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

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY				
DATE RECEIVED AMOUNT				
2-23-21	\$ ALLOCATION NUMBER			

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:							
Accounting Period	2020/2							
Period	Instructions:							
B Owner	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.							
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
	BLUE RIDGE CABLE TECHNOLOGIES INC							
	Blue Ridge Communications							
				2795320202				
				27953 2020/2				
	PO BOX 215							
	PALMERTON, PA 18071							
	INSTRUCTIONS: In line 1, give any business or trade names used to	identify the busine	ess and operation of the sv	stem unless these				
C	names already appear in space B. In line 2, give the mailing address of	•						
System	1 IDENTIFICATION OF CABLE SYSTEM:							
	MAILING ADDRESS OF CABLE SYSTEM:							
	MAILING ADDRESS OF CABLE STSTEM.							
	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	y only the fret com	munity served below and r	relist on page 1h				
Area	with all communities.	y orny the hot con	initiality served below and i	clist on page 15				
Served	CITY OR TOWN	STATE						
First	MILFORD	PA						
Community	Below is a sample for reporting communities if you report multiple ch	annel line-ups in	Space G.					
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#				
Sample	Alda	MD	Α	1				
Jampie	Alliance	MD	В	2				
	Gering	MD	В	3				

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this 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 Office'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.

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:

BLUE RIDGE CABLE TECHNOLOGIES INC

27953

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 filings.

Area Served

D

Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.

If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).

When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
MILFORD	PA	AB	2
BERLIN TOWNSHIP	PA	AA	1
BETHANY	PA	AA	1
BLOOMING GROVE TOWNSHIP	PA	AB	4
CHERRY RIDGE TOWNSHIP	PA	AA	1
CLIFTON TOWNSHIP	PA	AA	1
COOLBAUGH TOWNSHIP	PA	AA	3
DAMASCUS	PA	AA	1
DAMASCUS TOWNSHIP	PA	AA	1
DELAWARE TOWNSHIP	PA	AB	2
DINGMAN TOWNSHIP	PA	AB	2
DREHER TOWNSHIP	PA	AA	1
DYBERRY TOWNSHIP	PA	AA	1
GOULDSBORO	PA	AA	1
GREENE TOWNSHIP	PA	AB	4
HAWLEY	PA	AA	1
HEMLOCK FARMS	PA	AB	4
HONESDALE	PA	AA	1
LACKAWAXEN TOWNSHIP	PA	AB	4
LEHIGH TOWNSHIP	PA	AA	1
MILFORD TOWNSHIP	PA	AB	2
PALMYRA TOWNSHIP	PA	AB	4
PAUPACK TOWNSHIP	PA	AA	1
PORTER TOWNSHIP	PA	AB	4
SHOHOLA TOWNSHIP	PA	AB	4
TEXAS TOWNSHIP	PA	AA	1

First Community

See instructions for additional information on alphabetization.

Add rows as necessary.

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

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

BLUE RIDGE CABLE TECHNOLOGIES INC

SYSTEM ID#
27953

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOCK 2			
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
 Service to first set 	20,344	\$36.80/Mth				
 Service to additional set(s) 	35,233	\$.50/Mth				
 FM radio (if separate rate) 						
Motel, hotel						
Commercial	546	\$36.80/Mth				
Converter						
 Residential 						
 Non-residential 						
					İ	

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		BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RAT	TE
Continuing Services:		Installation: Non-residential			
• Pay cable	\$16.95/Mth	Motel, hotel			
 Pay cable—add'l channel 	\$13.00/Mth	Commercial			
Fire protection		• Pay cable			
Burglar protection		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
• First set	\$ 49.95	Burglar protection			
 Additional set(s) 		Other services:			
• FM radio (if separate rate)		• Reconnect	\$ 49.95		
Converter		Disconnect			
		Outlet relocation			
		Move to new address			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AF 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL** SIGN OF (Yes or No) CARRIAGE **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 Transmitters:** 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 **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 3. TYPE 4. DISTANT? 1. CALL 2. B'CAST 5. BASIS OF 6. LOCATION OF STATION **SIGN CHANNEL** OF (Yes or No) **CARRIAGE NUMBER STATION** (If Distant) WABC 7 Ν YES 0 **NEW YORK, NY WBRE** 28 Ν NO WILKES-BARRE, PA See instructions for additional information WBRE-2 28.2 ı NO **WILKES-BARRE, PA** on alphabetization. WBRE-3 28.3 **WILKES-BARRE, PA** ı NO **WNEP** 16 Ν NO WILKES-BARRE, PA **WNET** Ε 0 13 YES **NEW YORK, NY WOLF 56** ı NO WILKES-BARRE, PA WPVI Ν 6 YES 0 PHILADELPHIA, PA **WQMY** 53 ı NO WILLIAMSPORT, PA **WQPX** 64 I NO SCRANTON, PA **WSWB** 38 ı NO SCRANTON, PA **WVIA** Ε 44 YES 0 WILKES-BARRE, PA **WWOR** 9 0 ı YES **NEW YORK, NY WYOU** 22 Ν NO **WILKES-BARRE, PA** WNEP-2 NO WILKES-BARRE, PA 16.2 ı WSWB-2 38.2 I SCRANTON, PA NO WSWB-3 38.3 NO SCRANTON, PA NO

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BLUE RIDGE CABLE TECHNOLOGIES INC** 27953 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.

		CHANN	EL LINE-UP	AB	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WABC	7	N	YES	0	NEW YORK, NY
WCBS	2	N	YES	0	NEW YORK, NY
WJLP	3	I	NO		MIDDLETOWN, NJ
WMBC	63	I	NO		NEWTON, NJ
WNBC	4	N	NO		NEW YORK, NY
WNEP	16	N	NO		WILKES-BARRE, PA
WNET	13	Е	YES	0	NEW YORK, NY
WNJU	47	I	NO		LINDEN, NJ
WNYW	5	I	NO		NEW YORK, NY
WOLF	56	I	NO		WILKES-BARRE, PA
WPIX	11	I	NO		NEW YORK, NY
WVIA	44	Е	YES	0	WILKES-BARRE, PA
WWOR	9	I	NO		NEW YORK, NY
WNEP-2	16.2	I	NO		WILKES-BARRE, PA
WBRE-2	28.2	I	NO		WILKES-BARRE, PA
					

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AC 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AD 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AE 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AG 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AH 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AI 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AJ 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL** SIGN OF (Yes or No) CARRIAGE **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AK 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AL 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AM 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AN 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AO 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AP 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AQ 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AR 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AS 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AT 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL** SIGN OF (Yes or No) CARRIAGE **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AU 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AV 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** 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 AW 4. DISTANT? 2. B'CAST 3. TYPE 5. BASIS OF 1. CALL 6. LOCATION OF STATION **CHANNEL CARRIAGE** SIGN OF (Yes or No) **NUMBER STATION** (If Distant)

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 27953 **BLUE RIDGE CABLE TECHNOLOGIES INC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary Transmitters:** receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. **Column 2:** State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). **CALL SIGN** AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF OWNER OF BLUE RIDGE CABLE T						S	YSTEM ID# 27953	Name
SUBSTITUTE CARRIAGE	E. SDECIA	I STATEME	NT AND PROCEAM LO	3				
In General: In space I, ident substitute basis during the a explanation of the programm form.	ify every no	nnetwork televi eriod, under spe	sion program broadcast by ecific present and former F0	a distant stati CC rules, regu	ılations, or author	rizations.	. For a further	Substitute
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE								
During the accounting per broadcast by a distant stat	•	ır cable system	n carry, on a substitute bas	is, any nonne		prograr Yes		Special Statement and Program Log
Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUTE			ge blank. If your answer is	"Yes," you m	ust complete the	e prograi	m	
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Car Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	ce, please of every no distant state gulations, of tion. Do not be used to a distant station was broad sign of the station adian station thand day we "5/7." The swhen the Example: a ser "R" if the and regulation ogramming	attach addition nnetwork televion and that your authorization of use general as Basketball: deast live, enterstation broadcation's location (thous, if any, the when your system of a program carrolisted program ons in effect design and the state of the program ons in effect design and the state of the st	rision program (substitute pour cable system substitute pour cable system substitute ins. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." or "Yes." Otherwise enter "Pasting the substitute programe community to which the community with which the other carried the substitute or gram was carried by your fied by a system from 6:01:	program) that ed for the programins instruction is lice station is lice program. Use cable system 15 p.m. to 6:2 amming that ed; enter the less to for the program in the less to for the program in the less to for the less	ensed by the FContified). List the times a 28:30 p.m. should your system was etter "P" if the list	ounting other stane paper rogram C or, in the more accurate ld be a require ted pro	ntion nth	
S	UBSTITUT	E PROGRAM	1		EN SUBSTITUT		7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES		FOR DELETION	
					—			
					_			
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					_	_		
					_			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **BLUE RIDGE CABLE TECHNOLOGIES INC** 27953 **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-J 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 **Part-Time** column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. • Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give • State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS **HOURS FROM FROM** TO DATE TO DATE

LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
BLU	JE RIDGE CABLE TECHNOLOGIES INC		27953	Name
Inst all a (as i	POSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions.	ondary transmi	ssion service	K Gross Receipts
IMP	Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amount	4,805,763.42 of gross receipts)	
InstruComIf you fee toIf you	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: aplete block 1, showing your minimum fee. aplete block 2, showing whether your system carried any distant television stations. are system did not carry any distant television stations, leave block 3 blank. Enter the are arom block 1 on line 1 of block 4, and calculate the total royalty fee. are system did carry any distant television stations, you must complete the applicable parampanying this form and attach the schedule to your statement of account.			Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be $k \mid 3$ below.	e entered on lir	ne 1 of	
▶ If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be ϵ low.	entered 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 line	
1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064			
	Enter the result here.			
	This is your minimum fee.	\$	51,133.32	
2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule. No—Leave block 3 below blank and column to the period Yes—Complete the DSE schedule.	od?	check block 4.	
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero	_ \$	25,930.45	
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		13,192.82	
	Line 3. Add lines 1 and 2 and enter here	\$	39,123.27	
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 Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	\$	51,133.32 0.00	Cable systems submitting additional
	zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$	725.00	the Licensing additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	51,858.32	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	f the	auditional lees.

