </u>	0.00	
oss Receipts Thir	u Group	\$	0.00	Gross Receipts Fou	aran Group	\$	0.00	
	d Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
ase Rate Fee Thir	•		0.00			Ļ	0.00	
se Rate Fee Thir			0.00				0.00	
e Rate Fee: Add	d the <b>base ra</b>	<b>te fees</b> for each sub space L (page 7)		as shown in the boxe		s	0.00	

119								
						COMPUTATION OF		
_	NINTIETH SUBSCRIBER GROUP				SUBSCRIBER GROU	TY-NINTH :		
U					0			OMMUNITY/ AREA
SE		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
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		_						
00				Total DSEs	0.00			tal DSEs
0.00	¢	ad Group	Gross Receipts Secor	0.00	\$	roup	oss Receipts First G	
00		\$	iu Oloup			<del>.</del>		
00		<b>\$</b>				<u> </u>		
00 00		\$		Base Rate Fee Secor	0.00	\$		
			nd Group	Base Rate Fee Secor	<b>0.00</b>		roup	se Rate Fee First G
		\$	nd Group	Base Rate Fee Secor	0.00	\$	roup	se Rate Fee First G
00	DUP	\$	nd Group	Base Rate Fee Secon	<b>0.00</b>	\$	roup	e Rate Fee First G NINE MMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	e Rate Fee First G NINE MMUNITY/ AREA
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0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	se Rate Fee First G NINE DMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	I <b>se Rate Fee</b> First G NINE DMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	ase Rate Fee First G NINE OMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	<b>ase Rate Fee</b> First G
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	ase Rate Fee First G NINE DMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	ase Rate Fee First G NINE DMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	ase Rate Fee First G NINE DMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	ase Rate Fee First G NINE DMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	I <b>se Rate Fee</b> First G NINE DMMUNITY/ AREA
0	DUP	\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	I <b>se Rate Fee</b> First G NINE DMMUNITY/ AREA
0		\$ SUBSCRIBER GRC	nd Group Y-SECOND	Base Rate Fee Secor NINET COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup	ASE Rate Fee First G
00 0 5E		\$ SUBSCRIBER GRC	nd Group Y-SECOND DSE	Base Rate Fee Secon NINET COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU		ase Rate Fee First G NINE OMMUNITY/ AREA
00 0 3E		\$ SUBSCRIBER GRC CALL SIGN	nd Group Y-SECOND DSE	Base Rate Fee Secon NINET COMMUNITY/ AREA CALL SIGN	0.00 JP 0 DSE 0 0.00	SUBSCRIBER GROU		ase Rate Fee First G NINE DMMUNITY/ AREA CALL SIGN

