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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

| FOR COPYRIGHT OFFICE USE ONLY | | | | | | | |
|-------------------------------|----------------------|--|--|--|--|--|--|
| DATE RECEIVED | AMOUNT | | | | | | |
| 3/2/2020 | \$ ALLOCATION NUMBER | | | | | | |

Return completed workbook by email to:

coplicsoa@loc.gov

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

| Α | ACCOUNTING PERIOD COVERED BY THIS STATEMENT: | | | | | | | | | |
|----------------------|---|--|---|-------------------------------------|---------------|--|--|--|--|--|
| Accounting Period | 2019/2 | | | | | | | | | |
| B Owner | Instructions: Give the full legal name of the owner of the cable serate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner of the end | Attion her conducts the busine g period, only the owner covering the entire account, enter the system's ID CABLE SYSTEM | ss of the cable system on the last day of the counting perion | em he accounting period should s | | | | | | |
| | Blue Stream Communications, LLC | | | | | | | | | |
| | | | | (| 0072192019/2 | | | | | |
| | | | | | 007219 2019/2 | | | | | |
| | 12409 NW 35th Street Coral Springs, FL 33065-2413 | | | | | | | | | |
| С | INSTRUCTIONS: In line 1, give any business or to | | | | | | | | | |
| System | names already appear in space B. In line 2, give to , IDENTIFICATION OF CABLE SYSTEM: | ne mailing address of | the system, if diffe | erent from the address give | 1 In space B. | | | | | |
| System | 1 | | | | | | | | | |
| | MAILING ADDRESS OF CABLE SYSTEM: | | | | | | | | | |
| | 2 (Number, street, rural route, apartment, or suite number) | | | | | | | | | |
| | (City, town, state, zip code) | | | | | | | | | |
| D | Instructions: For complete space D instructions, | see page 1b. Identify | only the frst comn | nunity served below and rel | st on page 1b | | | | | |
| Area | with all communities. | , | , | , | 1 3 | | | | | |
| Served | CITY OR TOWN | | STATE | | | | | | | |
| First | Coral Springs | | FL | | | | | | | |
| Community | Below is a sample for reporting communities if y | ou report multiple cha | nnel line-ups in S | pace G. | | | | | | |
| | CITY OR TOWN (SAMPLE) | | STATE | CH LINE UP | SUB GRP# | | | | | |
| Sample | Alda | | MD | A | 1 | | | | | |
| • | Alliance | | MD | В | 2 | | | | | |
| | Gering | | MD | В | 3 | | | | | |

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

| FORM SA3E. PAGE 1b. | | | Accoont | 114G FEMOD: 2013/2 | | | | | | | |
|---|--------------------|------------|------------|------------------------|--|--|--|--|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM: | | | SYSTEM ID# | | | | | | | | |
| Blue Stream Communications, LLC | | | 007219 | | | | | | | | |
| Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. | | | | | | | | | | | |
| Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. | | | | | | | | | | | |
| If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). | | | | | | | | | | | |
| When reporting the carriage of television broadcast stations on a community-by-common channel line-up designated by an alpha-letter(s) (based on your Space G reporting) are (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# | | | | | | | | |
| Coral Springs | FL | Α | 1 | First | | | | | | | |
| | | | | Community | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | See instructions for | | | | | | | |
| | | | | additional information | | | | | | | |
| | | | | on alphabetization. | | | | | | | |
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| | | | | | | | | | | | |
| | | | | Add rows as necessary. | | | | | | | |
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Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
SYSTEM ID#
Blue Stream Communications, LLC
007219

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

| BLO | OCK 1 | | | | BLOCK 2 | | | |
|-------------------------------|-----------------------|----|------------|-----|---------------------|-----------------------|------|--|
| CATEGORY OF SERVICE | NO. OF SUBSCRIBERS | | RATE | П | CATEGORY OF SERVICE | NO. OF SUBSCRIBERS | RATE | |
| Residential: | GOBOOKIBEKO | | TVATE | Ħ | OATEGORY OF GERVICE | COBCONIBLIC | TVTL | |
| Service to first set | 16,277 | \$ | 32.00 | | | | | |
| Service to additional set(s) | | | | | | | | |
| • FM radio (if separate rate) | | | | | | | | |
| Motel, hotel | | | | | | | | |
| Commercial | | | | | | | | |
| Converter | | | | | | | | |
| Residential | 1,485 | 1 | .99 - 4.99 | | | | | |
| Non-residential | | | | | | | | |
| 1 | L | | | 1 1 | | | T | |

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

| | BLO | CK 1 | | | BLOCK 2 |
|---|--------------|-------------------------------|------|--------------------------|---------|
| CATEGORY OF SERVICE | RATE | CATEGORY OF SERVICE | RATE | CATEGORY OF SERVICE RATE | |
| Continuing Services: | | Installation: Non-residential | | | |
| • Pay cable | \$ 20.95 | Motel, hotel | | | |
| Pay cable—add'l channel | \$ 10.95 | Commercial | | | |
| Fire protection | | • Pay cable | \$ | 3.00 | |
| Burglar protection | | Pay cable-add'l channel | | | |
| Installation: Residential | | Fire protection | | | |
| First set | 8.64 - 68.04 | Burglar protection | | | |
| Additional set(s) | | Other services: | | | |
| • FM radio (if separate rate) | | Reconnect | \$ | 15.28 | |
| • Converter | 1.99-4.99 | Disconnect | | | |
| | | Outlet relocation | \$ | 19.10 | |
| | | Move to new address | \$ | 20.00 | |
| | | | | | |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007219 Blue Stream Communications, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **WIWPBT** 2 Ε NO MIAMI, FL WWFOR 4 Ν NO MIAMI, FL See instructions for additional information WWWI 69 ı NO HOLLYWOOD, FL on alphabetization. LVTWIW 6 N - M NO MIAMI, FL W:WSVN 7 NO ı MIAMI, FL **WIWBFS** 33 I NO MIAMI, FL W:WSFL 39 I - M NO MIAMI, FL WWPLG 10 N - M NO MIAMI, FL **WIWPXM** I - M 35 NO MIAMI, FL WWHFT 45 ı NO MIAMI, FL W. WXEL 42 Ε NO WEST PALM BCH, FL WIWLRN Ε NO 17 MIAMI, FL w:wscv 51 I NO FT. LAUDERDALE, FL **WIWLTV** 23 ı NO MIAMI, FL W:WSBS 22 ı NO MIAMI. FL 8 WWGEN NO MIAMI, FL