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	BLUE RIDGE CABLE TECHNOLOGIES INC	27953
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Chameis	1. Enter the total number of channels on which the cable system carried television broadcast stations	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name Carl Litwin Telephone 610-826-9109	
	Address PO Box 215 (Number, street, rural route, apartment, or suite number)	
	Palmerton, Pa 18071 (City, town, state, zip)	
	Email clitwin@pencor.com Fax (optional)	
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	m
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	/s/ David L. Masenheimer	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the 'button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	"F2"
	Typed or printed name: David Masenheimer	
	Title: President (Title of official position held in corporation or partnership)	·······
	Date: February 3, 2021	

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 this 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.

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	EM ID#	Mana				
BLUE RIDGE CABLE TECHNOLOGIES INC	27953	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 (viii) of the general instructions in the						
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.		Concerning Gross Receipts Exclusion				
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?						
X NO						
YES. Enter the total here and list the satellite carrier(s) below						
Name Mailing Address 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 underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.		Q				
Line 1 Enter the amount of late payment or underpayment		Interest Assessment				
Line 2 Multiply line 1 by the interest rate* and enter the sum here						
Line 3 Multiply line 2 by the number of days late and enter the sum here	days -					
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,						
space L, (page 7)	-					
(interest charge)						
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.						
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.						
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original 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 this 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: 2020/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM I					
T .	BLUE RIDGE CABLE TE	CHNOLOGIE	S INC			27953
	SUM OF DSEs OF CATEGOR		IS:			
	 Add the DSEs of each station Enter the sum here and in line 		2.25			
		1 of part 5 of time	s soriculic.		L.EU	
2	Instructions: In the column headed "Call S	ian": list the cal	I signs of all distant stations	identified by t	he letter "O" in column 5	
	of space G (page 3).					
Computation of DSEs for	In the column headed "DSE"			as "1.0"; for	each network or noncom-	
Category "O"	mercial educational station, giv	e the DSE as .2	:5. CATEGORY "O" STATION	IS: DSFs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WABC	0.250				
	WCBS	0.250				
	WNET	0.250				
	WPVI	0.250	***************************************			
A alal	WVIA	0.250				
Add rows as necessary.	WWOR	1.000				
Remember to copy						
all formula into new	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
rows.						

			=
	I		

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

Nama	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:						S	YSTEM ID#		
Name	BLUE RIDGE CABLE TECHNOLOGIES INC								27953		
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.										
Capacity		CATEGORY LAC STATIONS: COMPUTATION OF DSEs									
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE		5. TYPE VALUE	6. DS	SE		
			÷		=	X		=			
			÷ ÷			x x		=			
			÷		=	x		=			
			÷		=	x		=			
			÷		=	x		=			
			÷		=	X		=			
			÷		=	Х		=			
	SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule,										
Computation of DSEs for Substitute-Basis Stations	 Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 for 										
	SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs										
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	_	1. CALL SIGN	2. NUM OF PRO	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE		
				=			÷		=		
		-		=			÷ .		=		
				=			÷ ÷		=		
				=					=		
		=		=			÷		=		
	Add the DSEs	of SUBSTITUTE-BASI of each station. um here and in line 3 of p		dule,			0.00				
5		ER OF DSEs: Give the ams applicable to your system		xes in parts 2, 3, and	4 of this schedul	e and add ther	m to provide t	he total			
Total Number	1. Number o	1. Number of DSEs from part 2 ● ▶									
of DSEs	2. Number of DSEs from part 3 ● ▶										
	3. Number of DSEs from part 4 ● D.00										
							Γ				
	TOTAL NUMBE	ER OF DSEs					<u> </u>		2.25		

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/2

	OWNER OF CABLE S		INC				S	YSTEM ID# 27953	Namo
In block A: • If your answer if schedule.	ck A must be comp "Yes," leave the re "No," complete blo	emainder of pa	below.	7 of the DSE sched		complete part	t 8, (page 16) of th	e	6 Computation of
effect on June 24, Yes—Com	, 1981?	utside of all m	najor and smal	ller markets as defir	ned under sec		CC rules and regu	lations in	3.75 Fee
		BLOC	CK B: CARF	RIAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulations on DSE Sched	ns prior to Jur dule. (Note: Th	part 2, 3, and 4 of the 25, 1981. For furne letter M below ref	ther explanati	ion of permitte	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carried 76.61(b)(c)] B Specialty station C Noncommericate D Grandfathered instructions for E Carried pursuate *F A station previous and the previous	les and regulated pursuant to on as defined all educational station (76.6 or DSE scheduant to individuationally carried	ations cited be to the FCC man in 76.5(kk) (76.55) I station [76.55) (see paragule). It waiver of F6 d on a part-time ithin grade-B control of the factor of	ne or substitute basi contour, [76.59(d)(5	e in effect on 5.57, 76.59(b),)(1), 76.63(a) 3(a) referring stitution of gra-	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered sta	6.63(a) referring to 6.61(e)(1) ations in the		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of etter "F" in column 2			orksheet on page 1	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	
WCBS	D	0.25							
WABC	D	0.25							
WNET	C	0.25							
WVIA	D	0.25							
WWOR	Α	1.00							
	, <mark></mark>								
								2.00	
		B	LOCK C: CC	OMPUTATION OF	- 3.75 FEE				
Line 1: Enter the	e total number of l	DSEs from p	part 5 of this	schedule					
Line 2: Enter the	e sum of permitted	d DSEs from	ı block B abo)Ve					
				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	oss receipts from	space K (pa	ıge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375 a	nd enter sur	n here				x		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DSE	Es from line (3						If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# BLUE RIDGE CABLE TECHNOLOGIES INC 27953										
	CALL	2. PERMITTED BASIS		A: TELEVIS 1. CALL SIGN	2. PERMITTED BASIS		UED) 1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
		D/ (010		0.0.1	<i>D</i> /(0.10			2, (0.10		Computation of 3.75 Fee
										001.00

					,			•		

Name	BLUE RIDGE C			NC					S	27953					
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 198 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designate statement of account on fle in the Licensing Division.														
	Statement of accoun	PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS													
					D										
	1. CALL SIGN	2. PRIC DSE		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE					
7	Instructions: Block A	A must be com	pleted.												
Computation	In block A: If your answer is	"Yes," comple	ete blocks B and C,	below.											
of the	If your answer is	"No," leave blo	ocks B and C blan	k and complete	ра	urt 8 of the DSE schedu	ıle.								
Syndicated			BLOC	K A: MAJOR	TE	ELEVISION MARK	ET								
Exclusivity Surcharge	• Is any portion of the o	cable system w	vithin a top 100 maj	or television ma	rke	et as defned by section 7	76.5 of FCC	rules in effect	June 24,	1981?					
	Yes—Complete	•				No—Proceed to									
	BLOCK B: Ca	arriage of VHF	Grade B Contour	Stations		BLOCK	(C: Compu	ıtation of Exem	npt DSEs	S					
	Is any station listed in commercial VHF stati or in part, over the ca	block B of pa on that places	rt 6 the primary str	eam of a		Was any station listed nity served by the cab to former FCC rule 76.	in block B le system p	of part 7 carrie	ed in any	commu-					
	l	tation below with	h its appropriate peri part 8.	mitted DSE		Yes—List each sta X No—Enter zero ar	ation below		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 RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	4,805,763.42	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. 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	SE	
	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)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
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)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE PAGE 16

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name		BLUE RIDGE CABLE TECHNOLOGIES INC	27953
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	
	Inetru	ctions:	
8	You m	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 checked "Yes," use the total number of DSEs from part 5.	part
		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of		ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	Now
Base Rate Fee	blank		NOW
		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	cal
		e area," see page (v) of the general instructions.	Jai
	• Did v	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	_	vour 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.	
		<u> </u>	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
		(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank.	
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	

U.S. Copyright Office

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF COMPUTE OF COLUMN	VOTEM		0./0=====	
LEGAL NAME OF OWNER OF CABLE S'			SYSTEM ID#	Name
BLUE RIDGE CABLE TECHN	OLOGIES INC		27953	
Section If the figure in section 2 is more	than 4.000, compute your base rate fee here	e and leave section 3 blank.		
4				8
A. Enter 0.01064 of gross i	-	. ^		O
(the amount in section 1)	<u> </u>		
B. Enter 0.00701 of gross i	receipts			Computation
(the amount in section 1) <u> </u>			of
C Multiply line B by 3 000	and enter here	▶\$		Base Rate Fee
G. Walapiy line B by 0.000	and enter here	<u> </u>		
D. Enter 0.00330 of gross i				
(the amount in section 1) <u> </u>			
E. Subtract 4.000 from total	ıl DSEs			
(the figure in section 2)	and enter here			
F. Multiply line D by line F.	and enter here	► ¢		
F. Multiply line D by line E	and enter here	<u> </u>		
G. Add lines A, C, and F. T	•			
Base Rate Fee	3, line 1, space L (page 7)	> \$	0.00	
IMPORTANT: It is no longer necess	ary to report television signals on a syster	m-wide basis. Carriage of television bro	adcast signals	
•	unity-by-community basis (subscriber gro	oups) if the cable system reported multip	ole channel line-	9
ups in Space G.	corried were partially distant, the statute	allows you in computing your book ret	o foo to ovoludo	O
	carried were partially distant, the statute thin the station's local service area, from y			Computation
this exclusion, you must:	•		· ·	of Base Rate Fee
First: Divide all of your subscribers i	nto subscriber groups, each group consis	sting entirely of subscribers that are dist	ant to the same	and
station or the same group of stations	. Next: Treat each subscriber group as if i	it were a separate cable system. Deter	mine the number of	Syndicated Exclusivity
	i's gross receipts attributable to that group ate fees for each subscriber group. That to	•	• .	Surcharge
	5 .	•		for Partially
must also compute a Syndicated Exc	stem is located within the top 100 televisi clusivity Surcharge for each subscriber gro olly located outside all major television ma	oup. In this case, complete both block		Distant Stations, and
How to Identify a Subscriber Grou	p for Partially Distant Stations			for Partially Permitted
-	determine the local service area of each	wholly distant and each partially distan	t station you	Stations
carried to that community.				
•	each partially distant station you carried, on ea. A subscriber located outside the local set to the subscriber.)	•		
-	subscriber groups according to the compl			
• .	ly of subscribers who are distant to exactly group when the distant stations it carried	•		
Computing the base rate fee for easubscriber groups.	ach subscriber group: Block A contains	separate sections, one for each of you	r system's	
In each section:				
• Identify the communities/areas repr		ont that is each station that is distant	to all of the	
subscribers in the group.	ations in the subscriber group's compleme	ent—that is, each station that is distant	to all of the	
• If:	ide all major and amplies tales delegated as a series	oto, givo opeh etetion's DOE	ro it in norte 0.0	
and 4 of this schedule; or,	ide all major and smaller television marke	ets, give each station's DSE as you gav	е п п рапѕ∠, 3,	
, ,	ed in a major or smaller televison market	, give each station's DSE as you gave	t in block B,	
Add the DSEs for each station. This	s gives you the total DSEs for the particula	ar subscriber group.		
 Calculate gross receipts for the sub in the paper SA3 form. 	oscriber group. For further explanation of o	gross receipts see page (vii) of the gen	eral instructions	
 Compute a base rate fee for each spage. In making this computation, us 	subscriber group using the formula outline se the DSE and gross receipts figure appl f stations and total gross receipts from the	licable to the particular subscriber grou	p (that is, the total	