				TE FEES FOR EACH					
9		SUBSCRIBER GROU				SUBSCRIBER GROU	TY-THIRD		
Comput	0		COMMUNITY/ AREA		0			OMMUNITY/ AREA	
comput	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rat			202				201		
and									
Syndica									
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Surcha		-							
for									
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Statio									
		_							
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	ross Receipts First G	
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	iroup	<b>ase Rate Fee</b> First G	
	JP	SUBSCRIBER GROU	ETY-SIXTH	NIN	П				
					JP	SUBSCRIBER GROU	TY-FIFTH	ININE	
	0			COMMUNITY/ AREA	0	SUBSCRIBER GRU	TY-FIFTH		
	0 DSE	CALL SIGN	DSE				DSE	OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
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		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
		CALL SIGN		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
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		S		COMMUNITY/ AREA CALL SIGN	DSE		DSE	OMMUNITY/ AREA	
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				TE FEES FOR EAC				
9		SUBSCRIBER GROU				SUBSCRIBER GROU	SEVENTH	
-	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat	DOL	O/ LEE OIGIN	DOL		DOL	ONLE CICIN	DOL	ONEE OIGH
and								
Syndica								
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for								
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Dista Statio								
otatio								
	_							
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	roup	ross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	roup	<b>ase Rate Fee</b> First G
	JP	SUBSCRIBER GROU	JNDREDTH	ONE H	JP	SUBSCRIBER GRO	TY-NINTH	NINE
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	0 DSE	CALL SIGN	DSE		0 DSE	CALL SIGN	DSE	
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			OMMUNITY/ AREA
		CALL SIGN	1	COMMUNITY/ AREA	1			
		CALL SIGN	1	COMMUNITY/ AREA	1			
	DSE	CALL SIGN		COMMUNITY/ AREA			DSE	CALL SIGN
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				TE FEES FOR EAG			
		SUBSCRIBER GRO				SUBSCRIBER GRC	
MMUNITY/ AREA	A		0	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-				-	
		-					
		-					
al DSEs			0.00	Total DSEs			0.00
oss Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
e Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
ONE HUND							
		SUBSCRIBER GRC	DUP	ONE HUNDF	RED FOURTH	SUBSCRIBER GRC	UP
MMUNITY/ AREA		SUBSCRIBER GRC	0UP	ONE HUNDF		SUBSCRIBER GRC	0UP 0
		CALL SIGN		11		SUBSCRIBER GRC	
	A		0	COMMUNITY/ ARE	Â		0
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	A		0	COMMUNITY/ ARE	Â		0
	A		0	COMMUNITY/ ARE	Â		0
	A		0	COMMUNITY/ ARE	Â		0
ALL SIGN	A		0 DSE	COMMUNITY/ ARE	Â		0 DSE
ALL SIGN	A		0 DSE	COMMUNITY/ ARE	Â		0 DSE
MMUNITY/ AREA			0 DSE	COMMUNITY/ ARE	A		0 DSE
ALL SIGN		CALL SIGN	0 DSE	COMMUNITY/ ARE CALL SIGN	A	CALL SIGN	0 DSE
ALL SIGN	A DSE	CALL SIGN	0 DSE	COMMUNITY/ ARE CALL SIGN	A	CALL SIGN	0 DSE
ALL SIGN	A DSE	CALL SIGN	0 DSE 0.00 0.00	COMMUNITY/ ARE CALL SIGN	A	CALL SIGN	0 DSE 0.00 0.00
LL SIGN	A DSE	CALL SIGN	0 DSE 0.00 0.00 0.00	COMMUNITY/ ARE CALL SIGN	A	CALL SIGN	0 DSE 0.00 0.00

		COMPUTATION C SUBSCRIBER GRO				BER GROUP	
DMMUNITY/ ARE		SOBOONDER GRO	0	COMMUNITY/ ARE			0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DOL		DOL
		-					
		-					
tal DSEs			0.00	Total DSEs			0.00
oss Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00
	Gloup	Ψ	0.00			4	0.00
se Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
ONE HUNDRE	D SEVENTH	SUBSCRIBER GRO	DUP	ONE HUND	RED EIGHTH	SUBSCRIBER GRO	DUP
MMUNITY/ ARE	A		0	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
		-					
tal DSEs			0.00	Total DSEs			0.00
oss Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00
ase Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	Irth Group	\$	0.00
				11			
se Rate Fee: Ad	the base rat	te fees for each sub	scriber group	as shown in the boxe	es above.		
		space L (page 7)	0 1				

ONE HUNI OMMUNITY/ ARE		SUBSCRIBER GRO	900 0	COMMUNITY/ ARE		I SUBSCRIBER GRO	900 0
			~				•
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs			0.00	Total DSEs			0.00
ross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00
se Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
ONE HUNDRE	ELEVENTH	SUBSCRIBER GRO	OUP	ONE HUNDRI	ED TWELVTH	SUBSCRIBER GRO	)UP
MMUNITY/ ARE	A		0	COMMUNITY/ ARE	EA		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
tal DSEs			0.00	Total DSEs			0.00
oss Receipts Thi	d Group	\$	0.00	Gross Receipts For	urth Group	\$	0.00
ase Rate Fee Thi	d Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00
oo Data East Ad	d the <b>bees</b> ref	for each cut	oribor aro	as shown in the hour			
		te fees for each sub space L (page 7)	scriber group	as shown in the box	es above.	\$	