| FURM SAJE. PAGE 3. | | | | | 0)/07514 ID# | |
|---|--|--|--|---|---|---|
| Blue Stream Co | | | | | SYSTEM ID# 007219 | Name |
| PRIMARY TRANSMITTI | ERS: TELEVISION | ON | | | | |
| carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S | system during ti ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With | he accounting n June 24, 19 4), or 76.63 (red in the next pressed in the next pressed to any | period, except 81, permitting th referring to 76.6 paragraph. distant stations | (1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a | and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program | G Primary Transmitters: Television |
| station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List ead each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the | here in space only on a subs and also in spation and also in spation and also in spation and associated with a spation associated with a carried the in each case we entering the least), "E" (for nease terms, see ation is outside ce area, see prave entered "Yield in on a part-tipion of a distant station of a distant tentered into of a primary trans simulcasts, also ree categories e location of ea Canadian statio | G—but do listitute basis. ace I, if the state that it is sign. Do not read that it is sign. Whether the station. Whe | tit in space I (the stion was carried tute basis station report origination of the properties of the station is a network), "N-M" (the station is a network), "N-M" (the station is a network), "N-M" (the station is a network), attion is a network), "N-M" (the station is a networ | d both on a substitus, see page (v) on program services er-the-air designal column 1 (list each the television statington, D.C. This light of the television statington, D.C. This light of the television statington, D.C. This light of the television, an indefor network multicus or "E-M" (for noncoctions located in the mplete column 5, so the televisions located in the mplete column 5, so the television of | es". If not, enter "No". For an expaper SA3 form. Istating the basis on which your ering "LAC" if your cable system capacity. In payment because it is the subject stem or an association representing by transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed. | |
| , | | | EL LINE-UP | • | ' | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | | | | |
|---|--------------------------------|--------------------------|----------------------------|---|------------------------|------|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# | | | | | | | | | |
| Blue Stream Co | ommunicati | ons, LLC | | | 007219 | 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 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 specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial | | | | | | | | | |
| educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. | | | | | | | | | |
| Note: If you are utilizing | - | | EL LINE-UP | | | | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | | | |
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| FURINI SAJE. PAGE 3. | | | | | OVOTEM ID# | | | |
|---|--------------------------------|--------------------------|----------------------------|---|------------------------|------|--|--|
| Blue Stream Co | | | | | SYSTEM ID# 007219 | Name | | |
| PRIMARY TRANSMITTI | ERS: TELEVISIO | ON | | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. | | | | | | | | |
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| - | | CHANN | EL LINE-UP | AD | | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | | |
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| FORM SA3E. PAGE 3. | | | | | | |
|--|---|---|--|--|--|------------------------------------|
| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | ON | | | | |
| In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th | G, identify even- system during ti- ions in effect or 5.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a subs and also in spa- information cond- ions. ch station's call associated with A-2". Simulcast e channel numl se. For example system carried the in each case way entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y ice on a part-til sion of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea | y television standard by television standard | g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was sassigned to 181 tinn was assigned to 181 tinn w | (1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This limit that the station, an indefor network multicuter "E-M" (for noncontions located in the special possible of the station of the stat | s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system | G Primary Transmitters: Television |
| Note: If you are utilizing | ng multiple char | nnel line-ups, | use a separate | space G for each | channel line-up. | |
| | | CHANN | EL LINE-UP | AE | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | OVOTEM ID# | | | |
|---|--|---|--|---|--|------|--|--|
| LEGAL NAME OF OW | | | | | SYSTEM ID# | Name | | |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | | | |
| PRIMARY TRANSMITT | ERS: TELEVISION | ON | | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: | | | | | | | | |
| Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fr. Column 1: List eareach multicast stream as "WETA well as the stream as the stream as the stream as the stream and | n here in space of lonly on a substand also in spanformation concorm. ch station's call a associated with A-2". Simulcast the channel number of longer of l | G—but do list titute basis. ace I, if the state that sign. Do not read that it is sign. Do not read that it is sign. Do not read that it is streams must be the FCC has streams must be the FCC has station. Whether the state "N" (for no oncommercial page (v) of the the local servage (v) of the es" in column on during the sign multicast stream or before Jumitter or an act of the page (v) of the station. Foons, if any, given the sign of the page (v) ch station. | tit in space I (the stion was carried ute basis station report origination cording to its own be reported in comment of the state of th | I both on a substitus, see page (v) or program services er-the-air designal column 1 (list each the television statington, D.C. This irrk station, an indefor network multicer "E-M" (for noncostions located in the inplete column 5, sod. Indicate by entictivated channel or ubject to a royalty tween a cable systematical indicate in the inplete column 5, sod. Indicate by entictivated channel or any other irrustions locate is the community with | es". If not, enter "No". For an expaper SA3 form. stating the basis on which your dering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing the remainder of the remain | | | |
| Note: If you are utilizi | ng multiple chai | | · | • | channel line-up. | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | | |
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| FORM SA3E. PAGE 3. | | | | | | |
|---|---|--|--|--|--|------------------------------------|
| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | N | | | | |
| In General: In space carried by your cable: FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis: basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licenson which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant state For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the | G, identify even- system during ti- ions in effect or 5.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a subs and also in spa- information cond- ions. ch station's call associated with A-2". Simulcast e channel numl se. For example system carried the in each case way entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y ice on a part-til sion of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea | y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the state of the station. Whether the state of the station. Whether the state of the local server in column on during the same basis becar in multicast stream or before Jumitter or an associated of the station. For the station. | g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was sassigned to 181 tinn was assigned to 181 tinn w | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitution, see page (v) on a program services the television station of the television of the | s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system | G Primary Transmitters: Television |
| Note: If you are utilizing | ng multiple chai | inei line-ups, | use a separate | space G for each | cnannei line-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | 21/2=11/15 | | |
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| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name | |
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| PRIMARY TRANSMITTI In General: In space (carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specife F 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 multi For the meaning of the | ERS: TELEVISION G, identify every system during the ions in effect on 6.61(e)(2) and (issis, as explaine stations: With the CC rules, regular only on a substant and also in spartformation conditions. The station's call associated with example of the ineact case of the ineact cas | y television stane accounting a June 24, 198 4), or 76.63 (r d in the next prespect to any stions, or auth G—but do list titute basis. Indeed, if the stane rning substitute sign. Do not real a station account of the properties of the properties of the station. Whether the state of the station account of the station. | period, except approved to the state of the | (1) stations carrie e carriage of certa (e)(2) and (4))]; a carried by your ce e Special Statemed both on a substitus, see page (v) on program services er-the-air designation of the television statifington, D.C. This in the television statifington, program services of the television statifington, program column to the television co | s". If not, enter "No". For an ex- | G Primary Transmitters: Television | |
| cable system carried the carried the distant state. For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the | he distant staticion on a part-tiricion of a distant tentered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio | on during the a me basis beca multicast stre n or before Ju mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give | accounting period ause of lack of a cam that is not some 30, 2009, be association represous carried the countries of the general in the countries of the countries of the general in the countries of the general in the countries of the countries | od. Indicate by ent ctivated channel of ubject to a royalty tween a cable sys- senting the primar channel on any ot nstructions locate list the community with | payment because it is the subject stem or an association representing by transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed. | | |
| , | .9 | | EL LINE-UP | • | | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | 0./07514 ID // | |
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| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITT | ERS: TELEVISION | ON | | | | |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program Program 1: List the station here, basis. For further ir in the paper SA3 for Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the | G, identify ever system during to ions in effect on 6.61(e)(2) and (6.61(e)(2) | y television standard page (v) of the local serving page (v) of th | g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to tit in space I (the station was carried that basis station report origination cording to its own be reported in containing the station is a network etwork), "N-M" (I educational), one general instruction area, (i.e. "Congeneral instruction of the general instruction. | (1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on a program services the television statification, D.C. This limit that the station, an indefor network multicuter "E-M" (for noncontions located in the special possible of the station of the stat | s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system | Primary Transmitters: Television |
| Note: If you are utilizing | ng multiple chai | nnel line-ups, | use a separate | space G for each | channel line-up. | |
| | | CHANN | EL LINE-UP | Al | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | |
|--|--|--|--|---|---|--|
| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name |
| Blue Stream Co | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITTI | ERS: TELEVISION | ON | | | | |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis P | G, identify ever system during to ions in effect on 6.61(e)(2) and (sis, as explaine stations: With a CC rules, regular here in space only on a subsand also in spationard associated with a cash of the cash, "E" (for nese terms, see ation is outside to entered "Y he distant staticition of a distant at entered into o a primary trans simulcasts, also ince categories e location of ea Canadian static | y television sty the accounting in June 24, 194, or 76.63 (ind in the next prespect to any ations, or auth G—but do listitute basis. In a station acceptable of the station acceptable of the station acceptable of the station acceptable of the station. In a station acceptable of the station acceptable of the station. In a station acceptable of the station. In a station acceptable of the station. In a station acceptable of the station acceptable of the station. In a station acceptable of the station acceptable of the station acceptable of the station acceptable of the station. It is see page (v) of the station acceptable of the station acceptable of the station. For one, if any, giving the station acceptable of the station acceptable of the station. For one, if any, giving the station acceptable of the station accep | g period, except 81, permitting the feferring to 76.6 paragraph. It distant stations orizations: to the fermion of the fermion was carried that it in space I (the feat to basis station to the feat to be reported in compared to the feat to be reported in the feat to feat the feat to be reported in the feat to feat the feat to be reported in the | (1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce special Statement both on a substitus, see page (v) of a program services er-the-air designaticolumn 1 (list each the television statifington, D.C. This in the station, an indefor network multicar "E-M" (for noncostions located in the instant"), enter "Ye ons located in the onselection occurred by the column 5, so the station of the station of the station occurred by the onselection occurred by the onselection occurred by the onselection occurred by the onselection occurred by the original or any ot onstructions locate iist the community with the community with | paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. 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. | Primary Transmitters: Television |
| | | CHANN | EL LINE-UP | ٨١ | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FURINI SAJE. PAGE 3. | | | | | 0)/07514 ID# | |
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| Blue Stream Co | | | | | SYSTEM ID# 007219 | Name |
| PRIMARY TRANSMITT | ERS: TELEVISION | ON | | | | |
| carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base | system during to ions in effect of 5.61(e)(2) and (sis, as explaine | he accounting n June 24, 19 (4), or 76.63 (red in the next | g period, except 81, permitting the referring to 76.6 paragraph. | (1) stations carrie ne carriage of certa 1(e)(2) and (4))]; a | and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program | G Primary Transmitters: Television |
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| | | CHANN | EL LINE-UP | AK | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | |
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| LEGAL NAME OF OWN | IER OF CABLE SY | 'STEM: | | | SYSTEM ID# | Name |
| Blue Stream Co | ommunicati | ons, LLC | | | 007219 | Name |
| PRIMARY TRANSMITTI | RS: TELEVISIO | DN | | | | |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Substitute Pasis Subsis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the | G, identify every system during the cons in effect or 6.61(e)(2) and (6.51s, as explaine stations: With record only on a substand also in spatformation concerm. In the constant of the constant of the constant on the constant of the const | y television standard and accounting and June 24, 194, or 76.63 (rd d in the next prespect to any ations, or auth G—but do list titute basis. In the standard are station account as the station account as the station account and the station. In the station account are station. In the station account are station. In the station account are station. In the local server age (v) of the station are basis becard in column are basis becard multicast stream or before Jumitter or an associated are page (v) of the station. In the station are basis becard and the station are page (v) of the station. For the station are page (v) of the station. | period, except 81, permitting the seferring to 76.6 paragraph. It is shown that is shown to the seferring to 76.6 paragraph. It is shown to distant stations orizations: It is shown to the seferring period to the seferring to the s | (1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your carried by on a program services er-the-air designat column 1 (list each carried by the television staticington, D.C. This in the television staticington, D.C. This in the television staticington, p.C. This in the television staticingt | s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system | Primary Transmitters: Television |
| Note: If you are utilizir | g multiple char | nel line-ups, | use a separate : | space G for each | channel line-up. | |
| | | CHANN | EL LINE-UP | AL | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | , | |
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| LEGAL NAME OF OWN | NER OF CABLE SY | /STEM: | | | SYSTEM ID# | Name |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | ON | | | | |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute program ba Substitute Pasis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the | G, identify even- system during ti- ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a subs and also in spa- information cond- ions. ch station's call associated with A-2". Simulcast e channel numl se. For example system carried the in each case way entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Yo he distant station ision of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea | y television standard y television y te | period, except 81, permitting the seferring to 76.6 paragraph. It is space I (the stion was carried ute basis station to the seferring to 76.6 paragraph. It is space I (the stion was carried ute basis station to the sefer to see the see th | (1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce special Statement both on a substitute, see page (v) of a program services er-the-air designaticolumn 1 (list each the television statifington, D.C. This in the television statifington, D.C. This in the television statifington, D.C. This in the television statifington, but the television statification of the television socated in the special statification of the television of | s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system | G Primary Transmitters: Television |
| Note: If you are utilizing | ng multiple char | nnel line-ups, | use a separate | space G for each | channel line-up. | |
| | | CHANN | EL LINE-UP | AM | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | 0)/0===== | | |
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| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | CVCTEM ID# | |
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| LEGAL NAME OF OWN | | | | | SYSTEM ID# 007219 | Name |
| Blue Stream Co | | | | | 007219 | |
| carried by your cable s FCC rules and regulat 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 ir in the paper SA3 for | G, identify every system during the consistency of 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2)) and (6.61(e)(2)) and (6.61(e)(2)) and also in spatements. | y television stane accounting in June 24, 1944), or 76.63 (from 1974), or 76.63 (from 1974), or authors, or author | period, except 81, permitting the referring to 76.6° paragraph. distant stations orizations: tit in space I (the ation was carried tute basis station | (1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ca e Special Stateme I both on a substitus, see page (v) of | and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program and Program Log)—if the aute basis and also on some other at the general instructions located as such as HBO, ESPN, etc. Identify | G Primary Transmitters: Television |
| 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 multi For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the | associated with a second control of a distant station of a distant a primary trans simulcasts, also a primary trans simulcasts, also a pocation of ea Canadian statio | n a station accepted by the station accepted by the station. Whether the station accepted by the station accepted by the local services and the local services in column and the local services accepted by the local services accepted by the local services in column and the station or before Jumitter or an accepted by the local services accep | cording to its over be reported in common as assigned to the annel 4 in Wash ation is a network, "N-M" (I deducational), one general instructive area, (i.e. "digeneral instructional in the accounting period acc | er-the-air designate column 1 (list each column 1 (list each column 1). The television station of the television station of the television station of the television of the te | ion. For example, report multi- a stream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system the paper sanction representing the payment because it is the subject them or an association representing the paper SA3 form. The station is licensed by the which the station is identifed. | |
| | | CHANN | EL LINE-UP | AO | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | |
|---|---|---|--|--|--|------------------------------------|
| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | ON | | | | |
| In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis is basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable is Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th | G, identify even- system during ti- ions in effect or 5.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a subs and also in spa- information cond- ions. ch station's call associated with A-2". Simulcast e channel numl se. For example system carried the in each case way entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y ice on a part-til sion of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea | y television standard by television standard | g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was sassigned to 181 tinn was assigned to 181 tinn w | (1) stations carried the carriage of certain (e)(2) and (4))]; as a carried by your context of the Special Statement of both on a substitution, see page (v) on a program services the television station of the television of the | s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system | G Primary Transmitters: Television |
| Note: If you are utilizing | ng multiple chai | nnei line-ups, | use a separate | space G for each | cnannei line-up. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | CVCTEM ID# | |
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| LEGAL NAME OF OWN | | | | | SYSTEM ID# 007219 | Name |
| Blue Stream Co | | | | | 007219 | |
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| Note: If you are utilizing | ng multiple chai | • | · | • | channel line-up. | |
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| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | CVCTEM ID# | |
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| LEGAL NAME OF OWN | | | | | SYSTEM ID# 007219 | Name |
| Blue Stream Co | | | | | 007219 | |
| carried by your cable s FCC rules and regulat 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 ir in the paper SA3 for | G, identify every system during the constant of the constant o | y television standard programme 24, 1964 (4), or 76.63 (from the next prespect to any attons, or auth G—but do list titute basis. The standard programme substitute s | period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the ation was carried tute basis station | (1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ca e Special Stateme I both on a substitus, see page (v) of | and low power television stations) d only on a part-time basis under hin network programs [sections and (2) certain stations carried on a hable system on a substitute program here and Program Log)—if the hute basis and also on some other hit the general instructions located his such as HBO, ESPN, etc. Identify | G Primary Transmitters: Television |
| 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 multi For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the | associated with a second case where a second case we are the case who case where a second case where a sec | h a station acceptable with a station acceptable with a station. Whether the station whether the station whether the station age (v) of the age (v) of the es" in column on during the age with a station or before Jumitter or an ago enter "E". If , see page (v) ch station. Forns, if any, given | cording to its over be reported in common to the common to | er-the-air designate column 1 (list each column 1 (list each column 1). The television station of the television station of the television station of the television of the te | ion. For example, report multi- stream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner 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. | |
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| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | 21/2=11/15 | | |
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| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name | |
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| PRIMARY TRANSMITTI In General: In space (carried by your cable s FCC rules and regulat 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 | ers: TELEVISION identify every system during the ions in effect on the ions in effect on the ions. With the ions in ersease in ersease in ersease and also in spanformation concurm. | y television state accounting a June 24, 1964), or 76.63 (red in the next prespect to any formula in the distributed basis. accel, if the state arming substitute sign. Do not red a station accel. | period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the ation was carried ute basis station eport origination cording to its over | (1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your c e Special Statement I both on a substitus, see page (v) on program services er-the-air designal | and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example | G Primary Transmitters: Television | |
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| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | OVOTEM ID# | | |
|--|-------------------------------------|--|--|---|---|------|--|
| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name | |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | ON | | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program | | | | | | | |
| Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: * Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. * List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). **For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. **Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station an apart-time basis because of lack of activated channel capac | | | | | | | |
| Column 6: Give the | e location of ea Canadian statio | ch station. Fo ns, if any, givennel line-ups, | r U.S. stations, le the name of the use a separate | list the community ne community with space G for each | to which the station is licensed by the which the station is identifed. | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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| FORM SA3E. PAGE 3. | | | | | 0./07514 ID // | |
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| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITT | ERS: TELEVISION | N | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: 1 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. 1 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. 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, eport multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network multicast), "" (for independent m | | | | | | |
| Note: If you are utilizing | ig multiple chai | • | • | | channer line-up. | |
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| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | | |
|--|--------------------------------|--------------------------|----------------------------|---|---|------|
| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name |
| Blue Stream C | ommunicati | ons, LLC | | | 007219 | |
| PRIMARY TRANSMITT | ERS: TELEVISIO | ON | | | | |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. *List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "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 pour cable system carried the ducational, or "E-M" (for noncommercial educational multicast). For for here terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside t | | | | | | |
| Note: If you are utilizing | | | | • | which the station is identifed. channel line-up. | |
| | | CHANN | EL LINE-UP | ΔV | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | |
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| FORM SA3E. PAGE 3. | | | | | 2/2==== | | |
|--|--------------------------------|--------------------------|----------------------------|---|------------------------|------|--|
| LEGAL NAME OF OWN | | | | | SYSTEM ID# | Name | |
| | | | | | | | |
| Blue Stream Communications, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 noncom | | | | | | | |
| 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 designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. | | | | | | | |
| | | CHANN | EL LINE-UP | ΔW | · | | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF CARRIAGE (If Distant) | 6. LOCATION OF STATION | | |
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007219 Blue Stream Communications, LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