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

LEGAL NAME OF OWNE BLUE RIDGE CAB			;			SY	STEM ID# 27953	Name
E	BLOCK A:	COMPUTATION	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GR	OUP		SECOND	SUBSCRIBER GROUP)	
COMMUNITY/ AREA	Wayne	County		COMMUNITY/ AREA	Milford,	Delaware Twp,Ding	ıman Twp	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
WABC	0.25							Base Rate Fee
WNET	0.25			***************************************				and
WWOR	1.00							Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			1.50	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 1,4	07,233.70	Gross Receipts Seco	ond Group	\$ 1,16	<u>4,457.75</u>	
Base Rate Fee First G	roup	\$	19,905.32	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	OUP		FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA	Coolba	ugh Township		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WABC	0.25			WNET	0.25			
WNET	0.25							
WWOR	1.00							
Total DSEs			1.50	Total DSEs			0.25	
Gross Receipts Third G	Sroup	•	7,183.10	Gross Receipts Four	th Group	\$ 2,22	6,888.87	
Cross Receipts Tillia C	лоир	Ψ	7,100.10	TOTOGS NECEIPIS FOUI	ат Отоар	Ψ 2,22	-,000.0 <i>1</i>	
Base Rate Fee Third G	ase Rate Fee Third Group \$ 101.60				Base Rate Fee Fourth Group \$ 5,923.52			
Base Rate Fee: Add th			scriber group a	as shown in the boxes a	above.			
Enter here and in block	3, line 1, sp	pace L (page 7)				\$ 2	5,930.45	

		BED CDOUD	SI IDSC Dir	TE FEES FOR EACH	BVCEDV		OCK 4. /	DI
	IP	SUBSCRIBER GROU				SUBSCRIBER GROU		Di
9				COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and			-					
Syndica Exclusiv			-					
Surcha								
for								
Partial			-					
Distar Station			-					
Station			-					
	0.00	•	l	Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	•	ouro.	Bross Receipts First Gro
	0.00	Φ	u Group	Gross Receipts Secon	0.00	•	σαρ	ross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro
	IP	SUBSCRIBER GROU	EIGHTH		Р	SUBSCRIBER GROU	EVENTH	S
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			-					
			-					
			-					
			-					
			-					
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	oup	ross Receipts Third G
	0.00	\$	Group	Base Rate Fee Fourth	0.00	s	oup	Base Rate Fee Third G
		r c	Group	ase Rate Fee Fourth	НΒ	0.00 IIB	\$ 0.00 B	roup I\$ 0.00 I IIB

		COMPUTATION (I SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GRO	ID	
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicate
								Exclusivi
								Surcharg for
								Partially
								Distant
								Stations
otal DSEs		11	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	
	ELEVENTH	I SUBSCRIBER GRO	DUP		TWELVTH	I SUBSCRIBER GRO	JP	
COMMUNITY/ AREA		- COBCONIBLINGING	0	COMMUNITY/ ARE		. Goboonibert Greek	0	
70 W. W. C.								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		11	0.00	-		П	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	d Group	s	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
	F		3.30				5.55	
					·			
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.			

BLUE RIDGE CA	ABLE TEC	HNOLOGIES INC	;				27953	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		††		SUBSCRIBER GROU	UP 0	9
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								for
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								Distant
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
, , , , , , , , , , , , , , , , , , ,						<u>*</u>		
ase Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FIFTEENTH	SUBSCRIBER GRO)UP		SIXTEENTH	SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		Ш	_					
otal DSEs			0.00	Total DSEs			0.00	
Fross 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	
	•		-				- 1	
			criber group	as shown in the boxes	above.			
inter here and in bl	оск 3, line 1, s	space L (page 7)				\$		

ī	ID.			TE FEES FOR EACH				
<u> </u>		SUBSCRIBER GROU	HTEENTH	l†		SUBSCRIBER GRO	NIEENTH	
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and		-						
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SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
SE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	
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<u>OO</u>	0.00							Fotal DSEs
00 00	0.00		n Group	Total DSEs	0.00		Group	CALL SIGN CALL SIGN Total DSEs Gross Receipts Third G Base Rate Fee Third G

LEGAL NAME OF OWN BLUE RIDGE CA						S	27953	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
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								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

	27953							
						COMPUTATION O		
9	P 0	SUBSCRIBER GROU	N I Y-SIXTH	TWE COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	NIY-FIFTH	TWEN COMMUNITY/ AREA
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	O.00 P OSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon TWEN COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	roup SEVENTH	TWENTY- COMMUNITY/ AREA CALL SIGN
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	O.00 P OSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon TWEN COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	TWENTY- COMMUNITY/ AREA CALL SIGN
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9 Computa		BER GROUP	SUBSCRI	TE FEE FOR EACH	- D A O E D A	OOMBUTATION OF	RIDGE CABLE TECHNOLOGIES INC 27953							
Computa	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TWENTY-NINTH SUBSCRIBER GROUP THIRTIETH SUBSCRIBER GROUP													
	0	SUBSCRIBER GROU	IHIK HETH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	Y-NIN I H	COMMUNITY/ AREA						
•	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN						
Base Rate	302	67.EE 6.614	562	O'ALL GIGHT	562	07.EE 01011	502	0,122 0,011						
and		_												
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Exclusiv			-											
Surcha for														
Partial			-											
Distar		-	-			-								
Station														
			-											
	0.00			Total DSEs	0.00			otal DSEs						
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr						
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro						
	JP	SUBSCRIBER GROU	/-SECOND	THIRT	IP	SUBSCRIBER GROU	Y-FIRST	THIR						
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA						
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN						
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			-											
			-											
			-											
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	0.00			Total DSEs	0.00			otal DSEs						
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	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	oup	Base Rate Fee Third G						

				27953					
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otal DSEs			0.00	Total DSEs		•	0.00		
ross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
THII	RTY-FIFTH	SUBSCRIBER GRO	JP	Т	HIRTY-SIXTH	I SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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rioso izecelbio Itilia (, oup	\$	0.00	TO 1033 Necelpts Fou	rai Gioup	\$	<u> </u>		
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ase Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
	· .	\$		as shown in the boxes	·	\$	0.00		

BLUE RIDGE CA	BLE TEC	HNOLOGIES INC	,	27953				
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		SUBSCRIBER GRO		TI TO THE PARTY OF		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
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 Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TH	IRTY-NINTH	I SUBSCRIBER GRO	DUP		FORTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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orosa Necelpis IIIII	Oroup	\$	<u> </u>	TOTOSS Necelplis Fou	nai Gioup	\$	0.00	
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				11				
Base Rate Fee: Add	the base ra	te fees for each subs	scriber group	as shown in the boxes	s above.			
Enter here and in blo			J			\$		
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SYSTEM ID# LUE RIDGE CABLE TECHNOLOGIES INC 27953							Name	
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCRI	BER GROUP		
FOR	TY-FIRST	SUBSCRIBER GROU	JP	FORT	Y-SECOND	SUBSCRIBER GROU	Р	•
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 Gr	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FOR	TY-THIRD	SUBSCRIBER GROU	JP	FORT	Y-FOURTH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	bove.	\$		
or note and in block	J, III I I, S	paco = (pago 1)				*		

	CHNOLOGIES INC 27953							———————
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	Р	SUBSCRIBER GROU	Y-EIGHTH	FOR ⁻¹	IP	SUBSCRIBER GROU	EVENTH	FORTY-S
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0 9 Computati of Base Rate and Syndicate Exclusivi		BER GROUP	CLIBCODI	TE EEEO EOD EAOI		COMPLITATION O		P
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	JP	SUBSCRIBER GROUP	Y-SECOND	FIF	JP	SUBSCRIBER GRO	TY-FIRST	FIF
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LEGAL NAME OF OW BLUE RIDGE CA		HNOLOGIES INC	SYSTEM ID# 27953					
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COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α		0	Computa
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otal DSEs			0.00	Total DSEs			0.00	
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ase Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FIFTY-FIFTH	I SUBSCRIBER GRO	UP		FIFTY-SIXTH	SUBSCRIBER GROU	UP	
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			criber group	as shown in the boxes	s above.	¢		
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	27953							
			ATE FEES FOR EACH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP					
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Base Rate Fe Second Group SEVENTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN D	BLUE RIDGE CA	ABLE TEC	HNOLOGIES INC	;		Name			
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SEVENTY-FIRST SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SI	Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
SEVENTY-FIRST SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN	, , , , , , , , , , , , , , , , , , , ,						<u>*</u>		
MMUNITY/AREA O COMMUNITY/AREA O COMUNITY/AREA O COMMUNITY/AREA O COMMUNITY/AREA O COMMUNITY/AREA	Base Rate Fee First	te Fee First Group \$ 0.00		Base Rate Fee Sec	ond Group	\$	0.00		
ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE AL	SEV	ENTY-FIRST	SUBSCRIBER GRO	DUP	SEVEN	NTY-SECOND	SUBSCRIBER GRO	UP	
al DSEs O.00 Total DSEs O.00 Gross Receipts Fourth Group \$ 0.00	COMMUNITY/ AREA	1MUNITY/ AREA 0				Α		0	
al DSEs O.00 Total DSEs O.00 Gross Receipts Fourth Group \$ 0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	T CALL SIGN	DSE	
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	otal DSEs			0.00	Total DSEs			0.00	
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se Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	- 1	r				- 1	·		
se kate Fee Third Group [\$ U.UU Base Kate Fee Fourth Group [\$ 0.00	Dana Bata Ba Till	-l Ower		0.00	Been Bett 5	maths O			
II I	base Rate Fee Thir	u Group	 \$	0.00	Base Rate Fee Fou	rm Group	\$	0.00	
				scriber group	as snown in the boxes	s above.	\$		
se Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. er here and in block 3, line 1, space L (page 7) \$. ,	,						