BLOCK A COMPUTATION OF BASE PATE FEES FOR EACH SUBSCRIBER GROUP       ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP       ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP       CALL SIGN     DSE     CALL SIGN     DSE       CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN<	LEGAL NAME OF OW Lafayette City P		LE SYSTEM: solidated Govern	ment			5	SYSTEM ID# 123119	Name
COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Computation		BLOCK A:		BASE RA	ATE FEES FOR EA	CH SUBSCF	RIBER GROUP		
CALL SIGN       DSE       Computative of the set o	ONE HUNDRED T	HIRTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED F	OURTEENTH	I SUBSCRIBER GRC	UP	0
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         GALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       and         Synclicate       Synclicate       Synclicate       Synclicate       Synclicate       Synclicate         Gall SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       Synclicate         Gall DSEs       0.00       Total DSEs       0.00       Gross Receipts Second Group       \$       0.00         Size Rate Fee First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         ONE HUNDRED First Group       \$       0.00       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN <t< th=""><th>COMMUNITY/ ARE</th><th>۹</th><th></th><th>0</th><th>COMMUNITY/ ARE</th><th>EA</th><th></th><th>0</th><th>-</th></t<>	COMMUNITY/ ARE	۹		0	COMMUNITY/ ARE	EA		0	-
and Syndices Exclusive Subscripts First Group 3 0.00 Cotal DSEs 0.00 Cotal DSEs 0.00 Cotal LSIGN DSE CALL SIGN DEE CALL SIGN DSE 0.00 Cotal DSEs 0.00 Cotal LSIGN DSE CALL SIGN DEE CALL SIGN DSE 0.00 Cotal DSEs 0.00 Cotal LSIGN DSE CALL SIGN DEE CALL SIGN DSE 0.00 Cotal DSEs 0.00 Cota	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Syndicate Exclusive Sectors and a subserber group as shown in the bases above.			-						Base Rate F
oral DSEs       0.00       Total DSEs       0.00         oras Raceipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SISTEENTH SUBSCRIBER GROUP       ONE HUNDRED SISTEENTH SUBSCRIBER GROUP       ONE       0.00         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Olat DSEs       0.00       Total DSEs       0.00       S       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       COMMUNITY AREA       0       COMMUNITY AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Otal DSEs       0.00       Gross Receipts Fourth Group       0.00       S       0.00         MUDATIY AREA       0.00       S       0.00       S       0.00       S       0.00         States Receipts Third Group       1.0.00       S       0.00       S       0.00       S       0.00         Issee Rate Fee Third Group       1.0.00       Base Rate Fee Fourth Group       S       0.00       S       0.00       S       0.00 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
Surcharg orial DSEs 0.00 Total DSEs 0.00 Also Rate Fee First Group 1 0.00 Base Rate Fee Sound Group 2 0.00 ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP ONMUNITY AREA 0 COMMUNITY AREA 0 CALL SIGN DE CALL SIGN DE CALL SIGN DE CALL SIGN DSE CALL SIGN DE CALL SIGN DE CALL SIGN DSE 0.00 Gross Receipts First Group 3 0.00 CALL SIGN DE CALL SIGN DE CALL SIGN DSE 0.00 CALL SIGN DE CALL SIGN DE CALL SIGN DSE 0.00 Gross Receipts First Group 3 0.00 CALL SIGN DE CALL SIGN DE CALL SIGN DSE 0.00 Gross Receipts First Group 3 0.00 CALL SIGN DE CALL SIGN DE CALL SIGN DSE 0.00 Gross Receipts First Group 3 0.00 CALL SIGN DE CALL SIGN DE CALL SIGN DSE 0.00 Gross Receipts First Group 3 0.00 Gross Receipts First Group 5 0.00 Gross Receipts First Group									-
oral DSEs       0.00       Total DSEs       0.00       Gross Receipts First Group       \$       0.00         otel DSEs       0.00       Gross Receipts Second Group       \$       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         otal DSEs       0.00       Total DSEs       0.00       Gross Receipts First Group       S       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       0       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       0.00         otal DSEs       0.00       Gross Receipts Fourth Group       \$       0.00       Gross Receipts Fourth Group       \$       0.00         asse Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         asse Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00			-						
Image: Control of the control of th									-
Oral DSEs       0.00       Total DSEs       0.00         irross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         irross Receipts First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Group       S       0.00       S       S       0.00         Group       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE         Group       S       0.00       S       S       S       S <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Partially</td>									Partially
odal DSEs       0.00       Total DSEs       0.00         ross Receipts First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call DSEs       0.00       Gross Receipts Fourth Group       \$       0.00       Gross Receipts Fourth Group       \$       0.00         uase Rate Fee Third Group       \$ <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Distant</td>									Distant