| FORM SA3E. PAGE 5. | | | | | | | ACCOUNTING | PERIOD: 2019/2 | |
|---|--|--|--|---|--|---|-----------------------------|------------------------------|--|
| LEGAL NAME OF OWNER OF | CABLE SYST | EM: | | | | | SYSTEM ID# | NI | |
| Blue Stream Commun | ications, I | LLC | | | | | 007219 | Name | |
| SUBSTITUTE CARRIAGE | : SPECIA | L STATEMEN | IT AND PROGRAM LOG | | | | | | |
| In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. | | | | | | | | | |
| 1. SPECIAL STATEMENT | | | | | | | | Carriage: Special | |
| During the accounting per broadcast by a distant state | tion? | | | | | Yes | ⊠No | Statement and Program Log | |
| Note: If your answer is "No log in block 2. | ", leave the | rest of this pag | ge blank. If your answer is | 'Yes," you mu | ust complete | e the progr | am | | |
| 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 broathe case of Mexican or Can Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." | citute prograce, please a of every nor distant statisgulations, o tion. Do no Lucy" or "NE n was broad sign of the sadcast statication atth and day ye "5/7." es when the Example: a er "R" if the and regulatic ogramming | m on a separa attach additional network televion and that your authorization to use general of the control of t | al pages. ision program (substitute pur cable system substitute s. See page (vi) of the geneategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute purposed by a system from 6:01: was substituted for programing the accounting period | rogram) that, d for the progeral instructio "basketball". lo." m. station is licenstation is identrogram. Use cable system. I5 p.m. to 6:2 mming that ye; enter the let | during the ramming of ns located List specifinsed by the tiffied). numerals, List the tim 8:30 p.m. sour system ter "P" if the | accounting another string the paper of program are FCC or, in with the material accurate hould be was required listed pro | ation er onth eely | | |
| S | SUBSTITUT | E PROGRAM | | | EN SUBST | | 7. REASON | | |
| TITLE OF PROGRAM | 2. LIVE? | 3. STATION'S | | 5. MONTH | 6. | TIMES | FOR DELETION | | |
| | Yes or No | CALL SIGN | 4. STATION'S LOCATION | AND DAY | FROM | <u> тс</u> | | | |
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
SYSTEM ID#
Blue Stream Communications, LLC
007219

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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

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

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

- Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10"
- State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.—3:15 a.m. app."

DATES AND HOURS OF DART TIME CARRIAGE

• You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.–12:00 p.m."

| DATES AND HOURS OF PART-TIME CARRIAGE | | | | | | | | | | |
|---------------------------------------|-------|------|----|--|--------------|------|------------------------|-----|----|--|
| CALL SIGN WHEN CARRIAGE OCCURRED | | | | | CALL SIGN | WHEN | WHEN CARRIAGE OCCURRED | | | |
| O/ LEE OIOIV | ПООКО | | | | O/ LEE OIOIN | | | OUR | | |
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| | L NAME OF OWNER OF CABLE SYSTEM: | | SYSTEM ID# | Name | | | | |
|--|--|-----------------------|------------|---|--|--|--|--|
| Blu | e Stream Communications, LLC | | 007219 | Name | | | | |
| Inst all a (as i page | GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount of gross receipts) | | | | | | | |
| COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. | | | | | | | | |
| | rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $\!\kappa$ 3 below. | e entered on line 1 o | of | | | | | |
| ▶ If pa | rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low. | entered on line 2 in | block | | | | | |
| | rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below. | uld be entered on li | ne | | | | | |
| | MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. | | f the | | | | | |
| | Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 | \$ | 913,488.00 | | | | | |
| | Enter the result here. This is your minimum fee. | \$ | 9,719.51 | | | | | |
| | , , , | | | | | | | |
| Block 3 | Line 1. BASE RATE FEE : Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero | \$ | | | | | | |
| | Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero | | 0.00 | | | | | |
| | Line 3. Add lines 1 and 2 and enter here | \$ | - | | | | | |
| Block 4 | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger | \$ | 9,719.51 | Cable systems | | | | |
| | Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente zero. | r | 0.00 | submitting additional deposits under | | | | |
| | Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) | | 0.00 | Section 111(d)(7) should contact the Licensing | | | | |
| | Line 4. FILING FEE | | | | | | | |
| | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here | \$ | 10,444.51 | appropriate form for submitting the additional fees. | | | | |
| | Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.) | See page (i) of the | | additional 1663. | | | | |

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC | | SYSTEM ID# 007219 | | | | | | | |
|------------------------------------|--|--|----------------------|--|--|--|--|--|--|--|
| | CHANNELS | | | | | | | | | |
| М | 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. | | | | | | | | | |
| Channels | Enter the total number of channels on which the cable | | | | | | | | | |
| | system carried television broadcast stations | | | | | | | | | |
| | Enter the total number of activated channels | | | | | | | | | |
| | on which the cable system carried television broadcast static | ns 74 | | | | | | | | |
| | and nonbroadcast services | | | | | | | | | |
| N Individual to Be Contacted | | | | | | | | | | |
| for Further | Name Candice Soeder | Telephone 954-752-7244 | x243 | | | | | | | |
| | Address 12409 NW 35th Street (Number, street, rural route, apartment, or suite number) | | | | | | | | | |
| | Coral Springs, FL 33065 | | | | | | | | | |
| | (City, town, state, zip) | | | | | | | | | |
| | Email csoeder@mybluestream.com | Fax (optional) | | | | | | | | |
| | CERTIFICATION (This statement of account must be certifed a | nd signed in accordance with Conveight Office regulations | | | | | | | | |
| 0 | OLIVIII IOA HON (This statement of account must be certified a | id signed in accordance with copyright office regulations. | | | | | | | | |
| Certifcation | - I, the undersigned, hereby certify that (Check one, $\it but only one$, | of the boxes.) | | | | | | | | |
| | (Owner other than corporation or partnership) I am the own | ner of the cable system as identifed in line 1 of space B; or | | | | | | | | |
| | (Agent of owner other than corneration or nartnershin) | n the duly authorized agent of the owner of the cable system as identifie | 2d | | | | | | | |
| | in line 1 of space B and that the owner is not a corporation | | ·u | | | | | | | |
| | (Officer or partner) I am an officer (if a corporation) or a partie in line 1 of space B. | ner (if a partnership) of the legal entity identifed as owner of the cable sy | stem | | | | | | | |
| | I have examined the statement of account and hereby declare up | nder penalty of law that all statements of fact contained herein | | | | | | | | |
| | are true, complete, and correct to the best of my knowledge, infor [18 U.S.C., Section 1001(1986)] | mation, and belief, and are made in good faith. | | | | | | | | |
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| | X /s/ Joseph Canavan | | | | | | | | | |
| | (e.g., /s/ John Smith). Before entering the file | ve using an "/s/" signature to certify this statement. st forward slash of the /s/ signature, place your cursor in the box and press | | | | | | | | |
| | | ressing the "F" button will avoid enabling Excel's Lotus compatibility setting | js. | | | | | | | |
| | Typed or printed name: /s/Joseph (| sanavan | | | | | | | | |
| | | | | | | | | | | |
| | Title: COO (Title of official position held in corpora | tion or partnership) | | | | | | | | |
| | Date: March 1, 2020 | | | | | | | | | |
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Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | Nama | | | | |
|--|-----------------|-------------------------------------|--|--|--|--|
| Blue Stream Communications, LLC | 007219 | Name | | | | |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." | | | | | | |
| For more information on when to exclude these amounts, see the note on page (vii) of the general instru- paper SA3 form. | ctions in the | Concerning Gross Receipts Exclusion | | | | |
| During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners? | transmissions | | | | | |
| X NO | | | | | | |
| YES. Enter the total here and list the satellite carrier(s) below | | | | | | |
| Name Mailing Address Name Mailing Address | | | | | | |
| | | | | | | |
| INTEREST ASSESSMENTS | | | | | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for | | Q | | | | |
| Line 1 Enter the amount of late payment or underpayment | | Interest Assessment | | | | |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here | - | | | | | |
| x | days | | | | | |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | × 0.00274 | | | | | |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) | _ | | | | | |
| | erest charge) | | | | | |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further as contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. | sistance please | | | | | |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. | | | | | | |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyrigh please list below the owner, address, first community served, accounting period, and ID number as giver filing. | | | | | | |
| Owner Address | | | | | | |
| First community served Accounting period ID number | | | | | | |

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

ACCOUNTING PERIOD: 2019/2

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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

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

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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

| ¥0,00 1100 | | | | | | | | | | | |
|------------------------------|--------------|-----------------------------|--------------|-----------------------------|--------------|--|--|--|--|--|--|
| First Subscriber Group | | Second Subscriber Group | | Third Subscriber Group | | | | | | | |
| (Santa Rosa) | | (Rapid City and Bodega Bay) | | (Fairvale) | | | | | | | |
| Gross receipts | \$310,000.00 | Gross receipts | \$170,000.00 | Gross receipts | \$120,000.00 | | | | | | |
| DSEs | 2.472 | DSEs | 1.083 | DSEs | 1.389 | | | | | | |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 | | | | | | |
| \$310,000 x .01064 x 1.0 = | 3,298.40 | \$170,000 x .01064 x 1.0 = | 1,808.80 | \$120,000 x .01064 x 1.0 = | 1,276.80 | | | | | | |
| \$310,000 x .00701 x 1.472 = | 3,198.80 | \$170,000 x .00701 x .083 = | 98.91 | \$120,000 x .00701 x .389 = | 327.23 | | | | | | |
| Base rate fee | \$6,497.20 | Base rate fee | \$1,907.71 | Base rate fee | \$1,604.03 | | | | | | |

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

ACCOUNTING PERIOD: 2019/2

| DSE SCHEDULE. PAG | E 11. (CONTINUED) | | | | | | | | | |
|--------------------------|--|-----|-----------|-----|------------|-----|--|--|--|--|
| 4 | LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | | |
| | | | | | | | | | | |
| | SUM OF DSEs OF CATEGORY "O" STATIONS: | | | | | | | | | |
| | Add the DSEs of each station | | | | | | | | | |
| | Enter the sum here and in line | | 0.00 | | | | | | | |
| | Instructions: | | J | | | | | | | |
| 2 | Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 | | | | | | | | | |
| | of space G (page 3). | | | | | | | | | |
| Computation | In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- | | | | | | | | | |
| of DSEs for | mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs | | | | | | | | | |
| Category "O" Stations | CALL CICAL | DSE | | | CALL CICAL | DSE | | | | |
| Stations | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | | | | |
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| | LEGAL NAME OF C | OWNER OF CABLE SYSTEM: | | | | | 501 | | STEM ID# |
|---|---|--|--|---|---|--|--|----------------------------|---------------|
| Name | Blue Stream | Communications, L | LC | | | | | | 007219 |
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type- Column 6 | at the call sign of all distance: For each station, give to correspond with the information and the station, give to brivide the figure in column at least to the third decirition. | the number of hours rmation given in space the total number of h umn 2 by the figure is mal point. This is the station, give the "typolumn 4 by the figure | your cable system to J. Calculate onlours that the station column 3, and g "basis of carriage e-value" as "1.0." in column 5, and | n carried the star y one DSE for each production on broadcast ov- ive the result in evalue" for the second production For each network | tion during the acted the acted to the air during decimals in colustation. The column 6. Round to column for the air during t | the accounting p mn 4. This figure rcial educational nd to no less than | eriod. must station, | |
| Capacity | | C | CATEGORY LAC | STATIONS: (| COMPUTATI | ON OF DSEs | • | | |
| | 1. CALL SIGN | 2. NUMBE OF HOU CARRIE SYSTEI | ER 3. NI URS 0 ED BY S | UMBER F HOURS TATION N AIR | 4. BASIS OF CARRIAG VALUE | 5. | TYPE VALUE | 6. DSE | Ī |
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| | Add the DSEs of Enter the su | of CATEGORY LAC Sof each station. Im here and in line 2 of p | part 5 of this schedule | · | | regrams) if that a | 0.00 | | |
| Computation of DSEs for Substitute-Basis Stations | Was carried tions in efferations in efferations in efferations by the space I). Column 2: at your option. Column 3: Column 4: I | I by your system in substant on October 19, 1976 (some or more live, nonnetwork for each station give the This figure should correct the number of days Divide the figure in colunt is the station's DSE | titution for a program (as shown by the lett ork programs during e number of live, non spond with the inforr s in the calendar yea nn 2 by the figure in | that your system or "P" in column 7 that optional carrie metwork programs nation in space I. rr. 365, except in a column 3, and giv | was permitted to of space I); and age (as shown by a carried in substate I leap year. The the result in control of the space I leap year. | o delete under F the word "Yes" in titution for progra | CC rules and reg column 2 of ams that were de o no less than th | leted e third | n). |
| | | SU | BSTITUTE-BAS | IS STATIONS | S: COMPUTA | TION OF DS | Es | | |
| | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBER OF DAYS IN YEAR | 4. DSE | 1. CALL SIGN | 2. NUMBE OF PROGR | OF | JMBER DAYS YEAR | 4. DSE |
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| | Add the DSEs | oF SUBSTITUTE-BAS of each station. Im here and in line 3 of p | |) , | > | | 0.00 | | |
| 5 | | ER OF DSEs: Give the ams 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 of | f DSEs from part 2● | | | | • | 0.00 | | |
| of DSEs | | f DSEs from part 3 ● | | | | • | 0.00 | _ | |
| | | f DSEs from part 4 ● | | | : | <u> </u> | 0.00 | - | |
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| | TOTAL NUMBE | R OF DSEs | | | | | | | 0.00 |