		ECHNOLOGIES INC (A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
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		SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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								and
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
251		CURCODIRED OR	NID	057	/ENTY CIVIL	CLIDCODIDED ODOL	ID.	
		SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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07.122 07.07.1	332	07.22 0.01.1	332		202	07.122.01011	301	
		,						
Total DSEs			0.00	Total DSEs			0.00	
	Group	\$	0.00	Total DSEs Gross Receipts Fou	orth Group	\$	0.00	
	Group	\$			irth Group	\$	_	
Total DSEs Gross Receipts Third	·	\$	0.00	Gross Receipts Fou	·		0.00	
	·	\$			·	\$	_	
Gross Receipts Third	·	\$	0.00	Gross Receipts Fou	·		0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group		0.00	

		ECHNOLOGIES INC 27953 K A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
	D							
9	0	SUBSCRIBER GROU	Y-EIGHTH :	COMMUNITY/ AREA	0	SUBSCRIBER GROU	SEVENIH	SEVENTY-S COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro
	Р	SUBSCRIBER GROU	IGHTIETH S	E	IP	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
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	NER OF CABLE SYSTEM: ABLE TECHNOLOGIES INC 27953							
				ATE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
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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 Seco	nd Group	\$	0.00	
FIG	HTY-THIRD	SUBSCRIBER GRO	UP	FIGH'	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

BLUE RIDGE CA	ABLE TEC	ECHNOLOGIES INC 27953 K A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
		I SUBSCRIBER GRO		TI TO THE PARTY OF		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
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								Partially
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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	
EIGHT	Y-SEVENTH	I SUBSCRIBER GRO	DUP	EIG	HTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						П		
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
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Name	Lab	to force for						
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxes	s above.	\$		
or nore and in bit	.o. o, iii o i,	cpace = (page 1)				۳		

		HNOLOGIES INC 27953						
				ATE FEES FOR EAC				
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NI	NETY-FIRST	SUBSCRIBER GRO	DUP	NINE	TY-SECOND	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
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		CALL SIGIN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs					DSE	CALL SIGN		
			0.00	Total DSEs			0.00	
	d Group	\$				CALL SIGN		
Total DSEs Gross Receipts Third	d Group		0.00	Total DSEs			0.00	
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ross Receipts Third			0.00	Total DSEs Gross Receipts Foul	th Group	\$	0.00	
ross Receipts Third	d Group	\$	0.00	Total DSEs Gross Receipts Foul	rth Group	\$	0.00	

		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	IID	
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ase Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NIINI		OLIDOODIDED ODG	NID.	 	UNIETY OLVEL	OLIDOODIDED ODOL		
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Fotal DSEs			0.00	Total DSEs			0.00	
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	Froup	\$			urth Group	\$		
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Gross Receipts Third		\$			·	\$		
Gross Receipts Third		\$	0.00	Gross Receipts Fou	·		0.00	
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Gross Receipts Third (Group he base rat	\$ se fees for each subs	0.00	Gross Receipts Fou	irth Group		0.00	

		ECHNOLOGIES INC 27953 K A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
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	Р	SUBSCRIBER GROU	NDREDTH :	ONE HU	Р	SUBSCRIBER GROU	Y-NINTH	NINET
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	oup	ross Receipts Third G
	1 1					T .		

	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00	\$	·	Gross Receipts Secon Base Rate Fee Secon	0.00	\$	·	·	
	0.00		d Group	Base Rate Fee Secon	0.00	\$ \$ SUBSCRIBER GRO	roup	Base Rate Fee First G	
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BLUE RIDGE CABL								
				TE FEES FOR EAC				
	D FIFTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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 	OF CABLE SYSTEM: SYSTEM ID# 27953								
				TE FEES FOR EACH					
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BLUE RIDGE CABLE TECHNOLOGIES INC 27953							Name	
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED THII	RTEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED FOL	JRTEENTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
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Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED S	IXTEENTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA	***************************************		0	COMMUNITY/ AREA			0	
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LEGAL NAME OF OWNI BLUE RIDGE CAR								
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	BER GROUP		
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ONE HUNDRED N	IINTEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GROUP)	
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e Rate Fee: Add t r here and in bloc			riber group	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OW BLUE RIDGE CA		LE SYSTEM: SYSTEM ID: HNOLOGIES INC 27953						
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
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ase Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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ase Rate Fee: Adenter here and in bloom			criber group	as shown in the boxes	above.	\$		
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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 27953								
			BASE RA	TE FEES FOR EACH				
	ITY-FIFTH	SUBSCRIBER GROUP			/ENTY-SIXTH	SUBSCRIBER GROUP		9
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O Computat	JP	NOLOGIES INC 27953 COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
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	AL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# JE RIDGE CABLE TECHNOLOGIES INC 27953						Nam	
E	BLOCK A:	COMPUTATION OI	BASE RA	TE FEES FOR EAC	H SUBSCR	BER GROUP		
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ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	RTY-NINTH	SUBSCRIBER GROUP	_	ii —		SUBSCRIBER GROU	JP	
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		SUBSCRIBER GROUI				SUBSCRIBER GROUP		9
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1		SUBSCRIBER GROUP	RTY-SIXTH			SUBSCRIBER GROUP	ORTY-FIFTH	
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ana Bata Fan First Or								
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIF	•					SUBSCRIBER GROU		
ONE HUNDRED FIF	•				IFTY-SIXTH			
ONE HUNDRED FIF	•		UP	ONE HUNDRED F	IFTY-SIXTH		JP	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP 0	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	JP 0	
ONE HUNDRED FIF OMMUNITY/ AREA CALL SIGN otal DSEs	DSE	SUBSCRIBER GRO	DSE O.00	ONE HUNDRED F COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE DSE	
ONE HUNDRED FIF OMMUNITY/ AREA CALL SIGN otal DSEs	DSE	SUBSCRIBER GRO	DSE	ONE HUNDRED F COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	
ONE HUNDRED FIF	DSE roup	SUBSCRIBER GRO	DSE 0.00 0.00 0.00	ONE HUNDRED F COMMUNITY/ AREA CALL SIGN Total DSEs	DSE h Group	CALL SIGN	DSE DSE	
ONE HUNDRED FIF OMMUNITY/ AREA CALL SIGN Dital DSEs ross Receipts Third G	DSE roup	SUBSCRIBER GRO	DSE 0.00 0.00	ONE HUNDRED F COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE h Group	SUBSCRIBER GROU	DSE DSE 0 0 0 0 0 0 0 0 0 0 0 0	
ONE HUNDRED FIF OMMUNITY/ AREA CALL SIGN Dital DSEs ross Receipts Third G ase Rate Fee Third G	DSE roup	SUBSCRIBER GRO	DSE 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ONE HUNDRED F COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Fourth	DSE h Group	SUBSCRIBER GROU	DSE DSE 0 0 0 0 0 0 0 0 0 0 0 0	

LEGAL NAME OF OWN BLUE RIDGE CA		SYSTEM ID# CHNOLOGIES INC 27953							
				TE FEES FOR EAC					
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
								Surcharge	
								for	
						-		Partially	
								Distant Stations	
								Otations	
Total DSEs		'	0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00		
COMMUNITY/ AREA		SUBSCRIBER GROUP	0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0		
COMMONT IT AREA				COMMONT IT AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$			

	AME OF OWNER OF CABLE SYSTEM: RIDGE CABLE TECHNOLOGIES INC 27953								
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
	FIRST	SUBSCRIBER GROU	Р		SECOND	SUBSCRIBER GROUP	·	^	
COMMUNITY/ AREA	Wayne	County		COMMUNITY/ AREA	Milford,	Delaware Twp,Ding	ıman Twp	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
WPVI	0.25							Base Rate Fee	
								and Syndicated	
								Exclusivity Surcharge	
								for Partially	
								Distant Stations	
			-				_		
Total DSEs			0.25	Total DSEs			0.00		
Gross Receipts First G	roup	\$ 1,407,	233.70	Gross Receipts Second	d Group	\$ 1,16	4,457.75		
Base Rate Fee First G	•		192.82	Base Rate Fee Second	•	\$ SUBSCRIBER GROUP	0.00		
		SUBSCRIBER GROU	Р						
COMMUNITY/ AREA	Coolba	ugh Township		COMMUNITY/ AREA	Hemloc	k Farms,Blooming	Grove,Gr		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						— — — — — — — — — — — — — — — — — — —			
Total DSEs	2roup	e 7	0.00	Total DSEs	Group	e 2.22	0.00		
Gross Receipts Third C			183.10	Gross Receipts Fourth			0.00		
Base Rate Fee Third G	лоир	\$	0.00	Base Rate Fee Fourth		\$	0.00		
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$ 1	3,192.82		

LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 27953								
		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	DUP		EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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 boxes	s above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CA			;				27953	Name
				ATE FEES FOR EAC			10	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE		SUBSCRIBER GROI	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate F
								and
								Syndicate
								Exclusivit Surcharge
								for
								Partially
								Distant Stations
								Stations
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	<u> </u>	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	оточр	*	0.00	Cross Reserve	ona Group			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	ELEVENTH	SUBSCRIBER GRO				SUBSCRIBER GRO		
COMMUNITY/ AREA	***************************************		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	<u>\$</u>	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third Base Rate Fee: Add	the base ra			Base Rate Fee Fou		\$	0.00	