iross Receipts First Group       i       0.00       Gross Receipts Second Group       i       0.00         ase Rate Fee First Group       i       0.00       Base Rate Fee Second Group       i       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         COMUNITY/ AREA       0       COMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Internet State       CALL SIGN       DSE       CALL SIGN       DSE         Internet State									Stations
irross Receipts First Group       i       0.00         asse Rate Fee First Group       i       0.00         Base Rate Fee First Group       i       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         CALL SIGN       DSE         CALL SIGN									
iross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         COMUNITY/ AREA       0       COMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Group       Group       Group       Group       Group       Group       Group       Group									
iross Receipts First Group       \$       0.00       Gross Receipts Second Group       \$       0.00         ase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         COMUNITY/ AREA       0       COMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CIL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Group       Group       Group       Group       Group       Group       Group       Group									
Stross Receipts First Group       S       0.00         Base Rate Fee First Group       S       0.00         Base Rate Fee First Group       S       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       0         COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Communitry Area       Gross Receipts Total Size Size Size Size Size Size Size Size									
irross Receipts First Group       i       0.00       Gross Receipts Second Group       i       0.00         ease Rate Fee First Group       i       0.00       Base Rate Fee Second Group       i       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gross Receipts Third Group       CALL SIGN       DSE       CALL SIGN       DSE         Gross Receipts Third Group       S       0.00       Gross Receipts Fourth Group       S       0.00         Gross Receipts Third Group       S       0.00       Base Rate Fee Fourth Group       S       0.00         Hase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.       S       0.00									
Hase Rate Fee First Group       \$       0.00         Base Rate Fee Second Group       \$       0.00         ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP       0         COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gall SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gall SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gall SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gall SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gall SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gall SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Gall SIGN       DSE       CO.00       Total DSES       O.00       Coross Receipts Fourth Group       S       O.00	otal DSEs			0.00	Total DSEs			0.00	
ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP       ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         CALL SIGN       DSE         COB       CALL SIGN	Gross Receipts First	Group	\$	0.00	Gross Receipts Se	cond Group	\$	0.00	
OMMUNITY/ AREA 0     CALL SIGN DSE   CALL SIGN DSE   CALL SIGN DSE   CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE C	ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE         call DSEs       0.00       Total DSEs       0.00       Gross Receipts Fourth Group       \$       0.00         rase Rate Fee Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00	ONE HUNDRED	FIFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDREI	D SIXTEENTH	I SUBSCRIBER GRC	UP	
indicator       indicator       indicator       indicator	COMMUNITY/ ARE	۹		0	COMMUNITY/ ARE	EA		0	
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00									
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00			-						
Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00									
irross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00			-						
irross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00									
Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00									
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00									
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00									
Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00									
Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group									
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00									
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00									
sase Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00         Base Rate Fee Third Group       \$       0.00	otal DSEs			0.00	Total DSEs			0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third	d Group	\$	0.00	Gross Receipts For	urth Group	\$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.						·			
	Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee For	urth Group	\$	0.00	
	aso Dato Eso: Ada	the <b>bace re</b>	to foos for each auto	criber group	as shown in the here	es abovo			
				cinei gioup			\$		