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

| LEGAL NAME OF C | | | | | | | S' | YSTEM ID# 007219 | Name |
|--|---|---|--|---|--|---|--|---------------------|---|
| Instructions: Blod In block A: • If your answer if schedule. • If your answer if | "Yes," leave the re | emainder of p | · | 7 of the DSE sche | edule blank aı | nd complete pa | art 8, (page 16) of | the | 6 |
| | | | BLOCK A: T | ELEVISION M | ARKETS | | | | Computation of |
| = | 1981? | schedule—[| • | iller markets as de | | | | gulations in | 3.75 Fee |
| | | BLOC | CK B: CARR | IAGE OF PERI | MITTED DS | SEs | | | |
| Column 1: CALL SIGN | under FCC rules | and regulation ne DSE Sche | ons prior to Jui dule. (Note: Th | part 2, 3, and 4 o ne 25, 1981. For fu ne letter M below r Act of 2010.) | urther explana | ation of permitt | ed stations, see tl | he | |
| Column 2: BASIS OF PERMITTED CARRIAGE | (Note the FCC rt. A Stations carrive 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursus *F A station pre | ules and regued pursuant to as defined all educations distation (76.) or DSE sched ant to individuationally carries JHF station w | lations cited be to the FCC many din 76.5(kk) (76.565) (see paragulule). Lual waiver of Fed on a part-ting grade-Both in the first part-ting grade-Both in grade-Both in the first part-ting grade-Both in the fi | ne or substitute ba contour, [76.59(d)(| ose in effect of 76.57, 76.59(b) (e)(1), 76.63(a) (e)(3) referring the stitution of goods asis prior to June 20.50 (e) | n June 24, 198), 76.61(b)(c), a) referring to 7 g to 76.61(d) randfathered s | 76.63(a) referring 6.61(e)(1 stations in the | | |
| Column 3: | | e stations ide | ntified by the I | n parts 2, 3, and 4 etter "F" in column | | | vorksheet on page | 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 | |
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| | | В | LOCK C: CO | MPUTATION O | F 3.75 FEE | | | | |
| Line 1: Enter the | total number of | | | | | | | - | |
| Line 2: Enter the | sum of permitte | ed DSEs from | m block B abo | ove | | | | | |
| Line 3: Subtract (If zero, I | | | | r of DSEs subjec 7 of this schedu | | rate. | | 0.00 | |
| Line 4: Enter gro | ess receipts from | space K (p | age 7) | | | | x 0.03 | 375 | Do any of the DSEs represent partially |
| Line 5: Multiply li | ine 4 by 0.0375 | and enter su | ım here | | | | | | permited/ partially nonpermitted |
| Line 6: Enter tota | al number of DS | Es from line | 3 | | | | x | | carriage? If yes, see part 9 instructions. |
| Line 7: Multiply li | ine 6 by line 5 ar | nd enter her | e and on line | 2, block 3, spac | e L (page 7 <u>)</u> | | | 0.00 | |

| | OWNER OF CABLE Communicatio | | | | | | S` | YSTEM ID# 007219 | Name |
|-----------------|------------------------------|--------|-----------------|--------------------|-----------|-----------------|-----------------------|---------------------|---------------|
| | | BLOCK | A: TELEVIS | ION MARKETS | S (CONTIN | IUED) | | | |
| 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 6 |
| | | | | | | | | | Computation o |
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| Name | Blue Stream Co | | | | | | | | S | ************************************** |
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| Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage | stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fi A—Part-time sp 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Comparin block | or to June 25, call sign for eather DSE for the DSE for the accounting the basis of cCC rules and ecialty program (d)(1),76.61(e) rogramming: (e)(3)). Carriage under all instructions the station's Ee the DSE figures. B, column 3 coinformation you are signed. | 1981, under forme ach distant station in station for a sin g period and year arriage on which the regulations cited by mming: Carriage, c)(1), or 76.63 (refectarriage under FCC certain FCC rules, in the paper SA3 to SSE for the current ures listed in column of part 6 for this state gu give in columns | r FCC rules govidentifed by the gle accounting in which the car he station was of elow pertain to a part-time borring to 76.61(e) C rules, section regulations, or form. a accounting per inso 2 and 5 and attion. 2, 3, and 4 musting the gleen recommendation. | verni lette perio carrie carrie thos asis (1)) s 76 auth | ntifed by the letter "F" ing part-time and subser "F" in column 2 of pod, occurring betweer the and DSE occurred (see the political part of the see in effect on June 24 of of specialty program (s. 5.59(d)(3), 76.61(e)(3) norizations. For further as computed in parts the smaller of the two exaccurate and is subject to the subject of th | stitute carri part 6 of the n January 1 (e.g., 1981) e following l, 1981. Iming unde , or 76.63 (r explanation 2, 3, and 4 of figures he | age. DSE schedule, 1978 and Jun (1) letters r FCC rules, se referring to on, see page (v of this schedule. This figure | ene 30, 19 ections vi) of the should be | 981 ne enterei |
| | | | | | ED (| ON A PART-TIME AN | | | | |
| | 1. CALL SIGN | 2. PRIC | | COUNTING ERIOD | | 4. BASIS OF CARRIAGE | | RESENT DSE | 6. P | ERMITTED DSE |
| | Oloiv | DOL | | LITIOD | | CARTIAGE | | JOL | | DOL |
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| Computation of the Syndicated Exclusivity Surcharge | If your answer is | "Yes," comple "No," leave bl | ete blocks B and C locks B and C blan BLOC vithin a top 100 maj | k and complete K A: MAJOR | TE | t 8 of the DSE schedu LEVISION MARKI as defned by section 70 No—Proceed to | ET 6.5 of FCC | rules in effect J | une 24, | 1981? |
| | | | | | | | | | | |
| | Is any station listed in commercial VHF stati or in part, over the ca | block B of pa | | eam of a | n | BLOCK Was any station listed hity served by the cable former FCC rule 76. | in block B le system p | | d in any | commu- |
| | Yes—List each s X No—Enter zero a | | th its appropriate per part 8. | mitted DSE | | Yes—List each sta X No—Enter zero ar | | | ate permi | tted DSE |
| | CALL SIGN | DSE | CALL SIGN | DSE | | CALL SIGN | DSE | CALL SIG | SN | DSE |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | TOTAL DSEs | 0.00 | | | | TOTAL DS | SEs . | 0.00 |

| LEGAL NA | ME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC | SYSTEM ID# 007219 | Name |
|---------------|---|----------------------|--------------------------|
| | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE | | |
| Section 1 | Enter the amount of gross receipts from space K (page 7) | 913,488.00 | 7 |
| Section 2 | A. Enter the total DSEs from block B of part 7 | 0.00 | Computation of the |
| | B. Enter the total number of exempt DSEs from block C of part 7 | 0.00 | Syndicated |
| | 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 any | y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below. | | |
| | SECTION 3: TOP 50 TELEVISION MARKET | | |
| Section 3a | • Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS | E | |
| | is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. | | |
| | A. Enter 0.00599 of gross receipts (the amount in section1) | | |
| | B. Enter 0.00377 of gross receipts (the amount in section.1) | | |
| | line C in section 2) and enter here | | |
| | D. Multiply line B by line C and enter here | | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | | |
| Section 3b | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank. | | |
| | A. Enter 0.00599 of gross receipts (the amount in section 1) | | |
| | B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ _\$ | | |
| | C. Multiply line B by 3.000 and enter here | | |
| | D. Enter 0.00178 of gross receipts (the amount in section 1) | | |
| | E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here | | |
| | F. Multiply line D by line E and enter here | | |
| | G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | | |
| | SECTION 4: SECOND 50 TELEVISION MARKET | | |
| Section | Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. | | |
| 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 DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1) | E | |
| | B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$ | | |
| | C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here | | |
| | D. Multiply line B by line C and enter here | | |
| | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge | | |

| Name | LEGAL NAM | ME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# |
|-------------------------------------|------------------------|--|------------|
| - Hamo | l | Blue Stream Communications, LLC | 007219 |
| 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. | |
| | | F. Multiply line D by line E and enter here | |
| | | G. Add lines A, C, and F. This is your surcharge. | |
| | | Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge | |
| | | , | |
| 8 | | 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 p | art |
| | | checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. | |
| Computation | | ar answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. | |
| of Base Rate Fee | - | ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be | low |
| Dase Rate Fee | blank What i | . is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers | |
| | | ocated within that station's local service area and others were located outside that area. For the definition of a station's "loc | al |
| | service | e area," see page (v) of the general instructions. | |
| | | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS | |
| | • Did y | our cable system retransmit the signals of any partially distant television stations during the accounting period? | |
| | _ | X Yes—Complete part 9 of this schedule. No—Complete the following sections. | |
| | | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE | |
| | Section | | |
| | 1 | Enter the amount of gross receipts from space K (page 7) ▶\$ | |
| | Section 2 | Enter the total number of permitted DSEs from block B, part 6 of this schedule. | |
| | | (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶ | |
| | Section | | |
| | 3 | If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. | |
| | | A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$ | |
| | | (the difficult 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) | 0.00 |
| | | Base Rate Fee | 0.00 |

| LEGAL N | AME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | Nome |
|--|--|------------------|--|
| Blue | Stream Communications, LLC | 007219 | Name |
| Section | If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank. | | |
| 4 | A. Enter 0.01064 of gross receipts | | 8 |
| | (the amount in section 1) \$ | _ | |
| | B. Enter 0.00701 of gross receipts (the amount in section 1) \$ | | Computation of |
| | C. Multiply line B by 3.000 and enter here | _ | Base Rate Fee |
| | D. Enter 0.00330 of gross receipts | | |
| | (the amount in section 1) \$ | | |
| | E. Subtract 4.000 from total DSEs | | |
| | (the figure in section 2) and enter here | | |
| | F. Multiply line D by line E and enter here | | |
| | G. Add lines A, C, and F. This is your base rate fee. | | |
| | Enter here and in block 3, line 1, space L (page 7) Base Rate Fee | 0.00 | |
| | | | |
| | TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe | • | 9 |
| • | o. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee | , to exclude | Computation |
| • | s from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must: | dvantage of this | of Base Rate Fee |
| | Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine | | and Syndicated |
| DSEs a | and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. | | Exclusivity Surcharge for |
| also co | If any portion of your cable system is located within the top 100 television market and the station is not exempt in pute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be cable system is wholly located outside all major television markets, complete block A only. | | Partially Distant Stations, and |
| Step 1 | Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant stat to that community. | ion you | for Partially Permitted Stations |
| outside | For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.) | | |
| subscri | Divide your subscribers into subscriber groups according to the complement of stations to which they are distant, ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide. | | |
| Comp ugroups | iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst | .em's subscriber | |
| - | section: | | |
| • Give t | fy the communities/areas represented by each subscriber group. he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group. | of the | |
| • If: 1) your | system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in | າ parts 2, 3, | |
| 2) any | ortion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b | lock B, | |
| • | 6 of this schedule. ne DSEs for each station. This gives you the total DSEs for the particular subscriber group. | | |
| • Calcu | late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form. | nstructions | |
| Comp page. DSEs f | ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the part making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee calculations on the form. | at is, the total | |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007219 **Blue Stream Communications, LLC** 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 Blue Stream Com | | | | | | S | YSTEM ID# 007219 | Na |
|--|---------------------|-----------------------|--------------|-----------------------|-----------|----------------|---------------------|----------|
| В | LOCK A: | COMPUTATION O | F BASE RA | TE FEES FOR EAC | CH SUBSCR | RIBER GROUP | | |
| | | SUBSCRIBER GRO | UP | | SECONE | SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | Coral S | prings | | COMMUNITY/ ARE | Α | | 0 | Campa. |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Comp |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First G | iroup | \$ 913 | 3,488.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| | THIRD | SUBSCRIBER GRO | UP | | FOURTH | SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third (| Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| • | • | | | <u> </u> | · | | | |
| Base Rate Fee Third 0 | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Raco Dato Eno. Add th | ne hace " c" | to fooe for each cub- | oriber group | ge chown in the house | e ahovo | | | |
| Base Rate Fee: Add the Enter here and in block | | | criber group | as shown in the boxes | s above. | \$ | 0.00 | |