EGAL NAME OF OWNER OF CAB BLUE RIDGE CABLE TEC						27953	Name
BLOCK A	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	1 SUBSCRI	BER GROUP		
THIRTEENTH	I SUBSCRIBER GRO	UP	FO	URTEENTH	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9 Computat
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
					_		and
							Syndicate
				<u></u>			Exclusivi Surcharç
							for
							Partially
							Distant
					_		Stations
otal DSEs		0.00	Total DSEs			0.00	
			11	nd Group	\$	0.00	
Gross Receipts First Group	*		Gross Receipts Secon				
Bross Receipts First Group	•		Gross Receipts Secon	,			
Base Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
Base Rate Fee First Group	\$ SUBSCRIBER GRO	0.00	Base Rate Fee Secon	nd Group	\$ SUBSCRIBER GROU	JP	
Base Rate Fee First Group		0.00	Base Rate Fee Secon	nd Group			
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA		0.00 DUP 0	Base Rate Fee Secon	nd Group		JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
Base Rate Fee First Group FIFTEENTH COMMUNITY/ AREA	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
FIFTEENTH COMMUNITY/ AREA CALL SIGN DSE	I SUBSCRIBER GRO	0.00 DUP 0	Base Rate Fee Secon	nd Group	SUBSCRIBER GROU	JP 0	
FIFTEENTH COMMUNITY/ AREA CALL SIGN DSE Total DSEs	I SUBSCRIBER GRO	O.00 DSE	Base Rate Fee Second COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	JP O DSE	
COMMUNITY/ AREA	CALL SIGN	O.00	Base Rate Fee Second COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE DSE	

LEGAL NAME OF OWNER BLUE RIDGE CABI						S	7STEM ID# 27953	Name
				TE FEES FOR EACH				
	NTEENTH	SUBSCRIBER GROU			HTEENTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
					•			
Total DSEs			0.00	Total DSEs			0.00	
					d 0			
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	d Group	\$	0.00	
NIN	TEENTH	SUBSCRIBER GROU	Р	TV	VENTIETH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			••••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		

BLUE RIDGE CA						S	27953	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		 		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
						-		for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		II		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
,	•				,			
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

BLUE RIDGE CA						S	27953	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	ross Receipts First Group \$ 0.00				ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWENT	Y-SEVENTH	SUBSCRIBER GRO	UP	TWE	NTY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
C. COO ROOOPIS TIME	. C.Oup	*		- C.	Oloup	*		
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	above.	\$		

	IP	BER GROUP SUBSCRIBER GROU		TE FEES FOR EACI		COMPUTATION OF SUBSCRIBER GROU		
(0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Comp	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base R							 	
ar Syndi								
Exclu						-		
Surch							<u> </u>	
fo Part								
Dist						-		
Stati								
					<u> </u>			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	oup	ross Receipts First Gr
	0.00	\$	•	Base Rate Fee Seco		\$		
	IP	\$ SUBSCRIBER GROU	•	THIR	JP	\$ SUBSCRIBER GROU		THIR
			•					THIR
	IP		•	THIR	JP			THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	COMMUNITY/ AREA
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR'
	D 0	SUBSCRIBER GROU	Y-SECOND	THIR ⁻ COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	THIR' OMMUNITY/ AREA CALL SIGN
	DSE	SUBSCRIBER GROU	DSE	THIR COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	THIR' OMMUNITY/ AREA CALL SIGN otal DSEs
	DSE 0.00	CALL SIGN	DSE	THIR COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	THIR'

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# BLUE RIDGE CABLE TECHNOLOGIES INC 27953							
				THE THE THE				
9)P 0	SUBSCRIBER GROL	Y-FOURTH	COMMUNITY/ AREA	<u>JP</u> 0	SUBSCRIBER GROU	TY-THIRD	THIR COMMUNITY/ AREA
Computatio		П	Looe		T 505		Loop	
of Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicated								
Exclusivity Surcharge					<u> </u>			
for								
Partially								
Distant Stations					<u> </u>			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	RTY-SIXTH	ТНІ	JP	SUBSCRIBER GROU	TY-FIFTH	THIF
	COMMUNITY/ AREA 0			0			COMMUNITY/ AREA	
			••••••					
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	
		CALL SIGN		CALL SIGN		CALL SIGN		CALL SIGN Cotal DSEs Gross Receipts Third Cotal

LEGAL NAME OF OWN BLUE RIDGE CA						5	27953	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
THIRT	Y-SEVENTH	SUBSCRIBER GRO		†		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	ross Receipts First Group \$ 0.00				ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		-		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	

			<u></u>					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Door Bote For The	Crows		0.00	Page Bate For F	eth Coore		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	nin Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CA			;			S	27953	Name
		COMPUTATION C		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		SUBSCRIBER GROU	0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Tatal BOEs			0.00	Table DOS			0.00	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		 		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						.		
Total DSEs			0.00	Total DSEs		11	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 Foun	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxes	above.	\$		

	HNOLOGIES INC				3	YSTEM ID# 27953	Name
BLOCK A	: COMPUTATION O	F BASE RA	ATE FEES FOR EACH	1 SUBSCRI	BER GROUP		
FORTY-FIFT	SUBSCRIBER GRO		Ħ	RTY-SIXTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9 Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
							and
							Syndicat
							Exclusivi Surchar
							for
							Partially
					_		Distant
							Stations
						2.22	
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-SEVENTH	H SUBSCRIBER GRO	UP	FOR	TY-EIGHTH	SUBSCRIBER GROU	JP	
			COMMUNITY/ AREA 0				
OMMUNITY/ AREA		0	COMMUNITY/ AREA				
CALL SIGN DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN	DSE	CALL SIGN		
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
CALL SIGN DSE	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
	CALL SIGN			DSE	CALL SIGN	0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	DSE	

LEGAL NAME OF OWN BLUE RIDGE CA						S	27953	Name
				TE FEES FOR EAC				
	RTY-NINTH	SUBSCRIBER GRO		#		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
						.		Distant
								Stations
						. –		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	ross Receipts First Group \$ 0.00			Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
F	IFTY-FIRST	SUBSCRIBER GRO		 		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	······							
						.		
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	the base rat	e fees for each subs		as shown in the boxes	·	\$		

LEGAL NAME OF OWI			:			S	27953	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA	<u></u>		0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						.		and
						.		Syndicated
		.						Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	ross Receipts First Group \$ 0.00				ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FIFTY-FIFTH	SUBSCRIBER GRO)UP		FIFTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Croos Noosipis IIIII	. 0.10up	*		TO 1000 Receipts Four	iai Gioup	<u>Ψ</u>		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxes	above.	\$		

Name	YSTEM ID# 27953	S						LEGAL NAME OF OWNER BLUE RIDGE CABL
9		BER GROUP SUBSCRIBER GROU			IP	COMPUTATION OF SUBSCRIBER GROU		FIFTY-S
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe			-					
Syndicated			-					
Exclusivity			-					
Surcharge for			-					
Partially			-				_	
Distant								
Stations			-					
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
	Р	SUBSCRIBER GROU	SIXTIETH		IP	SUBSCRIBER GROU	Y-NINTH	FIFT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			-					
			-				_	
			-					
	0.00			Total DSEs	0.00			Total DSEs
		\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third Gr
	0.00	<u> </u>						

HNOLOGIES INC 27953	Name
: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
T SUBSCRIBER GROUP SIXTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0	9
	Computat
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Bas	of Base Rate
	and
*** 	Syndicat
	Exclusiv
	Surcharg for
F	Partially
	Distant
	Station
\$ 0.00 Gross Receipts Second Group \$ 0.00	
\$ 0.00 Base Rate Fee Second Group \$ 0.00	
SUBSCRIBER GROUP SIXTY-FOURTH SUBSCRIBER GROUP	
O COMMUNITY/ AREA O	
CALL SIGN DSE CALL SIGN DSE	
0.00 Total DSEs 0.00 \$ 0.00 Gross Receipts Fourth Group \$ 0.00	

BLUE RIDGE CABLE TEC	E SYSTEM: HNOLOGIES INC				3	YSTEM ID# 27953	Name
BLOCK A:	COMPUTATION OF	F BASE RA	ATE FEES FOR EACH	1 SUBSCRI	BER GROUP		
SIXTY-FIFTH	SUBSCRIBER GROU		S	SIXTY-SIXTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	Computat
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
	-						and
							Syndicate
							Exclusivi Surcharg
							for
							Partially
	-						Distant
							Stations
otal 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 Seco	nd Group	\$	0.00	
·	SUBSCRIBER GROU			•	SUBSCRIBER GROL		
SIXTY-SEVENTH				TY-EIGHTH			
SIXTY-SEVENTH		JP	SIX	TY-EIGHTH		JP	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE	SUBSCRIBER GROU	JP 0	SIX COMMUNITY/ AREA	(TY-EIGHTH	SUBSCRIBER GROU	JP 0	
SIXTY-SEVENTH COMMUNITY/ AREA CALL SIGN DSE Total DSEs	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	
SIXTY-SEVENTH	CALL SIGN	DSE O.00	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE 0.00	

					E TECH	
OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	SCRIBER GROUP	SUBSCRI	BASE RATE F	COMPUTATION OF	OCK A: (ВІ
<u> </u>	TETH SUBSCRIBER GRO	VENTIETH		SUBSCRIBER GROU	Y-NINTH	
O COMMUNITY/ AREA O Computation			0 CON			COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE of	F I CALL SIGN	DSF	DSF C	CALL SIGN	DSE	CALL SIGN
Base Rate F	2 OALE GIGIT	702	562 67	ONLE GIGIT	DOL	CALL CIGIT
and				-		
Syndicate Syndicate				-		
Exclusivit				-		
Surcharge						
for						
Partially						
Distant						
Stations Stations						
<u> </u>						
······································						
0.00 Total DSEs 0.00			0.00			atal DOFa
						otal DSEs
0.00 Gross Receipts Second Group \$ 0.00	up <u>\$</u>	d Group	0.00 Gros	\$	oup	ross Receipts First Gr
0.00 Base Rate Fee Second Group \$ 0.00	up \$	d Group	0.00 Bas	\$	oup	ase Rate Fee First Gro
ROUP SEVENTY-SECOND SUBSCRIBER GROUP	OND SUBSCRIBER GRO	Y-SECOND)	SUBSCRIBER GROU	ΓY-FIRST	SEVEN
O COMMUNITY/ AREA O			0 COM			OMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE	E CALL SIGN	DSE	DSE CA	CALL SIGN	DSE	CALL SIGN
······································						
				-		
0.00 Total DSEs						otal DSEs
0.00 Total DSEs	ρ \$	Group		\$	oup	otal DSEs Foss Receipts Third G