LEGAL NAME OF OW Lafayette City P		BLE SYSTEM: solidated Gover	nment			5	SYSTEM ID# 123119	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SE	EVENTEENTH	I SUBSCRIBER GROU	IP	ONE HUNDRED	EIGHTEENTH	SUBSCRIBER GROU	Р	•
COMMUNITY/ ARE	A		0	COMMUNITY/ ARE/	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate
								and
								Syndicate
								Exclusivi
								Surcharg for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED	NINTEENTH	I SUBSCRIBER GRO	DUP	ONE HUNDRED	TWENTIETH	I SUBSCRIBER GRC	UP	
OMMUNITY/ ARE	A		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ase Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				11				
			scriber group	as shown in the boxe	s above.			
nter here and in bl	оск 3, line 1,	space L (page 7)				\$		

	BLOCK A.		F BASE RA	ATE FEES FOR EAC	HSUBSCR		
		SUBSCRIBER GROU		ONE HUNDRED TWEE			P
DMMUNITY/ AREA			0	COMMUNITY/ AREA			0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
		-					
		]					
al DSEs			0.00	Total DSEs			0.00
ss Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00
	Cloup	÷	0.00			<u>•</u>	0.00
e Rate Fee First	Group						
		SUBSCRIBER GROU	0.00	Base Rate Fee Seco		\$	<b>0.00</b>
E HUNDRED TW	ENTY-THIRD				NTY-FOURTH		
IE HUNDRED TWI	ENTY-THIRD		P	ONE HUNDRED TWE	NTY-FOURTH		P
E HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
IE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
E HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
E HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI MMUNITY/ AREA	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
IE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	P 0	ONE HUNDRED TWEI         COMMUNITY/ AREA         CALL SIGN         CALL SIGN	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI	ENTY-THIRD	SUBSCRIBER GROU	IP 0	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROU	P 0
NE HUNDRED TWI MMUNITY/ AREA ALL SIGN		SUBSCRIBER GROU	P 0	ONE HUNDRED TWEI         COMMUNITY/ AREA         CALL SIGN         CALL SIGN		SUBSCRIBER GROU	P 0
NE HUNDRED TWI MMUNITY/ AREA ALL SIGN		SUBSCRIBER GROU	P 0 DSE	ONE HUNDRED TWEI		SUBSCRIBER GROU	P 0 DSE
INE HUNDRED TWO MMUNITY/ AREA CALL SIGN	Group	SUBSCRIBER GROU	DSE	ONE HUNDRED TWEI	NTY-FOURTH	SUBSCRIBER GROU	P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
NE HUNDRED TWI MMUNITY/ AREA ALL SIGN	Group	SUBSCRIBER GROU	P 0 DSE	ONE HUNDRED TWEI	NTY-FOURTH	SUBSCRIBER GROU	P 0 DSE
E HUNDRED TWI	Group	SUBSCRIBER GROU	DSE	ONE HUNDRED TWEI	NTY-FOURTH	SUBSCRIBER GROU	P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
E HUNDRED TWI MUNITY/ AREA LL SIGN DSEs Receipts Third Rate Fee Third Rate Fee: Add	ENTY-THIRD	SUBSCRIBER GROU	P 0 DSE 0 0.00 0.00 0.00	ONE HUNDRED TWEI	NTY-FOURTH	SUBSCRIBER GROU	P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
HUNDRED TWH IUNITY/ AREA L SIGN DSEs Receipts Third Rate Fee Third	ENTY-THIRD	SUBSCRIBER GROU	P 0 DSE 0 0.00 0.00 0.00	ONE HUNDRED TWEI         COMMUNITY/ AREA         CALL SIGN         CALL SIGN         Total DSEs         Gross Receipts Four         Base Rate Fee Four	NTY-FOURTH	SUBSCRIBER GROU	P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

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OME HONDRED TO		SUBSCRIBER GROU	0	COMMUNITY/ ARE		I SUBSCRIBER GROU	P 0
	л 		V		-~		v
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
		-					
		-					
al DSEs			0.00	Total DSEs			0.00
oss Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00
e Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
	TY-SEVENTH	SUBSCRIBER GROU	P		ENTY-EIGHTH	I SUBSCRIBER GROU	P
			. 0	COMMUNITY/ ARE			0
	-						
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-				<b>.</b>	
al DSEs			0.00	Total DSEs			0.00
ss Receipts Thire	d Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00
se Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00
		te fees for each subs space L (page 7)	scriber group	as shown in the boxe	es above.	\$	

EGAL NAME OF OWN .afayette City Pa		solidated Govern	nment				SYSTEM ID# 123119	Name
				ATE FEES FOR EA				
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDR		I SUBSCRIBER GROU	Р	0
OMMUNITY/ AREA			0	COMMUNITY/ ARE	EA		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
								Base Rate
								and
		-						Syndicat
								Exclusiv
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								for
								Partial
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otal DSEs			0.00	Total DSEs			0.00	
oss Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
ase Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED TH	IIRTY-SECON	) SUBSCRIBER GROU	Р	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	EA		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
						Π		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third	Group	\$	0.00	Gross Receipts For	urth Group	\$	0.00	
1					· "F	·		
ase Rate Fee Third	Group	\$	0.00	Base Rate Fee For	urth Group	\$	0.00	
		<b>te fees</b> for each subs space L (page 7)	scriber group	as shown in the boxe	es above.	\$		