| LEGAL NAME OF OWNE Blue Stream Comr | | | | | | S | YSTEM ID# 007219 | Name |
|--|-----------------------------------|-----------------------|--------------|-----------------------|-----------|-----------------|---------------------|--------------------------|
| BL | OCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | H SUBSCF | RIBER GROUP | | |
| | FIFTH | SUBSCRIBER GRO | | | | SUBSCRIBER GROU | JP | ٥ |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | 4 | | 0 | 9 Commutation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of |
| | | 0.122.5.0.1 | | | | | | Base Rate Fee |
| | | | | | | | | and |
| | | | | | | | | Syndicated |
| | | | | | | | | Exclusivity Surcharge |
| | | | | | | | | for |
| | | | | | | | | Partially |
| | | | | | | | | Distant |
| | | | | | | | | Stations |
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| | | | | | | | | |
| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | 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 | |
| S | SEVENTH | SUBSCRIBER GRO | UP | | EIGHTH | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | Α | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | H | 0.00 | |
| | | | , | | 41- 0 | | _ | |
| Gross Receipts Third G | ioup | a | 0.00 | Gross Receipts Four | uı Group | \$ | 0.00 | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add th Enter here and in block | e base rat 3, line 1, s | te fees for each subs | criber group | as shown in the boxes | s above. | \$ | | |

| Blue Stream Communica | BLE SYSTEM: Itions, LLC | | | | | YSTEM ID# 007219 |
|--|----------------------------|--------|-------------------------------|-----------|-------------------|---------------------|
| | : COMPUTATION O | | TE FEES FOR EAC | | | |
| NINT COMMUNITY/ AREA | H SUBSCRIBER GRO | 0 0 | COMMUNITY/ ARE | | 1 SUBSCRIBER GROU | JP 0 |
| CALL SIGN DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| otal DSEs | -!! | 0.00 | Total DSEs | <u> </u> | - 11 | 0.00 |
| Gross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 |
| | | | | | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Sec | | \$ | 0.00 |
| | H SUBSCRIBER GRO | | | | SUBSCRIBER GROU | |
| OMMUNITY/ AREA | | 0 | COMMUNITY/ ARE | Α | | 0 |
| CALL SIGN DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 |
| | \$ | 0.00 | Total DSEs Gross Receipts Fou | rth Group | \$ | 0.00 |
| Fotal DSEs Gross Receipts Third Group Base Rate Fee Third Group | \$ | | | · | \$ | _ |

| LEGAL NAME OF OWNER OF CAE Blue Stream Communicat | | | | | | YSTEM ID# 007219 |
|---|----------------|------------------|--|-----------------|-------------------|---------------------|
| | | | TE FEES FOR EAC | | | |
| | SUBSCRIBER GRO | | Ti . | | SUBSCRIBER GROU | |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ AREA | 4 | | 0 |
| 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 First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 |
| | | | | | | |
| ase Rate Fee First Group | \$ | 0.00 | Daga Data Fac Case | | | 0.00 |
| | \ | - | Base Rate Fee Seco | | \$ | 0.00 |
| | SUBSCRIBER GRO | DUP | | SIXTEENTH | I SUBSCRIBER GROU | UP |
| | \ | - | | SIXTEENTH | | |
| MMUNITY/ AREA | \ | DUP | | SIXTEENTH | | UP |
| MMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| MMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| DMMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| OMMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| OMMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| OMMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| OMMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| OMMUNITY/ AREA | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
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| CALL SIGN DSE | SUBSCRIBER GRO | 0 0 | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | UP 0 |
| CALL SIGN DSE CALL SIGN DSE Otal DSEs | SUBSCRIBER GRO | DSE | COMMUNITY/ AREA | SIXTEENTH | I SUBSCRIBER GROI | DSE |
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| | BLE SYSTEM: tions, LLC | | | | | YSTEM ID# 007219 |
|--|---------------------------|------|-------------------------------|-----------|-----------------|---------------------|
| | COMPUTATION O | | | | | |
| | SUBSCRIBER GRO | | Ti . | | SUBSCRIBER GROU | |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ ARE | Α | | 0 |
| CALL SIGN DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| otal DSEs | 44 | 0.00 | Total DSEs | | 11 | 0.00 |
| ross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 |
| | | | | · | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 |
| | I SUBSCRIBER GRO | | | TWENTIETH | SUBSCRIBER GROU | JP |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 |
| | \$ | 0.00 | Total DSEs Gross Receipts Fou | rth Group | \$ | 0.00 |
| Fotal DSEs Gross Receipts Third Group Base Rate Fee Third Group | \$ | | | · | \$ | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | | |
|---|-----------|---------------------------------|---------------|--|-----------|-------------------------------|------|----------------------|--|
| TWE | NTY-FIRST | COMPUTATION C SUBSCRIBER GRO | DUP | | TY-SECONE | RIBER GROUP SUBSCRIBER GRO | | 9 | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | 0 | Computation | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of | |
| | | | | | | | | Base Rate Fee and | |
| | | | | | | | | Syndicated | |
| | | | | | | | | Exclusivity | |
| | | | | | | | | Surcharge | |
| | | | | | | | | for Partially | |
| | | | | | | | | Distant | |
| | | | | | | | | Stations | |
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| Total DSEs | | | 0.00 | Total DCF- | | | 0.00 | | |
| | Croup | • | 0.00 | Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 | | | 0.00 | | |
| Gross Receipts First | Group | <u>\$</u> | 0.00 | Gross Receipts Sec | ona Group | \$ | 0.00 | | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | | |
| | | SUBSCRIBER GRO | | | | H SUBSCRIBER GRO | _ | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | A | | 0 | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | | |
| Base Rate Fee: Add Enter here and in blo | | | scriber group | o as shown in the boxe | s above. | \$ | | | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | | |
|---|------------------|----------|--|--------------|-----------------|------|--|--|--|
| | | | TE FEES FOR EAC | | | | | | |
| | 1 SUBSCRIBER GRO | | TWENTY-SIXTH SUBSCRIBER GROUP | | | | | | |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ AREA 0 | | | | | | |
| 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 First Group | \$ | 0.00 | Gross Receipts Second Group \$ 0.00 | | | | | | |
| • | | | | · | | | | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | and Group | \$ | 0.00 | | | |
| | • | | | - ' | | | | | |
| | 1 SUBSCRIBER GRO | | | | SUBSCRIBER GROU | JP | | | |
| | 1 SUBSCRIBER GRO | 0 0 | | ITY-EIGHTH | | JP 0 | | | |
| MMUNITY/ AREA | 1 SUBSCRIBER GRO | | TWEN | ITY-EIGHTH | | | | | |
| DMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| MMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| DMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| OMMUNITY/ AREA | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| CALL SIGN DSE | | 0 | TWEN | ITY-EIGHTH | SUBSCRIBER GROU | 0 | | | |
| CALL SIGN DSE CALL SIGN DSE | | DSE | CALL SIGN | DSE | SUBSCRIBER GROU | DSE | | | |
| COMMUNITY/ AREA | CALL SIGN | 0.00 | TWEN COMMUNITY/ AREA CALL SIGN Total DSEs | DSE th Group | CALL SIGN | DSE | | | |

| | | | TE FEES FOR EAC | CH SUBSCF | RIBER GROUP | | | | | |
|--|------------------|---|----------------------------|------------|-----------------|------|--|--|--|--|
| | I SUBSCRIBER GRO | BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GRO TWENTY-NINTH SUBSCRIBER GROUP THIRTIETH SUBSCRIB | | | | | | | | |
| JOMMUNITY/ AREA | | | THIRTIETH SUBSCRIBER GROUP | | | | | | | |
| | | 0 | COMMUNITY/ AREA 0 | | | | | | | |
| 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 First Group | \$ | 0.00 | Gross Receipts Sec | ona Group | \$ | 0.00 | | | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | | | | |
| THIRTY-FIRST | SUBSCRIBER GRO | DUP | THIR | RTY-SECONE | SUBSCRIBER GROU | JP | | | | |
| DMMUNITY/ AREA | | 0 | COMMUNITY/ AREA 0 | | | | | | | |
| 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 Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | | | | |
| | | | | | | | | | | |
| | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | | | | |
| se Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 | | | | | | | | | | |

| EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Use Stream Communications, LLC 007219 | | | | | | | | | |
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| | | | TE FEES FOR EAC | | | | | | |
| THIRTY-THIR COMMUNITY/ AREA | O SUBSCRIBER GRO | OUP 0 | THIRTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 | | | | | | |
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| 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 First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | | | |
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| | \$ | 0.00 | Base Rate Fee Seco | | \$ | 0.00 | | | |
| THIRTY-FIFT | \$ H SUBSCRIBER GRO | DUP | TH | IIRTY-SIXTH | \$ SUBSCRIBER GRO | UP | | | |
| THIRTY-FIFT | · | | | IIRTY-SIXTH | | | | | |
| THIRTY-FIFT | · | DUP | TH | IIRTY-SIXTH | | UP | | | |
| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
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| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
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| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
| THIRTY-FIFT | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
| THIRTY-FIFT OMMUNITY/ AREA CALL SIGN DSE | H SUBSCRIBER GRO | 0 0 | TH COMMUNITY/ AREA | IIRTY-SIXTH | SUBSCRIBER GRO | UP 0 | | | |
| THIRTY-FIFT COMMUNITY/ AREA CALL SIGN DSE Otal DSEs | H SUBSCRIBER GRO | DUP DSE | CALL SIGN | DSE | SUBSCRIBER GRO | UP 0 DSE | | | |
| COMMUNITY/ AREA | H SUBSCRIBER GRO | DUP DSE DOUB DO | TH COMMUNITY/ AREA CALL SIGN Total DSEs | DSE | SUBSCRIBER GRO | UP 0 DSE | | | |

| EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Blue Stream Communications, LLC 007219 | | | | | | | | | | |
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| BL | OCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | | | | | | |
| THIRTY-S | EVENTH | SUBSCRIBER GRO | JP | THIR | JP | 0 | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | 9 Computation | | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of | | |
| | | _ | | | | | | Base Rate Fee | | |
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| | | | | | | | | Syndicated Exclusivity | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Seco | and Group | \$ | 0.00 | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | | | |
| THIRT | Y-NINTH | SUBSCRIBER GRO | JP | | FORTIETH | I SUBSCRIBER GROU | JP | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | | | |
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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 Four | th Group | \$ | 0.00 | | | |
| Base Rate Fee: Add the Enter here and in block | e base rat 3, line 1, s | e fees for each subsc space L (page 7) | criber group | as shown in the boxes | s above. | \$ | | | | |

| EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Blue Stream Communications, LLC 007219 | | | | | | | | | |
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| | | | TE FEES FOR EAC | | | | | | |
| | SUBSCRIBER GRO | | FORTY-SECOND SUBSCRIBER GROUP | | | | | | |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ AREA 0 | | | | | | |
| 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 First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | | | |
| FORTY-THIRD | SUBSCRIBER GRO | UP | FOR | TY-FOURTH | SUBSCRIBER GRO | UP | | | |
| DMMUNITY/ AREA | | 0 | COMMUNITY/ AREA 0 | | | | | | |
| CALL SIGN DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | | | |
| Gross Receipts Third Group | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | | | |
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| | EGAL NAME OF OWNER OF CABLE SYSTEM: Slue Stream Communications, LLC 007219 | | | | | | | | | | |
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| BL | OCK A: 0 | COMPUTATION OF | BASE RA | TE FEES FOR EAC | | | | | | | |
| | ΓY-FIFTH | SUBSCRIBER GRO | | FC | ۵ | | | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | 0 | 9 Commutation | | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of | | | | | |
| | | 31.122.21.011 | | 0.122 | DSE | CALL SIGN | | Base Rate Fee | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | | | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | | | | |
| | | | | | | | | | | | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Seco | and Group | \$ | 0.00 | | | | |
| | EVENTH | SUBSCRIBER GRO | UP | Ti . | | I SUBSCRIBER GROU | JP | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | | | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | | | | |
| | | | | | | | | | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | | | | |
| Base Rate Fee: Add the Enter here and in block | e base rat 3, line 1, s | e fees for each subse space L (page 7) | criber group | as shown in the boxes | s above. | \$ | | | | | |

| EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Blue Stream Communications, LLC 007219 | | | | | | | | | | |
|---|-----------------------------------|-----------------------|--------------|-----------------------|----------|-----------------|------|------------------|--|--|
| BL | .OCK A: (| COMPUTATION OF | BASE RA | ATE FEES FOR EAC | | | | | | |
| | Y-NINTH | SUBSCRIBER GRO | | | JP | 9 | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | 0 | | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of | | | | |
| 0,122 0.011 | 302 | 0.122 0.0.1 | 302 | 07.22 0.0.1 | DSE | CALL SIGN | 332 | Base Rate Fee | | |
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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 | | | |
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| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | | | |
| | ΓY-FIRST | SUBSCRIBER GRO | JP | †† | | SUBSCRIBER GROU | JP | | | |
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| Total DSEs | | | 0.00 | Total DSEs | | II | 0.00 | | | |
| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourt | th Group | \$ | 0.00 | | | |
| | | | | | | | | | | |
| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourt | th Group | \$ | 0.00 | | | |
| Base Rate Fee: Add the Enter here and in block | e base rat 3, line 1, s | e fees for each subso | criber group | as shown in the boxes | above. | \$ | | | | |

| BLOCK A: COMPUTA FIFTY-THIRD SUBSCRIB COMMUNITY/ AREA CALL SIGN DSE CALL SI | ER GROUP 0 | | TY-FOURTH | IBER GROUP SUBSCRIBER GROUP CALL SIGN | JP 0 |
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| ross Receipts First Group \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 |
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| ase Rate Fee First Group \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 |
| FIFTY-FIFTH SUBSCRIB | | Ħ | | SUBSCRIBER GROU | |
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| otal DSEs | 0.00 | Total DSEs | | | 0.00 |
| Gross Receipts Third Group \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 |
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| Base Rate Fee Third Group \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | | |
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| FIFT | /-SEVENTH | COMPUTATION C SUBSCRIBER GRO | DUP | TE FEES FOR EACH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 | | | | 9 | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | U | Computation | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of | |
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| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Sec | ona Group | \$ | 0.00 | | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | | |
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| Gross Receipts Third | l Group | \$ | 0.00 | Gross Receipts Fou | ırth Group | \$ | 0.00 | | |
| Base Rate Fee Third | l Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | | |
| Base Rate Fee: Add Enter here and in blo | | | scriber group | as shown in the boxe | es above. | \$ | | | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | | |
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| BLOCK A | COMPUTATION O | F BASE RA | TE FEES FOR EAC | H SUBSCF | RIBER GROUP | | | | |
| | T SUBSCRIBER GRO | | SIXTY-SECOND SUBSCRIBER GROUP | | | | | | |
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| ross Receipts First Group | \$ | 0.00 | Gross Receipts Second Group \$ 0.00 | | | | | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Second | ond Group | \$ | 0.00 | | | |
| SIXTV-THIR | D SUBSCRIBER GRO | NI ID | SIX | TV-FOLIRTH | H SUBSCRIBER GROU | IP | | | |
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| otal DSEs | | | | | _ | | | | |
| otal DSEs Gross Receipts Third Group | \$ | 0.00 | Gross Receipts Four | rth Group | \$ | 0.00 | | | |

| | EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Blue Stream Communications, LLC 007219 | | | | | | | | | | |
|--|---|-----------------------|--------------|-----------------------|-------------------------------------|------------------|------|--------------------------|--|--|--|
| BL | OCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | | | | | | | |
| SIXT | ΓY-FIFTH | SUBSCRIBER GRO | | S | JP | ٥ | | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | 0 | 9 Commutation | | | | | |
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| | | 31.122.21.011 | | | | | | Base Rate Fee | | | |
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| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Seco | Gross Receipts Second Group \$ 0.00 | | | | | | |
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| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | | | | |
| | SEVENTH | SUBSCRIBER GRO | UP | 11 | | SUBSCRIBER GROU | JP | | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | | | | |
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| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | | | | |
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| Base Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourt | th Group | \$ | 0.00 | | | | |
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| sase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.0 | |

| LEGAL NAME OF OW Blue Stream Co | | | | | | S | YSTEM ID# 007219 | Name |
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| | NTY-THIRD | COMPUTATION O SUBSCRIBER GRO | DUP | | NTY-FOURTH | RIBER GROUP I SUBSCRIBER GRO | | 9 |
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| EGAL NAME OF OWNER OF CAE Blue Stream Communicat | | | | | S | YSTEM ID# 007219 | | | |
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| SEVENTY-NINTH | SUBSCRIBER GRO | UP | | EIGHTIETH | SUBSCRIBER GROU | JP | | | |
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| | ations, LLC | | | | | YSTEM ID# 007219 | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | | |
| ross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | | |
| 5.1.5 .5.10 | | 0.00 | | | | 0.00 | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Sec | | \$ | 0.00 | | |
| EIGHTY-SEVENT DMMUNITY/ AREA | H SUBSCRIBER GRO | <u> 0</u> | COMMUNITY/ ARE | | H SUBSCRIBER GROU | 0 | | |
| JIMINONITT/ AREA | | | COMMONT 17 ARE | A | | | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | | |
| ross Receipts Third Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | | |
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| Blue Stream Communica | BLE SYSTEM: Itions, LLC | | | | | YSTEM ID# 007219 |
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| | | | TE FEES FOR EAC | | | |
| EIGHTY-NINT COMMUNITY/ AREA | EIGHTY-NINTH SUBSCRIBER GROUP NINTIETH SUBSCRIBER GROUP 1UNITY/ AREA 0 COMMUNITY/ AREA | | | | UP 0 | |
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| otal DSEs | | 0.00 | Total DSEs | • | | 0.00 |
| Fross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 |
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| | \$ | 0.00 | Base Rate Fee Seco | | \$ | 0.00 |
| NINETY-FIRS | T SUBSCRIBER GRO | DUP | NINET | ry-second | SUBSCRIBER GRO | UP |
| NINETY-FIRS | · | | | ry-second | | |
| NINETY-FIRS | · | DUP | NINET | ry-second | | UP |
| NINETY-FIRS | T SUBSCRIBER GRO | OUP 0 | NINET | TY-SECOND | SUBSCRIBER GRO | UP 0 |
| NINETY-FIRS | T SUBSCRIBER GRO | OUP 0 | NINET | TY-SECOND | SUBSCRIBER GRO | UP 0 |
| NINETY-FIRS | T SUBSCRIBER GRO | OUP 0 | NINET | TY-SECOND | SUBSCRIBER GRO | UP 0 |
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| NINETY-FIRS COMMUNITY/ AREA CALL SIGN DSE | T SUBSCRIBER GRO | OUP 0 | NINET | TY-SECOND | SUBSCRIBER GRO | UP 0 |
| NINETY-FIRS COMMUNITY/ AREA CALL SIGN DSE | T SUBSCRIBER GRO | DUP | NINET COMMUNITY/ AREA CALL SIGN | DSE | SUBSCRIBER GRO | DSE |
| COMMUNITY/ AREA | T SUBSCRIBER GRO | DUP DSE 0.00 | NINET COMMUNITY/ AREA CALL SIGN Total DSEs | DSE | SUBSCRIBER GRO | DSE DSE DSO |

| LEGAL NAME OF OWN Blue Stream Con | | | | | | S | 007219 | Name |
|--|---|-----------|----------------|-----------------------|-----------|------------------|-------------|-------------------|
| | BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP NINETY-THIRD SUBSCRIBER GROUP NINETY-FOURTH SUBSCRIBER GROUP | | | | | | UP | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | | • | 0.00 | Total DSEs | • | • | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First | | \$ | 0.00 | Base Rate Fee Seco | | \$ | 0.00 | |
| NINETY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA | | | JP 0 | COMMUNITY/ AREA | | I SUBSCRIBER GRO | UP 0 | |
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| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Gross Receipts Third | l Group | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | |
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| Base Rate Fee Third | l Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | criber group | as shown in the boxes | s above. | \$ | | |

| Blue Stream Communicat | LE SYSTEM: ions, LLC | | | | S | YSTEM ID# 007219 | | |
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| | | | TE FEES FOR EACH | | | | | |
| NINETY-SEVENTH COMMUNITY/ AREA | IINETY-SEVENTH SUBSCRIBER GROUP AREA O COMMUNITY/ AREA O COMMUNITY/ AREA | | | | JP 0 | | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | | |
| ross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | | |
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| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | | |
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| CALL SIGN DSE | CALL SIGN | DSE | | 362 | CALL SIGN | DSE | | |
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| otal DSEs | CALL SIGN | | | | \$ | | | |
| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | | |
| CALL SIGN DSE Cotal DSEs Cross Receipts Third Group Clase Rate Fee Third Group | | 0.00 | Total DSEs | h Group | | 0.00 | | |

| LEGAL NAME OF OWNER OF CAB Blue Stream Communicat | | | | | | YSTEM ID# 007219 | | | |
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| otal DSEs | H | 0.00 | Total DSEs | | <u> </u> | 0.00 | | | |
| Gross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | | | |
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| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | | | |
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| ONE HUNDRED THIRD | SUBSCRIBER GRO | | 11 | D FOURTH | SUBSCRIBER GROU | | | | |
| | SUBSCRIBER GRO | UP 0 | ONE HUNDRE | D FOURTH | SUBSCRIBER GROU | JP 0 | | | |
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| Blue Stream Communicat | LE SYSTEM: ions, LLC | | | | S | YSTEM ID# 007219 | | |
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| | | | TE FEES FOR EACH | | | | | |
| | ONE HUNDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP | | | | | | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | | |
| ross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | | |
| ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Second | nd Group | \$ | 0.00 | | |
| ONE HUNDRED SEVENTH | SUBSCRIBER GRO | JP | ONE HUNDR | ED EIGHTH | H SUBSCRIBER GROU | JP | | |
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| Gross Receipts Third Group | | | | | | | | |

| LEGAL NAME OF OW Blue Stream Co | | | | | | S | 007219 | Name |
|--|------------------|------------------|--------------|-----------------------|-----------|----------------|--------|------------------|
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED NINTH SUBSCRIBER GROUP ONE HUNDRED TENTH SUBSCRIBER GROUP COMMUNITY AREA COMMUNITY AREA | | | | | | | 9 | |
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| Total DSEs | | | 0.00 | Total DSEs | | - | 0.00 | |
| Gross Receipts Firs | t Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| Base Rate Fee Firs | t Group | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| | | SUBSCRIBER GROU | | ii e | | SUBSCRIBER GRO | UP | |
| COMMUNITY/ ARE | A | | 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 Thir | d Group | \$ | 0.00 | Gross Receipts Four | th Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee Thir | d Group | \$ | 0.00 | Base Rate Fee Four | th Group | \$ | 0.00 | |
| | | | criber group | as shown in the boxes | s above. | | | |
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| Blue Stream Communica | BLE SYSTEM: tions, LLC | | | | S | YSTEM ID# 007219 | |
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| ONE HUNDRED THIRTEENTI COMMUNITY/ AREA | H SUBSCRIBER GRO | UP 0 | ONE HUNDRED FO | | 1 SUBSCRIBER GRO | UP 0 | |
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| Total DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Group | \$ | 0.00 | Gross Receipts Seco | ond Group | \$ | 0.00 | |
| 3ase Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
| ONE HUNDRED FIFTEENTI | H SUBSCRIBER GRO | UP | ONE HUNDRED | SIXTEENTH | H SUBSCRIBER GROU | UP | |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ AREA 0 | | | | |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | |
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| LEGAL NAME OF OWN Blue Stream Con | | | | | | S | 9YSTEM ID# 007219 | Name |
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| ONE HUNDRED SEVE | NTEENTH | | JP | ii . | GHTEENTH | RIBER GROUP I SUBSCRIBER GRO | UP 0 | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | U | Computation |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
| Base Rate Fee First (| Group | \$ | 0.00 | Base Rate Fee Second | nd Group | \$ | 0.00 | |
| | | SUBSCRIBER GROU | | li | | SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | II | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in bloo | | | riber group | as shown in the boxes | above. | \$ | | |

| LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | | |
|---|------------------------------|---------------------------|---------|--------------------|------------|--------------------|------|--------------------|--|
| Bi | LOCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EAC | CH SUBSCR | RIBER GROUP | | | |
| ONE HUNDRED TWE | NTY-FIRST | SUBSCRIBER GRO | UP | ONE HUNDRED TWE | NTY-SECONE | SUBSCRIBER GROUP |) | ^ | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | | | 0 | 9 Computation | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts First G | roup | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | | |
| 3ase Rate Fee First G | roup | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | | |
| ONE HUNDRED TWEN | NTY-THIRD | SUBSCRIBER GROUP |) | ONE HUNDRED TWE | NTY-FOURTH | I SUBSCRIBER GROUP |) | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | | | | | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | | |
| Gross Receipts Third (| Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | | |
| | | _ | | | | | | | |
| Base Rate Fee Third (| Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | | |
| Total DSEs Gross Receipts Third (Base Rate Fee Third (Base Rate Fee: Add the Enter here and in block | Group ne base ra f | \$ te fees for each subsc | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | | |

| Blue Stream Communic | CABLE SYSTEM: Cations, LLC | | | | S | YSTEM ID# 007219 |
|--|-------------------------------|-------------|-------------------------------|-------------|--------------------|---------------------|
| | A: COMPUTATION (| | П | | | |
| ONE HUNDRED TWENTY-FII COMMUNITY/ AREA | TH SUBSCRIBER GROU | UP 0 | H | | H SUBSCRIBER GROUP | 0 |
| | | U | COMMUNITY/ ARE | | | U |
| CALL SIGN DSE | | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| Total DSEs | | 0.00 | Total DSEs | | | 0.00 |
| Gross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | cond Group | \$ | 0.00 |
| Base Rate Fee First Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 |
| NE HUNDRED TWENTY-SEVEN | ITH SUBSCRIBER GRO | JP | ONE HUNDRED TW | ENTY-EIGHTH | H SUBSCRIBER GROUP |) |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ AREA 0 | | | |
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| Fotal DSEs | | 0.00 | Total DSEs | | | 0.00 |
| Total DSEs Gross Receipts Third Group | \$ | 0.00 | Total DSEs Gross Receipts Fou | urth Group | \$ | 0.00 |

| | ABLE SYSTEM: ations, LLC | | | | S | YSTEM ID# 007219 |
|----------------------------|-----------------------------|-----------|-------------------------------|------------|--------------------|---------------------|
| BLOCK A | : COMPUTATION C | F BASE RA | TE FEES FOR EAC | CH SUBSCF | RIBER GROUP | |
| ONE HUNDRED TWENTY-NINT | H SUBSCRIBER GROU | | 1 | | H SUBSCRIBER GROUP | |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ ARE | Α | | 0 |
| CALL SIGN DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE |
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| Γotal DSEs | | 0.00 | Total DSEs | | | 0.00 |
| Gross Receipts First Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 |
| Base Rate Fee First Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 |
| ONE HUNDRED THIRTY-FIR: | ST SUBSCRIBER GROU | IP | ONE HUNDRED THI | RTY-SECONE | O SUBSCRIBER GROUF |) |
| COMMUNITY/ AREA | | 0 | COMMUNITY/ AREA | | | |
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| 202 | 07.22 0.011 | DOL | | | OALL GIGIN | DSE |
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| Total DSEs | | 0.00 | Total DSEs | | | 0.00 |
| | \$ | | Total DSEs Gross Receipts Fou | rth Group | \$ | |

| LEGAL NAME OF OWN Blue Stream Cor | | | | | | S | 6YSTEM ID# 007219 | Name |
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| | | COMPUTATION O SUBSCRIBER GROU | | TE FEES FOR EAC | | IBER GROUP | P | • |
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| Total DSEs | • | - | 0.00 | Total DSEs | • | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| ONE HUNDRED TH | HIRTY-FIFTH | SUBSCRIBER GROU | P | ONE HUNDRED | THIRTY-SIXTH | I SUBSCRIBER GROUI | P | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| 1 | • | | | | r | | | |
| Base Rate Fee Third | Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | scriber group | as shown in the boxe | es above. | \$ | | |

| LEGAL NAME OF OW Blue Stream Co | | | | | | S | 007219 | Name |
|--|--------------------------------------|----------------------------------|---------------|----------------------|-------------|--------------------------------|--------|----------------------|
| | TY-SEVENTH | COMPUTATION O SUBSCRIBER GROU | Р | ii . | IRTY-EIGHTH | IBER GROUP SUBSCRIBER GROUP | | 9 |
| COMMUNITY/ ARE | Α | | 0 | COMMUNITY/ ARE | Α | | 0 | Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Total DSEs | • | | 0.00 | Total DSEs | • | | 0.00 | |
| Gross Receipts Firs | t Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
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| Base Rate Fee Firs | | \$ | 0.00 | Base Rate Fee Sec | | \$ | 0.00 | |
| | | SUBSCRIBER GROU | | Ħ | | SUBSCRIBER GRO | _ | |
| COMMUNITY/ ARE | A | | 0 | COMMUNITY/ ARE | A | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Thir | d Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee Thir | d Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in bl | d the base ra tock 3, line 1, | te fees for each subs | scriber group | as shown in the boxe | s above. | \$ | | |

| LEGAL NAME OF OW Blue Stream Co | | | | | | S | 007219 | Name |
|---|-------------|----------------------------------|---------------|----------------------|------------|-----------------------------|--------|----------------------|
| | FORTY-FIRST | COMPUTATION O SUBSCRIBER GROU | Р | ii — | RTY-SECOND | IBER GROUP SUBSCRIBER GROU | | 9 |
| COMMUNITY/ ARE | Α | | 0 | COMMUNITY/ ARE | Α | | 0 | Computation |
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| Gross Receipts First | t Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
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| Base Rate Fee First | t Group | \$ | 0.00 | Base Rate Fee Sec | | \$ | 0.00 | |
| | | SUBSCRIBER GROU | | 11 | | SUBSCRIBER GROU | _ | |
| COMMUNITY/ ARE | Α | | 0 | COMMUNITY/ ARE | Α | | 0 | |
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| Gross Receipts Thir | d Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee Thire | d Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | scriber group | as shown in the boxe | es above. | \$ | | |

| LEGAL NAME OF OWI Blue Stream Cor | | | | | | S | 007219 | Name |
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| | BLOCK A: | COMPUTATION O | F BASE RA | TE FEES FOR EAC | CH SUBSCR | IBER GROUP | | |
| ONE HUNDRED F | ORTY-FIFTH | SUBSCRIBER GROU | Р | ONE HUNDRED | FORTY-SIXTH | SUBSCRIBER GROUP | Р | 0 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
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| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Sec | ond Group | \$ | 0.00 | |
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| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Sec | ond Group | \$ | 0.00 | |
| ONE HUNDRED FORT | ΓY-SEVENTH | SUBSCRIBER GROU | Р | ONE HUNDRED F | ORTY-EIGHTH | SUBSCRIBER GROUP | P | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ ARE | Α | | 0 | |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts Third | l Group | \$ | 0.00 | Gross Receipts Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee Third | l Group | \$ | 0.00 | Base Rate Fee Fou | rth Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | scriber group | as shown in the boxe | es above. | \$ | | |

| LEGAL NAME OF OW Blue Stream Co | | | | | | S | 007219 | Name |
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| | BLOCK A: 0 | COMPUTATION OF | BASE RA | ATE FEES FOR EACH | H SUBSCF | RIBER GROUP | | |
| ONE HUNDRED FO | RTY-NINTH | SUBSCRIBER GROU | JP | ONE HUNDRE | D FIFTIETH | SUBSCRIBER GRO | UP | 0 |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
| Base Rate Fee First | Group | \$ | 0.00 | Base Rate Fee Second | nd Group | \$ | 0.00 | |
| ONE HUNDRED F | IFTY-FIRST | SUBSCRIBER GROU | JP | ONE HUNDRED FIFT | Y-SECONE | SUBSCRIBER GRO | UP | |
| COMMUNITY/ AREA | Α | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Gross Receipts Third | d Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee Third | d Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
| Base Rate Fee: Add Enter here and in blo | | | riber group | as shown in the boxes | above. | \$ | | |

| LEGAL NAME OF OWNE Blue Stream Comr | | | | | | S | YSTEM ID# 007219 | Name |
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| BL ONE HUNDRED FIFT | | | | ATE FEES FOR EAC | | RIBER GROUP | ID | |
| COMMUNITY/ AREA | 1-11111CD | SOBSCINDEN GIVE | 0 | COMMUNITY/ AREA | | 1 SOBSCRIBER GROU | 0 | 9 |
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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 | |
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| Base Rate Fee First Gr | | \$ | 0.00 | Base Rate Fee Seco | | \$ | 0.00 | |
| ONE HUNDRED FIFT COMMUNITY/ AREA | TY-FIFTH | SUBSCRIBER GROU | JP 0 | ONE HUNDRED F | | I SUBSCRIBER GROU | JP 0 | |
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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 Four | th Group | \$ | 0.00 | |
| Base Rate Fee: Add the Enter here and in block | e base rat 3, line 1, s | e fees for each subso | criber group | as shown in the boxes | s above. | \$ | | |

| LEGAL NAME OF OW Blue Stream Cor | | | | | | S | 007219 | Name |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First | Group | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
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| Base Rate Fee First | | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | |
| | | SUBSCRIBER GROUP | | 11 | | SUBSCRIBER GROUP | _ | |
| COMMUNITY/ AREA | 4 | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Gross Receipts Third | d Group | \$ | 0.00 | Gross Receipts Fourt | h Group | \$ | 0.00 | |
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| Base Rate Fee Third | d Group | \$ | 0.00 | Base Rate Fee Fourt | h Group | \$ | 0.00 | |
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| otal DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| ross Receipts First G | Group | s 913 | ,488.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
| | | <u> </u> | , | | | · | | |
| | | | | | | | | |
| ase Rate Fee First G | iroup | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 | |
| | THIRD | SUBSCRIBER GRO | UP | | FOURTH | SUBSCRIBER GRO | UP | |
| OMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | ١ | | 0 | |
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| otal DSEs | DSE | CALL SIGN | DSE | CALL SIGN Total DSEs | DSE | CALL SIGN | DSE | |
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| otal DSEs Gross Receipts Third (| Group | | 0.00 | Total DSEs Gross Receipts Four | th Group | | 0.00 | |
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| otal DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| ross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Seco | nd Group | \$ | 0.00 | |
| · | · | , · | | | • | | | |
| ase Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
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| A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ITH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP | | | | | ons, LLC | R OF CABL | Blue Stream Com |
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| | - | | Total DSEs | 0.00 | | | Total DSEs |
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| \$ 0.00 Base Rate Fee Second Group \$ 0.00 | \$ | d Group | Base Rate Fee Seco | 0.00 | \$ | roup | Base Rate Fee First G |
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| | CALL SIGN | | CALL SIGN Total DSEs | 0.00 | | | CALL SIGN |
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| Name | YSTEM ID# 007219 | S` | | | | ons, LLC | | LEGAL NAME OF OWNE Blue Stream Comi |
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| | A: COMPUTATION OF THE SUBSCRIBER GRO | | TE FEES FOR EACH | | IBER GROUP SUBSCRIBER GRO | LID |
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| P. 1 F 5: 10 | | 0.00 | | | | 0.00 |
| se Rate Fee First Group | \$ | 0.00 | Base Rate Fee Seco | nd Group | \$ | 0.00 |
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| Name | YSTEM ID# 007219 | | | | | ons, LLC | municati | LEGAL NAME OF OWNE Blue Stream Comi |
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| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| Base Rate F | | | | | | | | |
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| | JP 0 | \$ SUBSCRIBER GROU | d Group Y-EIGHTH DSE | Base Rate Fee Secon TWENT COMMUNITY/ AREA CALL SIGN | JP 0 | \$ SUBSCRIBER GROU | DSE | TWENTY-S COMMUNITY/ AREA CALL SIGN |
| | 0.00 JP Ose O.00 O.00 | \$ SUBSCRIBER GROU | d Group Y-EIGHTH DSE | Total DSEs | JP O DSE O O O O O O | SUBSCRIBER GROUND CALL SIGN | DSE | TWENTY-S COMMUNITY/ AREA CALL SIGN Fotal DSEs |