BLUE RIDGE CABLE TEC	LE SYSTEM: HNOLOGIES INC				3	YSTEM ID# 27953	Name
BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
SEVENTY-THIRD	SUBSCRIBER GRO	UP	SEVEN	TY-FOURTH	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9 Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
							and
							Syndicate Exclusivi
							Surchar
							for
							Partially
					_		Distant
							Stations
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
·	\$	0.00	Base Rate Fee Seco		\$	0.00	
SEVENTY-FIFTH	\$ I SUBSCRIBER GRO	UP	SEVI	ENTY-SIXTH	SUBSCRIBER GROU	JP	
SEVENTY-FIFTH				ENTY-SIXTH			
SEVENTY-FIFTH		UP	SEVI	ENTY-SIXTH		JP	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH	I SUBSCRIBER GRO	UP 0	SEVI COMMUNITY/ AREA	ENTY-SIXTH	SUBSCRIBER GROU	JP 0	
SEVENTY-FIFTH COMMUNITY/ AREA CALL SIGN DSE	I SUBSCRIBER GRO	DSE	SEVI COMMUNITY/ AREA CALL SIGN	ENTY-SIXTH	SUBSCRIBER GROU	JP O DSE	
SEVENTY-FIFTH COMMUNITY/ AREA CALL SIGN DSE Total DSEs	I SUBSCRIBER GRO	DSE O.00	CALL SIGN CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	JP O DSE O O O O O O O O O O O O O O O O O O	
SEVENTY-FIFTH COMMUNITY/ AREA CALL SIGN DSE	I SUBSCRIBER GRO	DSE	SEVI COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	JP O DSE	

LEGAL NAME OF OWN BLUE RIDGE CA						S	27953	Name
				ATE FEES FOR EAC				
SEVENTY COMMUNITY/ AREA		SUBSCRIBER GRC	<u>0</u>	SEVE COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0/122 0101V	502	O/ILL OIOIN	202	O/LE OIOIV	D 02	O/ALL GIGIT	502	Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	•	\$	0.00	Base Rate Fee Sec	· .	\$	0.00	
SEVE COMMUNITY/ AREA		SUBSCRIBER GRO	<u> </u>	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	
OOMMONT IT AREA				OCIVIIVIONI 17 AIRE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE BLUE RIDGE CAB			-			S	YSTEM ID# 27953	Name
				ATE FEES FOR EAC				
EIGH COMMUNITY/ AREA	TY-FIRST	SUBSCRIBER GROL	JP 0	EIGH COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
COMMONT IT AREA			<u> </u>	COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
EIGH	TY-THIRD	SUBSCRIBER GROU	JP	EIGH	TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
eipts Third G Fee Third G Fee: Add th	roup e base rat	\$	0.00	Gross Receipts Four	th Group		0.00	

Name	YSTEM ID# 27953	S						LEGAL NAME OF OWNER BLUE RIDGE CAB
				E FEES FOR EACH				
9	0	SUBSCRIBER GROU	HTY-SIXTH	EIGH COMMUNITY/ AREA	1P 0	SUBSCRIBER GROU	ITY-FIFTH	EIGH COMMUNITY/ AREA
Computatio				COMMONITY AREA	U			COMMUNIT IT AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
Syndicated								
Exclusivity								
Surcharge								
for Partially								
Distant								
Stations								
	2.22							
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
	O			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							···	
	<u></u>							
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

BLUE RIDGE CA						S	27953	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		#		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
						.		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		 		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	

						.		
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

BLUE RIDGE CA						S	27953	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRC				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
						.		Distant
								Stations
						.		
Tatal DOFa			0.00	Tatal DOF-			0.00	
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 Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		 		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

O COMMUNITY/ AREA O Computation	LEGAL NAME OF OWNER BLUE RIDGE CAB						S	27953	Name
O COMMUNITY/ AREA O Computation of Base Rate Fe Second Group O COMMUNITY/ AREA O COM									
Computation SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Gross Receipts Second Group O.00 Base Rate Fee Second Group ONE HUNDREDTH SUBSCRIBER GROUP OCCMMUNITY/ AREA O Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations	NINETY-S COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9
Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations 1.000 Total DSEs 0.00 0.000 Base Rate Fee Second Group 0.000 Base Rate Fee Second Group 0.000 COMMUNITY/ AREA 0	COMMONIT I/ AREA			U	COMMONT I/ AREA				
and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 O.00 DOUD DOUD DOUD DOUD DOUD DOUD DOUD DO	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicated Exclusivity Surcharge for Partially Distant Stations									
Exclusivity Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 O.00 Base Rate Fee Second Group \$ 0.00 COMMUNITY/ AREA O									
for Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 D.00 Base Rate Fee Second Group \$ 0.00 ORIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA O									
Partially Distant Stations O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00 D.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDREDTH SUBSCRIBER GROUP OCMMUNITY/ AREA O									_
Distant Stations									
0.00 Total DSEs 0.00 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0									_
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									Stations
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0									
0.00 Base Rate Fee Second Group \$ 0.00 RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA 0	Total DSEs			0.00	Total DSEs			0.00	
RIBER GROUP ONE HUNDREDTH SUBSCRIBER GROUP COMMUNITY/ AREA O	Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
O COMMUNITY/ AREA O	Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		ΓY-NINTH	SUBSCRIBER GROU		1		SUBSCRIBER GROU		
SIGN DSE CALL SIGN DSE CALL SIGN DSE	COMMUNITY/ AREA			0	COMMUNITY/ AREA			O	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			_						
0.00 Total DSEs 0.00	Total DSEs			0.00	Total DSEs			0.00	
	Total DSEs Gross Receipts Third G	roup	<u> </u>			th Groves	¢	_	
Gross Receipts Fourth Group \$ 0.00	Gross Receipis Thira G	ισαρ	\$	0.00	Hoross Receipts Foun	и Отоир	Φ	0.00	
0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	

PLUL VIDGE CADLE IEC	E SYSTEM: HNOLOGIES INC				S	YSTEM ID# 27953	Name
BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	I SUBSCRI	BER GROUP		
ONE HUNDRED FIRST			11		SUBSCRIBER GROU	IP	0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9 Computat
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
	-						and
							Syndicate
	-						Exclusivition Surcharg
							for
							Partially
	-						Distant
							Stations
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
				·			
ONE HUNDRED THIRD		JP	ONE HUNDRE	·	SUBSCRIBER GROU	JP	
				·			
		JP	ONE HUNDRE	·		JP	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	SUBSCRIBER GROU	JP 0	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP 0	
CALL SIGN DSE	SUBSCRIBER GROU	DSE	ONE HUNDRE COMMUNITY/ AREA CALL SIGN	ED FOURTH	SUBSCRIBER GROU	DSE	
CALL SIGN DSE CALL SIGN DSE Total DSEs	CALL SIGN	DSE O.00	ONE HUNDRE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE O.00	
COMMUNITY/ AREA	SUBSCRIBER GROU	DSE	ONE HUNDRE COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	

LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 27953								
				ATE FEES FOR EAC				
ONE HUNDS COMMUNITY/ AREA	RED FIFTH	SUBSCRIBER GRO	UP 0	ONE HUN COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
COMMONT I/ AREA				COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge
								for Partially
		_						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO		 		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
d th	ne base rat			Base Rate Fee Four	•	\$	0.00	

LEGAL NAME OF OWN BLUE RIDGE CA						S	27953	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
						-		for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		1		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
,	·				,			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC 27953								
				ATE FEES FOR EAC				-
		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						. –		Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
ONE HUNDRED	FIFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI BLUE RIDGE CA		E SYSTEM: HNOLOGIES INC	•			\$	27953	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROUP		 		I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
						.		Partially
								Distant Stations
								Gtations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Seco		\$	0.00	
		SUBSCRIBER GRO		 		SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CAI						S	27953	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TW	ENTY-FIRST	SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
			0.00	Gross Receipts Sec	and Group	\$	0.00	
Orosa Necelpta i list (этоир	Ψ	0.00	Oross Neceipis dec	она Огоар	Ψ	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Sec	•	\$	0.00	
	ENTY-THIRD	SUBSCRIBER GROUP				SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	ч		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		1	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 the Enter here and in blood			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CA						S	27953	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ONE HUNDRED TWEN	TY-SEVENTH	SUBSCRIBER GROUP	•	ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	· r				F			
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	above.	\$		

	27953					INOLOGIES INC	LE TECH	
		BER GROUP SUBSCRIBER GROUP		ATE FEES FOR EACH				ONE HUNDRED TWEN
9	0	SUBSCRIBER GROUP			0	SUBSCRIBER GROU	II I - INIIN I I I	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat								
and Syndica								
Exclusi								
Surcha								
for Partial								
Dista								
Statio								
	0.00				0.00			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gr
		SUBSCRIBER GROUP	TY-SECOND	ONE HUNDRED THIS	,	SUBSCRIBER GROU	RTY-FIRST	ONE HUNDRED THIS
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				·····				
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourtl	0.00	\$	roup	
		\$	i Group	·		\$	roup	otal DSEs iross Receipts Third G