L

LEGAL NAME OF OW Lafayette City P		LE SYSTEM: solidated Govern	ment			S	YSTEM ID# 123119	Name
ONE HUNDRED T		COMPUTATION OF SUBSCRIBER GROUF		TE FEES FOR EACH		IBER GROUP		_
COMMUNITY/ ARE			0	COMMUNITY/ AREA			0	<b>9</b> 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	— <u>—</u> ļ		0.00	Total DSEs	-!		0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
	p	- <b>-</b>			··· •···			
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ ARE	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Page Pote Fee This	d Crours	¢	0.00	Base Bate Fee Feer	h Crows	•	0.00	
Base Rate Fee Thir	a Group	\$	0.00	Base Rate Fee Fourt	n Group	\$	0.00	
Base Rate Fee: Ade Enter here and in bl			criber group	as shown in the boxes	above.	\$		
	ook o, into 1,	change r (bange i				·		

afayette City F							
OMMUNITY/ ARE		SUBSCRIBER GROU	P 0	ONE HUNDRED TH		I SUBSCRIBER GROU	P
			U				U
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-					
		-					
		-					
otal DSEs			0.00	Total DSEs			0.00
ross Receipts Firs	st Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00
se Rate Fee Firs	st Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00
IE HUNDRED TH	HRTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO	
MMUNITY/ ARE	EA		0	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs			0.00	Total DSEs			0.00
ross Receipts Thi	rd Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00
ase Rate Fee Thi	rd Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00
						-	•
Doo Dot- 5 * '	d the back	o fooo foo oo -b b	oriber and		a abava		
i <b>se Rate Fee:</b> Ad iter here and in bl			criber group	as shown in the boxe	es above.	\$	
	, ·- ·, ·						

BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAG	CH SUBSCR	IBER GROUP	
ONE HUNDRED FORTY-FIRST					SUBSCRIBER GROU	P
OMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					-	
	•					
tal DSEs		0.00	Total DSEs			0.00
oss Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00
se Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00
			Dase Mater ee occ	cona Group	Φ	0.00
ONE HUNDRED FORTY-THIRE						
	SUBSCRIBER GROU		ONE HUNDRED FO	ORTY-FOURTH	SUBSCRIBER GROU	
	) SUBSCRIBER GROU	IP		ORTY-FOURTH		P
IMUNITY/ AREA	O SUBSCRIBER GROU	IP	ONE HUNDRED FO	ORTY-FOURTH		P
/MUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
MMUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
MMUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
MMUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
DMMUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
DMMUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
DMMUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
DMMUNITY/ AREA		IP 0	ONE HUNDRED FO	DRTY-FOURTH	SUBSCRIBER GROU	P 0
DMMUNITY/ AREA			ONE HUNDRED FC         COMMUNITY/ ARE         CALL SIGN         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A	DRTY-FOURTH	SUBSCRIBER GROU	P 0
DMMUNITY/ AREA	CALL SIGN	DSE	ONE HUNDRED FC         COMMUNITY/ ARE         CALL SIGN         CALL SIGN         ONE HUNDRED FC         Total DSEs	DRTY-FOURTH	SUBSCRIBER GROU	P 0 DSE
DMMUNITY/ AREA			ONE HUNDRED FC         COMMUNITY/ ARE         CALL SIGN         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A         A	DRTY-FOURTH	SUBSCRIBER GROU	P 0
	CALL SIGN	DSE	ONE HUNDRED FC         COMMUNITY/ ARE         CALL SIGN         CALL SIGN         ONE HUNDRED FC         Total DSEs	DRTY-FOURTH	SUBSCRIBER GROU	P 0 DSE