| BI UCK / | · COMPLITATION O | E BASE DA | TE FEES FOR EACH | I SLIBSCP | IBER GROUD | | |
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| | H SUBSCRIBER GRO | | TT . | | SUBSCRIBER GRO | UP | _ |
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| CALL SIGN DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | Computation of |
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| otal DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| ross Receipts First Group | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
| 1033 Neccipis I list Gloup | Ψ | 0.00 | Oross receipts occor | па Огоар | * | 0.00 | |
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| ase Rate Fee First Group | 4 | 0.00 | Base Rate Fee Secon | nd Group | • | 0.00 | |
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| THIRTY-FIRS | | ' | | Y-SECOND | | • | |
| THIRTY-FIRST OMMUNITY/ AREA CALL SIGN DSE | | DUP | THIRT | Y-SECOND | | UP | |
| THIRTY-FIRS | ST SUBSCRIBER GRO | OUP 0 | THIRT COMMUNITY/ AREA | Y-SECOND | SUBSCRIBER GRO | UP 0 | |
| THIRTY-FIRS | ST SUBSCRIBER GRO | OUP 0 | THIRT COMMUNITY/ AREA | Y-SECOND | SUBSCRIBER GRO | UP 0 | |
| THIRTY-FIRS | ST SUBSCRIBER GRO | OUP 0 | THIRT COMMUNITY/ AREA | Y-SECOND | SUBSCRIBER GRO | UP 0 | |
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| THIRTY-FIRS | ST SUBSCRIBER GRO | DUP DSE | THIRT COMMUNITY/ AREA CALL SIGN | Y-SECOND | SUBSCRIBER GRO | DSE | |
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| THIRTY-FIRS | ST SUBSCRIBER GRO | DUP DSE | THIRT COMMUNITY/ AREA CALL SIGN | Y-SECOND DSE | SUBSCRIBER GRO | DSE | |
| THIRTY-FIRS OMMUNITY/ AREA CALL SIGN DSE Dotal DSEs | CALL SIGN | DUP DSE O.00 | THIRT COMMUNITY/ AREA CALL SIGN Total DSEs | Y-SECOND DSE | SUBSCRIBER GRO | DSE | |

| EGAL NAME OF OWNER Blue Stream Comm | | | | | | S | YSTEM ID# 007219 | Name |
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| | Y-THIRD | SUBSCRIBER GROU | | | | SUBSCRIBER GROU | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secon | nd Group | \$ | 0.00 | |
| | | | | | | | | |
| Base Rate Fee First Gr | | \$ | 0.00 | Base Rate Fee Secon | | \$ | 0.00 | |
| THIRT | Y-FIFTH | SUBSCRIBER GROU | | THI | RTY-SIXTH | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | |
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| Gross Receipts Third G | roup | \$ | 0.00 | Gross Receipts Fourth | h Group | \$ | 0.00 | |
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| | | • | | 11 | | I | 1 1 | |
| se Rate Fee Third G | roup | \$ | 0.00 | Base Rate Fee Fourth | h Group | \$ | 0.00 | |

| Name | YSTEM ID# 007219 | | | | | ons, LLC | | LEGAL NAME OF OWNE Blue Stream Comi |
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| | | | | TE FEES FOR EACH | | | | |
| 9 | | SUBSCRIBER GROU | Y-EIGHTH | | | SUBSCRIBER GROU | SEVENTH | |
| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
| of | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN |
| Base Rate F | | | | | | - | | |
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| | 0.00 JP 0 | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon COMMUNITY/ AREA | JP 0 | \$ SUBSCRIBER GROU | Y-NINTH | THIRT |
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| al DSEs | | 0.00 | Total DSEs | | | 0.00 | |
| oss Receipts First Group \$ | . | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| | • | | | | <u>-</u> | | |
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| se Rate Fee First Group | . | 0.00 | Base Rate Fee Second | d Group | \$ | 0.00 | |
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| FORTY-THIRD S | UBSCRIBER GROU | JP | FORTY | ′-FOURTH | SUBSCRIBER GROU | JP | |
| | UBSCRIBER GROU | | ii | -FOURTH | SUBSCRIBER GROU | JP 0 | |
| FORTY-THIRD S | UBSCRIBER GROU | JP 0 | FORTY COMMUNITY/ AREA | ′-FOURTH | SUBSCRIBER GROU | | |
| MMUNITY/ AREA | | 0 | COMMUNITY/ AREA | | | 0 | |
| | UBSCRIBER GROU | | ii | -FOURTH | SUBSCRIBER GROU | | |
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| MMUNITY/ AREA | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Name | YSTEM ID# 007219 | S' | | | | | | LEGAL NAME OF OWNE Blue Stream Comi |
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| 9 | | SUBSCRIBER GROU | RTY-SIXTH | | | SUBSCRIBER GROU | TY-FIFTH | |
| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| 9 | | SUBSCRIBER GROU | FIFTIETH | | | SUBSCRIBER GROU | ΓY-NINTH | |
| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | JP 0 | \$ SUBSCRIBER GROU | d Group | Base Rate Fee Secon FIFTY COMMUNITY/ AREA CALL SIGN | JP 0 | SUBSCRIBER GROU | TY-FIRST DSE | FIF |
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| Name | YSTEM ID# 007219 | | | | | ons, LLC | | LEGAL NAME OF OWNE Blue Stream Comi |
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| 9 | | SUBSCRIBER GROU | '-FOURTH | | | SUBSCRIBER GROU | ry-third | |
| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| PRATE FEE First Group ONE HUNDRED ELEVENTH S IMUNITY/ AREA | \$ SUBSCRIBER GROU | 0.00 JP 0 | Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA | d Group | \$ SUBSCRIBER GROU | 0.00 UP | |
| PRATE FEE FIRST GROUP DIE HUNDRED ELEVENTH S IMUNITY/ AREA LL SIGN DSE DSE | \$ SUBSCRIBER GROU | 0.00 JP O DSE | Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA CALL SIGN | d Group TWELVTH DSE | \$ SUBSCRIBER GROU | 0.00 UP DSE | |
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| PRATE FEE FIRST GROUP ONE HUNDRED ELEVENTH S IMUNITY/ AREA LL SIGN DSE IDSE I DSEs S Receipts Third Group | SUBSCRIBER GROU | 0.00 JP | Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs | d Group TWELVTH DSE | SUBSCRIBER GROUND CALL SIGN | 0.00 UP | |

| Name | YSTEM ID# 007219 | | | | | | | Blue Stream Comr |
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| NI | YSTEM ID# 007219 | S | | | | | | LEGAL NAME OF OWNE Blue Stream Comr |
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| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| LEGAL NAME OF OWNER Blue Stream Comr | | | | | | S | YSTEM ID# 007219 | Name |
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| | | | BASE RA | TE FEES FOR EACH | | | | |
| ONE HUNDRED TWEN | TY-FIRST | SUBSCRIBER GROUP | | ONE HUNDRED TWENT | Y-SECONE | SUBSCRIBER GROUP | | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
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| Total DSEs | | | 0.00 | Total DSEs | | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Second | d Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Second | l Group | \$ | 0.00 | |
| ONE HUNDRED TWEN | TY-THIRD | SUBSCRIBER GROUP | | ONE HUNDRED TWENT | Y-FOURTH | SUBSCRIBER GROUP |) | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | |
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| Base Rate Fee: Add the Enter here and in block | | | riber group | as shown in the boxes a | bove. | \$ | | |

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| LEGAL NAME OF OWNE Blue Stream Comr | | | • | | | S | 007219 | Name |
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| | | | BASE RA | TE FEES FOR EAC | H SUBSCF | RIBER GROUP | | |
| ONE HUNDRED TWEN | TY-NINTH | SUBSCRIBER GROUP | | ONE HUNDRE | D THIRTIETH | H SUBSCRIBER GROUP |) | 9 |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | 0 | Computation |
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| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Seco | ond Group | \$ | 0.00 | |
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| | 0.00 | \$ | d Group | Gross Receipts Second | 0.00 | \$ | oup | ross Receipts First Gr |
| | 0.00 | \$ | | Gross Receipts Second Base Rate Fee Second | 0.00 | \$ | | |
| | 0.00 | \$ | l Group | Base Rate Fee Second | 0.00 | \$ | oup | ase Rate Fee First Gr |
| | 0.00 | \$ | l Group | Base Rate Fee Second ONE HUNDRED THIR | 0.00 | \$ | oup | ase Rate Fee First Gr |
| | 0.00 | \$ | l Group | Base Rate Fee Second | 0.00 | \$ | oup | ase Rate Fee First Gr |
| | 0.00 JP 0 | \$ SUBSCRIBER GROU | l Group TY-SIXTH | Base Rate Fee Second ONE HUNDRED THIR COMMUNITY/ AREA | 0.00 JP 0 | SUBSCRIBER GROU | TY-FIFTH | ase Rate Fee First Gr NE HUNDRED THIR OMMUNITY/ AREA |
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| | 0.00 JP 0 | \$ SUBSCRIBER GROU | l Group TY-SIXTH | Base Rate Fee Second ONE HUNDRED THIR COMMUNITY/ AREA | 0.00 JP 0 | SUBSCRIBER GROU | TY-FIFTH | Gross Receipts First Gross Rate Fee First Gross Rate Fee First Grons Rate Fee First Gross Rate Fee First Gross Rate Fee First Gross Rate Fee First Grons Rate Fee First Gross Rate Fee First Gross Rate Fee First Grons Rat |
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| | 0.00 JP | SUBSCRIBER GROU | d Group TY-SIXTH DSE | Dase Rate Fee Second ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN Total DSEs | 0.00 JIP DSE 0.00 | SUBSCRIBER GROU | DSE | ase Rate Fee First Gr NE HUNDRED THIR OMMUNITY/ AREA CALL SIGN otal DSEs |
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| Name | YSTEM ID# 007219 | S' | | | | | | LEGAL NAME OF OWNE Blue Stream Comr |
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| | | IBER GROUP | SUBSCRI | TE FEES FOR EACH | | | | |
| 9 | | SUBSCRIBER GROUP | Y-EIGHTH | | | SUBSCRIBER GROUP | SEVENTH | ONE HUNDRED THIRTY- |
| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| | 0.00 | | Group | Base Rate Fee Second | 0.00 | \$ | oup | Base Rate Fee First Gr |
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| | | IBER GROUP | SUBSCRI | TE FEES FOR EACH | BASE RA | COMPUTATION OF | OCK A: C | BL |
| 9 | 1 | SUBSCRIBER GROUP | Y-SECOND | | | SUBSCRIBER GROUP | RTY-FIRST | ONE HUNDRED FOR |
| Computation | 0 | | | COMMUNITY/ AREA | 0 | | | COMMUNITY/ AREA |
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| Base Rate F | | | | | | | | |
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| | | | | Gross Receipts Secor | 0.00 | \$ | oup | Gross Receipts First Gr |
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Nonpermitted 3.75 Stations

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| DSE of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant Stations 0.00 0.00 0.00 | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | |
| and Syndicate Exclusivit Surcharge for Partially Distant Stations 0.00 0.00 0.00 | | | | | | | | |
| Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 | | | | | | | | |
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| 0.00 | | | Total DSEs | 0.00 | | | otal DSEs | |
| 0 | Gross Receipts Second Group \$ 0.00 | | | | \$ | roup | Gross Receipts First Gro | |
| | \$ | d Group | Base Rate Fee Secon | 0.00 | Base Rate Fee First Group \$ 0.00 | | | |
| | SUBSCRIBER GROUP | TY-EIGHTH | ONE HUNDRED FOR |) | SUBSCRIBER GROU | -SEVENTH | NE HUNDRED FORTY- | |
| DSE | COMMUNITY/ AREA 0 | | | | | | COMMUNITY/ AREA | |
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| 0.00 | \$ | | | 0.00 | | | | |

| Blue Stream Comm | | LE SYSTEM: ons, LLC | | | | S | YSTEM ID# 007219 | Name |
|-------------------------|----------|------------------------|---------|-----------------------|----------|-----------------|---------------------|----------------------|
| BL | OCK A: (| COMPUTATION OF | BASE RA | TE FEES FOR EACH | SUBSCR | RIBER GROUP | | |
| ONE HUNDRED FORT | Y-NINTH | SUBSCRIBER GROU | JP | ONE HUNDREI | 0 | | | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA 0 | | | | 9 Computation |
| CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | CALL SIGN | DSE | of |
| | | | | | | | | Base Rate Fee |
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| Total DSEs | | | 0.00 | Total DSEs | • | | 0.00 | |
| Gross Receipts First Gr | oup | \$ | 0.00 | Gross Receipts Secor | nd Group | \$ | 0.00 | |
| Base Rate Fee First Gr | oup | \$ | 0.00 | Base Rate Fee Secon | nd Group | \$ | 0.00 | |
| ONE HUNDRED FIFT | Y-FIRST | SUBSCRIBER GROU | IP | ONE HUNDRED FIFT | Y-SECOND | SUBSCRIBER GROU | JP | |
| COMMUNITY/ AREA | | | 0 | COMMUNITY/ AREA | | | | |
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| Total DSEs | DSE | CALL SIGN | | | DSE | CALL SIGN | | |
| Total DSEs | | CALL SIGN | DSE | CALL SIGN | | CALL SIGN | DSE | |
| | roup | | DSE | CALL SIGN Total DSEs | n Group | S S | DSE | |

| Name | 907219 | LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | | |
|---------------------------|-------------------|---|----------|---|---|-----------------------------------|----------|--|--|--|--|
| | | | | TE FEES FOR EACI | | | | | | | |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC 007219 | | | | | | | | Name |
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| Base Rate Fee: Add the Enter here and in block | | | riber group | as shown in the boxes a | above. | \$ | | |

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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Blue Stream Communications, LLC 007219 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Blue Stream Communications, LLC 007219 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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