LEGAL NAME OF OWN BLUE RIDGE CA						S	27953	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	IIRTY-THIRD	SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
		-						Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	Gross Receipts Second Group \$ 0.00			
Base Rate Fee First (\$	0.00	Base Rate Fee Seco	•	\$	0.00	
	IRTY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CA						5	27953	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC				
ONE HUNDRED THIR		SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u></u>			Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			2.22				2.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-NINTH	SUBSCRIBER GRO		ONE HUNDRE	D FORTIETH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
C. COO NOOOIPIG TIIIU	. J. Jup	*		- C.	.a. Group	*		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CA						S	27953	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Bross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
The state of the s						<u>·</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CA						\$	27953	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						. –		Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially
			·····					Distant Stations
								0.00.00
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	Gross Receipts Second Group \$ 0.00			
Base Rate Fee First	•	\$	0.00	Base Rate Fee Sec		\$	0.00	
ONE HUNDRED FOR COMMUNITY/ AREA		SUBSCRIBER GROUP	0	ONE HUNDRED F		SUBSCRIBER GROUP	0	
COMMONT IT AREA			<u> </u>	COMMONT 17 AREA	······		<u>U</u>	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
			·····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Foun	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN						S	YSTEM ID# 27953	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC				
ONE HUNDRED FOR	RTY-NINTH	SUBSCRIBER GROU		ONE HUNDRI	ED FIFTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
T			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FI	FTY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
-					-			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CAI						S	YSTEM ID# 27953	Name
	BLOCK A:	COMPUTATION O	BASE RA	TE FEES FOR EAC				
ONE HUNDRED FI	FTY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA 0		0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	•	\$	0.00	Base Rate Fee Seco	•	\$	0.00	
	IFTY-FIFTH	SUBSCRIBER GROU		 		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
·	•				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add to Enter here and in blood			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN BLUE RIDGE CA						5	27953	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GROUP		ii e		SUBSCRIBER GROUP		9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u></u>			Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			·····					
			2.22				2.00	
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 Seco	ond Group	\$	0.00	
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GRO		ONE HUNDR	ED SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	<u> </u>	0.00	Gross Receipts Four	rth Group	\$	0.00	
2.22.12.2	1-				· - -			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953		
		IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	□ First 50 major television market □ Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to she 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group		
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ein the boxes above. Enter here and in block 4, line 2 of space L (page			

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953		
		SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	□ First 50 major television market □ Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to sh your actual calculations on this form.			
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SURCHARGE First Group	SURCHARGE Second Group		
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for a in the boxes above. Enter here and in block 4, line 2 of space L (page			

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	First 50 major television market	Second 50 major television market		
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none e Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fine. 	o for the VHF Grade B contour stations that were classified as nter zero. To for the VHF Grade B contour stations that were classified as nter zero.		
Stations	your actual calculations on this form.			
	NINTH SUBSCRIBER GROUP	TENTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group		
	ELEVENTH SUBSCRIBER GROUP	TWELVTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	Fourth Group		

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	27953		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	☐ First 50 major television market	Second 50 major television market		
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for common this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none etermine 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts find your actual calculations on this form. 	o for the VHF Grade B contour stations that were classified as inter zero. In the contour stations that were classified as inter zero. In the contour stations that were classified as interest.		
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group		
	FIFTEENTH SUBSCRIBER GROUP	SIXTEENTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	r each subscriber group as shown		

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation			
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.	
	SEVENTEENTH SUBSCRIBER GROUP	EIGHTEENTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
	NINEENTH SUBSCRIBER GROUP	TWENTYTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ein the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown (37)	

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation		Casand 50 major talevision market		
of Base Rate Fee and Syndicated Exclusivity	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group			
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none e Step 3: In line 3, subtract line 2 from line 1. This is the total number	nter zero. of DSEs used to compute the surcharge.		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fi your actual calculations on this form.	gures applicable to the particular group. You do not need to show		
	TWENTY-FIRST SUBSCRIBER GROUP	TWENTY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group		
	TWENTY-THIRD SUBSCRIBER GROUP	TWENTY-FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge		
	computation	computation		
	SURCHARGE Third Group	SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pagental description).	each subscriber group as shown e 7)		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#		
	BLUE RIDGE CABLE TECHNOLOGIES INC	27953		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation				
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market		
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated Exclusivity Surcharge for Partially	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	ter zero. of DSEs used to compute the surcharge. formula outlined in block D, section 3 or 4 of part 7 of this		
Distant Stations	your actual calculations on this form.	gures applicable to the particular group. You do not need to show		
	TWENTY-FIFTH SUBSCRIBER GROUP	TWENTY-SIXTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for		
	this subscriber group subject to the surcharge computation	this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE		
	First Group	Second Group		
	TWENTY-SEVENTH SUBSCRIBER GROUP	TWENTY-EIGHTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation	computation		
	SURCHARGE	SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown (27)		

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	27953	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation			
of Base Rate Fee and	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule.	Second 50 major television market	
Syndicated Exclusivity	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	
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number		
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 Stations	schedule. In making this computation, use gross receipts fi your actual calculations on this form.	gures applicable to the particular group. You do not need to show	
	, , , , , , , , , , , , , , , , , , , ,		
	TWENTY-NINTH SUBSCRIBER GROUP	THIRTIETH 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 total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge computation	subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	First Group	Second Group	
	THIRTY-FIRST SUBSCRIBER GROUP	THIRTY-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 total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)	

BLUE RIDGE CABLE TECHNOLOGIES INC	27953	
BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY 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 must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:		
	Casend 50 major talevision market	
INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as nter zero. of DSEs used to compute the surcharge.	
THIRTY-THIRD SUBSCRIBER GROUP	THIRTY-FOURTH SUBSCRIBER GROUP	
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
THIRTY-FIFTH SUBSCRIBER GROUP	THIRTY-SIXTH SUBSCRIBER GROUP	
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	
SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)	
	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market	

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953		
		JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for common this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none of Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.		
	THIRTY-SEVENTH SUBSCRIBER GROUP	THIRTY-EIGHTH SUBSCRIBER GROUP		
	THIRTY-SEVENTH SUBSCRIBER GROUP	THIRTT-EIGHTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group		
	THIRTY-NINTH SUBSCRIBER GROUP	FORTIETH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	or each subscriber group as shown ge 7)		

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		Casand 50 major talevision market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comment this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none entered in the Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the first step 4.	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
Stations	your actual calculations on this form.	
	FORTY-FIRST SUBSCRIBER GROUP	FORTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FORTY-THIRD SUBSCRIBER GROUP	FORTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
Stations	your actual calculations on this form.	
	FORTY-FIFTH SUBSCRIBER GROUP	FORTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FORTY-SEVENTH SUBSCRIBER GROUP	FORTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown \$

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as atter zero. of DSEs used to compute the surcharge.
	FORTY-NINTH SUBSCRIBER GROUP	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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTY-FIRST SUBSCRIBER GROUP	FIFTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)

BLUE RIDGE CABLE TECHNOLOGIES INC BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	27953
	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	the station is not exempt in Part 7, you must also compute a
First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for community this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none e Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	o for the VHF Grade B contour stations that were classified as nter zero. To for the VHF Grade B contour stations that were classified as nter zero. To f DSEs used to compute the surcharge.
	11
FIFTY-THIRD SUBSCRIBER GROUP	FIFTY-FOURTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
FIFTY-FIFTH SUBSCRIBER GROUP	FIFTY-SIXTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	each subscriber group as shown e 7)
	by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
		SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your apple ayatem is legated within a tan 100 talevision market and the station is not exempt in Part 7, you must also compute a	
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as iter zero. of DSEs used to compute the surcharge.
	FIFTY-SEVENTH SUBSCRIBER GROUP	FIFTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SURCHARGE First Group	SURCHARGE Second Group
	FIFTY-NINTH SUBSCRIBER GROUP	SIXTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of the schedule of the schedule.	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this jures applicable to the particular group. You do not need to show
	SIXTY-FIRST SUBSCRIBER GROUP	SIXTY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SIXTY-THIRD SUBSCRIBER GROUP	SIXTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ein the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7) \$

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of Base Rate Fee	☐ First 50 major television market INSTRUCTIONS:	Second 50 major television market
and Syndicated Exclusivity Surcharge for	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number 	for the VHF Grade B contour stations that were classified as nter zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figure your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this gures applicable to the particular group. You do not need to show
	SIXTY-FIFTH SUBSCRIBER GROUP	SIXTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SIXTY-SEVENTH SUBSCRIBER GROUP	SIXTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		Canand 50 major talaviaian market
of Base Rate Fee and Syndicated Exclusivity Surcharge for	 ☐ First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. 	for the VHF Grade B contour stations that were classified as ter zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this gures applicable to the particular group. You do not need to show
	SIXTY-NINTH SUBSCRIBER GROUP	SEVENTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTY-FIRST SUBSCRIBER GROUP	SEVENTY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
		USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market a Syndicated Exclusivity Surcharge. Indicate which major television by section 76.5 of FCC rules in effect on June 24, 1981:	nd the station is not exempt in Part 7, you must also compute a
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comthis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts	oup for the VHF Grade B contour stations that were classified as enter zero. Deer of DSEs used to compute the surcharge.
Stations	your actual calculations on this form.	
	SEVENTY-THIRD SUBSCRIBER GROUP	SEVENTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTY-FIFTH SUBSCRIBER GROUP	SEVENTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge from the boxes above. Enter here and in block 4, line 2 of space L (page 1).	for each subscriber group as shown age 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
		SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	d the station is not exempt in Part 7, you must also compute a
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for community this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none exempt DSEs in line 2 from line 1. This is the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule.	up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using th schedule. In making this computation, use gross receipts f your actual calculations on this form.	e formula outlined in block D, section 3 or 4 of part 7 of this figures applicable to the particular group. You do not need to show
	SEVENTY-SEVENTH SUBSCRIBER GROUP	SEVENTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTY-NINTH SUBSCRIBER GROUP	EIGHTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	or each subscriber group as shown ge 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
		JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market as Syndicated Exclusivity Surcharge. Indicate which major television relevance.	nd the station is not exempt in Part 7, you must also compute a
by section 76.5 of FCC rules in effect on June 24, 1981: Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in ble this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that we Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of p schedule. In making this computation, use gross receipts figures applicable to the particular group. You do your actual calculations on this form.		up for the VHF Grade B contour stations listed in block A, part 9 of up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge. he formula outlined in block D, section 3 or 4 of part 7 of this
	EIGHTY-FIRST SUBSCRIBER GROUP	EIGHTY-SECOND SUBSCRIBER GROUP
	EIGHTY-FIRST SUBSCRIBER GROUP	EIGHTY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	EIGHTY-THIRD SUBSCRIBER GROUP	EIGHTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge f in the boxes above. Enter here and in block 4, line 2 of space L (page 1)	for each subscriber group as shown age 7)

BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	d the station is not exempt in Part 7, you must also compute a
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations Syndicated INSTRUCTIONS: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for the VHF Grade B contour stations that we Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of schedule. In making this computation, use gross receipts figures applicable to the particular group. You describe the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of schedule. In making this computation, use gross receipts figures applicable to the particular group. You describe the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of schedule. In making this computation, use gross receipts figures applicable to the particular group. You describe the surcharge for each subscriber group for commercial VHF Grade B contour stations listed in this schedule. In the surcharge for the VHF Grade B contour stations listed in the surcharge for the VHF Grade B contour stations listed in this schedule. In the surcharge for the VHF Grade B contour stations listed in this schedule. In the surcharge for the VHF Grade B contour stations listed in the schedule. In the surcharge for the VHF Grade B contour stations listed in the surcharge for the VHF Grade B contour stations listed in the schedule.	
EIGHTV EIETH SLIBSCRIBER GROUD	EICHTV SIVTH SUBSCRIPED CROUD
EIGHTY-FIFTH SUBSCRIBER GROUP	EIGHTY-SIXTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
EIGHTY-SEVENTH SUBSCRIBER GROUP	EIGHTY-EIGHTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	r each subscriber group as shown ge 7)
	BLOCK B: COMPUTATION OF SYNDICATED EXCLU- If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ms by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

	27953
BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY 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 must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined	
First 50 major television market	Second 50 major television market
Step 1: In line 1, give the total DSEs by subscriber group for comme 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
Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	of DSEs used to compute the surcharge.
FIGHTY-NINTH SUBSCRIBER GROUP	NINETIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
NINETY-FIRST SUBSCRIBER GROUP	NINETY-SECOND SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ein the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)
	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market
and Syndicated Exclusivity Surcharge for Partially Distant Stations	 Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none ent Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. 	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
	NINETY-THIRD SUBSCRIBER GROUP	NINETY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	NINETY-FIFTH SUBSCRIBER GROUP	NINETY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for this subscriber group subject to the surcharge computation	total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 ☐ First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figure your actual calculations on this form. 	for the VHF Grade B contour stations that were classified as atter zero. of DSEs used to compute the surcharge.
	NINETY-SEVENTH SUBSCRIBER GROUP	NINETY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	NINETY-NINTH SUBSCRIBER GROUP	ONE HUNDREDTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
9	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GF If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as define by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commutation this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the subscriber group and the surcharge for each subscriber group using the subscriber group and the subscriber grou	up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.
	ONE HUNDEDED FIRST CUROCOURED ODOUR	ONE HUNDEDED GEGOND CUIDCODIDED ODOLID
	ONE HUNDERED FIRST SUBSCRIBER GROUP	ONE HUNDERED 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	ONE HUNDERED THIRD SUBSCRIBER GROUP	ONE HUNDERED FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page 1) and the surcharge for in the boxes above.	or each subscriber group as shown ge 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of		
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 ☐ First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fix your actual calculations on this form. 	o for the VHF Grade B contour stations that were classified as inter zero. of DSEs used to compute the surcharge.
	ONE HUNDRED FIFTH SUBSCRIBER GROUP	ONE HUNDRED SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	ONE HUNDRED SEVENTH SUBSCRIBER GROUP	ONE HUNDRED EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
	ONE HUNDRED NINTH SUBSCRIBER GROUP	ONE HUNDRED TENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	ONE HUNDRED ELEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWELVTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also comp Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as de by section 76.5 of FCC rules in effect on June 24, 1981: Grade B contour stations listed in block A, paths of this schedule. Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, paths of 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 in block B, paths of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of the schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not nee your actual calculations on this form.	
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP	ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (particle)	or each subscriber group as shown ge 7)
	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
9 Computation	by section 76.5 of FCC rules in effect on June 24, 1981:	
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as iter zero. of DSEs used to compute the surcharge.
	ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP	ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	First Group	Second Group
	ONE HUNDRED NINTEENTH SUBSCRIBER GROUP	ONE HUNDRED TWENTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

ARGE FOR EACH SUBSCRIBER GROUP exempt in Part 7, you must also compute a f your cable system is located in as defined ajor television market B contour stations listed in block A, part 9 of de B contour stations that were classified as compute the surcharge. in block D, section 3 or 4 of part 7 of this o the particular group. You do not need to show DRED TWENTY-SECOND SUBSCRIBER GROUP the VHF DSEs
exempt in Part 7, you must also compute a f your cable system is located in as defined ajor television market B contour stations listed in block A, part 9 of de B contour stations that were classified as compute the surcharge. in block D, section 3 or 4 of part 7 of this o the particular group. You do not need to show
B contour stations listed in block A, part 9 of de B contour stations that were classified as compute the surcharge. in block D, section 3 or 4 of part 7 of this o the particular group. You do not need to show
the VHF DSEs
4. 5. 4.005
act line 2 from line 1 enter here. This is the number of DSEs for ubscriber group ect to the surcharge outation
D EXCLUSIVITY ind Group
DRED TWENTY-FOURTH SUBSCRIBER GROUP
the VHF DSEs
eact line 2 from line 1 enter here. This is the number of DSEs for ubscriber group ect to the surcharge outation
D EXCLUSIVITY Group
group as shown

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	BLUE RIDGE CABLE TECHNOLOGIES INC	27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	Base Rate Fee INSTRUCTIONS:	
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	rcial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none ent Step 3: In line 3, subtract line 2 from line 1. This is the total number of	
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 Stations	schedule. In making this computation, use gross receipts fig your actual calculations on this form.	ures applicable to the particular group. You do not need to show
- Clairens	your detail carearations on this formi	
	ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group
	T ilot Group	- Cooolid Glodp
	ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	Tillia Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 feleviston market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge for part of the fell part of the part of the surcharge for part of the subscriber group for the VHF Grade B contour stations listed in block A, part 9 of the Surcharge for part of the subscriber group for the VHF Grade B contour stations listed in block A, part 9 of the Surcharge for part of the subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs. In line 2, give the total DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge for part of the subscriber group for the VHF Grade B contour stations that were classified as Subscriber group for the VHF Grade B contour stations that were classified as Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge for part of the subscriber group subject to subscriber group subject to the surcharge. ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP Une 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group. SYNDICATED EXCLUSIVITY SURCHARGE Third Group. SYNDICATED EXCLUSIVITY SURCHARGE Third Group. SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge or each subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge or each subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge or each subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each su	Name	BLUE RIDGE CABLE TECHNOLOGIES INC	27953
Syndicated Exclusivity Surcharge. Indicated 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: Separate		BLOCK B: COMPUTATION OF SYNDICATED EXCLU	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partialty Distant Stations ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group group for the VHF Grade B contour stations that were classified as Exempt DSEs in line 3: subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 3: In line 3: subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge of proper or each subcomber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group SYNDICATED EXCLUSIVITY SUBCHARGE Computation SYNDICATED EXCLUSIVITY SUBCHARGE Computation SYNDICATED EXCLUSIVITY SUBCHARGE Computation SYNDICATED EXCLUSIVITY SUBCHARGE Computation SYNDICATED EXCLUSIVITY SUBCHARGE Fourth Group SYNDICATED EXCLUSIVITY SUBCH	9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Base Rate Fea and Syndicated Exclusivity Surcharge for Exclusivity Surcharge for Partially Distant Stations 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 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 for Partially Distant Stations Step 3: One Hundred Type In the Statistical Interest of DSEs and subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In one enter zero. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule in making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group. SYNDICATED EXCLUSIVITY SURCHARGE Chief To from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SYN			
Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE Cheer of the Exempt DSEs. Line 2: Enter the VHF DSEs. Line 2: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE Third Group. \$ SYNDICATED EXCLUSIVITY SURCHARGE Third Group. \$ SYNDICATED EXCLUSIVITY SURCHARGE Third Group. \$ SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group. \$ SYNDICATED EXCLUSIVITY	Base Rate Fee and Syndicated	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for community this schedule.	nercial VHF Grade B contour stations listed in block A, part 9 of
Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP	Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none e	enter zero.
Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group Signature 1: Enter the VHF DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group Signature 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total	Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts f	ne formula outlined in block D, section 3 or 4 of part 7 of this
Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation			
Line 2: Enter the Exempt DSEs		ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED THIRTIETH SUBSCRIBER GROUP
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group		Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
SYNDICATED EXCLUSIVITY SURCHARGE First Group		and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
SURCHARGE First Group			
Line 1: Enter the VHF DSEs		SURCHARGE	SURCHARGE
Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
SYNDICATED EXCLUSIVITY SURCHARGE Third Group		and enter here. This is the total number of DSEs for this subscriber group	and enter here. This is the total number of DSEs for this subscriber group
SURCHARGE Third Group			
Third Group \$ Fourth Group \$			
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)			
		SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo in the boxes above. Enter here and in block 4, line 2 of space L (page)	r each subscriber group as shown ge 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation		
of Base Rate Fee and Syndicated Exclusivity	First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	o for the VHF Grade B contour stations that were classified as
Surcharge for Partially Distant	 Exempt DSEs in block C, part 7 of this schedule. If none e Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fine. 	of DSEs used to compute the surcharge.
Stations	your actual calculations on this form.	
	ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for this subscriber group subject to the surcharge computation	total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	each subscriber group as shown e 7)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER G		
9 Computation	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute 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:		
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 □ First 50 major television market □ Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 		
	ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SURCHARGE First Group	SURCHARGE Second Group	
	ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED FORTIETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown • 7)	

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
9	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 must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined	
Computation of Base Rate Fee	by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market INSTRUCTIONS:	☐ Second 50 major television market
and Syndicated Exclusivity Surcharge for Partially Distant Stations	 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 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 	
	ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FORTY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market	
	ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	First Group	Second Group
	ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GR		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined		
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for	by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commthis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none erections in the schedule of the schedule of the schedule of the schedule. If none erections is the schedule of the schedule of the schedule of the schedule. If none erections is the schedule of	o for the VHF Grade B contour stations that were classified as nter zero.	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the	·	
	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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
	ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)	

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of the schedule. 	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this gures applicable to the particular group. You do not need to show
	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

Name	BLUE RIDGE CABLE TECHNOLOGIES INC	SYSTEM ID# 27953	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GF		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	First 50 major television market Second 50 major television market Second 50 major television market Second 50 major television market 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 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SURCHARGE First Group	SURCHARGE Second Group	
	ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED SIXTIETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)	