LEGAL NAME OF OWNER OF CABLE SYSTEM:       SYSTEM ID:         Lafayette City Parish Consolidated Government       123119							123119	N	
BLC	DCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EA	CH SUBSCF	RIBER GROUP			
ONE HUNDRED FOR	TY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTY-SIXTH	I SUBSCRIBER GROUP	D	0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	9			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of	
								Base Rate F	
		-						and	
								Syndicated	
								Exclusivity	
								Surcharge for	
		-						Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs		•••	0.00		
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Se	cond Group	\$	0.00		
			]						
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00		
ONE HUNDRED FORTY-S	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED F	ORTY-EIGHTH	I SUBSCRIBER GROUP	0		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	EA		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Gr	0110	\$	0.00	Gross Receipts For	urth Group	\$	0.00		
	- 42	· ·	3.00			<u>*</u>			
Base Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee For	urth Group	\$	0.00		
				11					
Base Rate Fee: Add the			riber group	as shown in the box	es above.				
Enter here and in block 3	3, line 1, s	space L (page 7)				\$			

afayette City P	arish Con	solidated Gover	nment				SYSTEM ID# 123119	
				ATE FEES FOR EA				
ONE HUNDRED FO	ORTY-NINTH	SUBSCRIBER GRO	DUP	ONE HUNDR	ED FIFTIETH	SUBSCRIBER GRC	OUP	
OMMUNITY/ ARE	Α		0	COMMUNITY/ AREA 0				•
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Com
OALL OIGH	DOL	CALL OIGH	DOL		DOL		DOL	Base
		-						
								Syn
								Exc
		-						Sur
		-						t
								Pa
								Dis
								Sta
otal DSEs		++	0.00	Total DSEs			0.00	
oss Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
ase Rate Fee First	t Group	\$	0.00	Base Rate Fee Second Group \$ 0.00				
ONE HUNDRED F	-IFTY-FIRST	SUBSCRIBER GRO	DUP	ONE HUNDRED FI	TY-SECONE	) SUBSCRIBER GRC	)UP	
OMMUNITY/ ARE			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third Group		\$	0.00	Gross Receipts Fourth Group \$		\$	\$ 0.00	
		<u>+</u>	0.00			<u>*</u>	0.00	
ase Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
			scriber group	as shown in the boxe	es above.			
wer nore and in bl	UCK 3 INPE 1	space L (page 7)				\$		

EGAL NAME OF OW afayette City Pa		LE SYSTEM: solidated Govern	ment			5	SYSTEM ID# 123119	Nan
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EA	CH SUBSCF	RIBER GROUP		
ONE HUNDRED F	IFTY-THIRD	SUBSCRIBER GRO	UP	ONE HUNDRED FI	FTY-FOURTH	I SUBSCRIBER GRO	UP	•
COMMUNITY/ ARE	4		0	COMMUNITY/ AREA 0				<b>9</b> Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate
								and
		-						Syndica
		+						Exclusiv Surcha
								for
								Partial
								Distan
		-						Station
		-						
otal DSEs		++	0.00	Total DSEs			0.00	
ross Receipts First	Group	\$	0.00	Gross Receipts Se	cond Group	\$	0.00	
<b>ase Rate Fee</b> First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED F	IFTY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED	FIFTY-SIXTH	I SUBSCRIBER GRC	UP	
OMMUNITY/ AREA	A		0	COMMUNITY/ ARE	EA		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
						I		
			0.00	Tatal DOC			0.00	
		0.00	Total DSEs			0.00		
Fross Receipts Third	d Group	\$	0.00	Gross Receipts For	urth Group	\$	0.00	
ase Rate Fee Third	d Group	\$	0.00	Base Rate Fee For	urth Group	\$	0.00	
		te fees for each subs	criber group	as shown in the box	es above.			
nter here and in blo						\$		

afayette City Pa		LE SYSTEM: solidated Govern	ment				SYSTEM ID# 123119	Name
		COMPUTATION OF						
	Y-SEVENTH	SUBSCRIBER GROUP		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	-		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	DSE CALL SIGN		Computa of
								Base Rate
								and
		-						Syndicat
								Exclusiv Surcharg
								for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
a <b>se Rate Fee</b> First C	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDR	ED SIXTIETH	SUBSCRIBER GRC	)UP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	EA		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-		
otal DSEs 0.00		0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fou	urth Group	\$	0.00		
ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
ase Rate Fee: Add t	he base rat	<b>te fees</b> for each subso	riber arour	) as shown in the boxe	es above			
inter here and in bloc						\$		