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					
	\$					
3-1-21	ALLOCATION NUMBER					

SA3E Long Form

Return completed workbook by email to:

coplicsoa@copyright.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											
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account Check here if this is the system's first filing. If not, enter the system's ID	es of the cable syste on the last day of the unting period.	m. ne accounting period should st		40744							
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM											
	The Municipal Communications Utility of the City of	Cedar Falls Id	owa									
				40744								
				40744	2020/2							
	PO Box 769, 1 Utility Parkway Cedar Falls, Iowa, 50613											
С	INSTRUCTIONS: In line 1, give any business or trade names used to i	•										
	names already appear in space B. In line 2, give the mailing address o	f the system, if dit	ferent from the address given	ven in space	В.							
System	1 IDENTIFICATION OF CABLE SYSTEM:											
	MAILING ADDRESS OF CABLE SYSTEM:											
	2 (Number, street, rural route, apartment, or suite number)											
	(City, town, state, zip code)											
D	Instructions: For complete space D instructions, see page 1b. Identify with all communities.	only the frst com	munity served below and r	elist on page	e 1b							
Area Served	CITY OR TOWN	STATE										
First												
Community	Below is a sample for reporting communities if you report multiple ch	annel line-ups in S	Space G.									
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB G	SRP#							
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.

ORM SA3E. PAGE 1b.			ACCOUNT	ING PERIOD: 2020/2						
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
The Municipal Communications Utility of the City of Cedar Falls low	a		40744							
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. 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., or all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community	e column blank. I levant community	f you report any s with a subscribe	tations r group,							
channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber gro									
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#							
		***************************************		First						
				Community						
				See instructions for						
				additional information						
				on alphabetization.						
				Add rows as necessary.						

FORM SA3E. PAGE 2. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40744 The Municipal Communications Utility of the City of Cedar Falls Iowa SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES Ε In General: The information in space E should cover all categories of secondary transmission service of the cable

Secondary Transmission Service: Subscribers and Rates

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

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

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

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

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

BL	OCK 1		BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
 Service to first set 	6,962	\$38/Mo			
 Service to additional set(s) 					
 FM radio (if separate rate) 					
Motel, hotel	235	\$5.74/Mo			
Commercial	2,162	\$5.74/Mo			
Converter					
 Residential 	5,692	\$2.00/Mo			
 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	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	RATE	CATEGORY OF SERVICE	RATE	
Continuing Services:		Installation: Non-residential			
• Pay cable		Motel, hotel			
 Pay cable—add'l channel 		Commercial			
 Fire protection 		• Pay cable			
Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set	\$ 50.00	Burglar protection			
Additional set(s)		Other services:			
 FM radio (if separate rate) 		Reconnect	\$ 25.00		
 Converter 		Disconnect			
		Outlet relocation	\$ 35.00		
		Move to new address	\$ 25.00		

	LEGAL NAME OF OWN	IER OF CABLE S'	YSTEM:			SYSTEM ID)# Name
	The Municipal	Communica	tions Utili	ty of the City	of Cedar Fall	s Iowa 4074	.4 Name
PR	IMARY TRANSMITTE	RS: TELEVISIO	ON				
ca	rried by your cable s	system during t	he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under	G
76	.59(d)(2) and (4), 76	6.61(e)(2) and ((4), or 76.63 (referring to 76.6	_	tain network programs [sections and (2) certain stations carried on a	Primary
su	bstitute program bas Substitute Basis S				s carried by your	cable system on a substitute program	Transmitters: Television
	sis under specifc FO	CC rules, regula	ations, or autl	norizations:		nent and Program Log)—if the	
	station was carried	•		st it iii space i (ti	ne opeciai otaten	ient and i rogram Log/—ii the	
• L		formation cond				itute basis and also on some other of the general instructions located	
			sign. Do not	report originatio	n program service	es such as HBO, ESPN, etc. Identify	
				_	_	ation. For example, report multi-	
	st stream as WET <i>P</i> ETA-simulcast).	A-2 . Simulcast	streams mus	t be reported in	column i (list eac	ch stream separately; for example	
	Column 2: Give the			•		tion for broadcasting over-the-air in	
	which your cable sy	•	•	annel 4 in Was	hington, D.C. This	s may be different from the channel	
	Column 3: Indicate	in each case	whether the s			ependent station, or a noncommercial	
						cast), "I" (for independent), "I-M" ommercial educational multicast).	
						the paper SA3 form.	
n l e						es". If not, enter "No". For an ex-	
pia	anation of local servi Column 5: If you ha					e paper SA3 form. stating the basis on which your	
	•		•	• •	•	ntering "LAC" if your cable system	
ca	rried the distant stat	•				capacity. y payment because it is the subject	
of						stem or an association representing	
	•			•		ary transmitter, enter the designa-	
						ther basis, enter "O." For a further ed in the paper SA3 form.	
	Column 6: Give the	e location of ea	ch station. Fo	or U.S. stations,	list the communit	y to which the station is licensed by the	
	CC. For Mexican or C				•	h which the station is identifed.	
_	To a you are amen			EL LINE-UP		i diamor into ap.	
1	CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
'-	SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
		NUMBER	STATION	,	(If Distant)		
							See instructions for
							additional information
							on alphabetization.

LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	
The Municipal	Communica	tions Utili	ty of the City	of Cedar Falls	s Iowa 40744	Name
PRIMARY TRANSMITTE	RS: TELEVISIO)N				
carried by your cable s	system during to ions in effect o	he accounting n June 24, 19	g period, except 981, permitting the	(1) stations carrie he carriage of cert	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G
substitute program bas	sis, as explaine	ed in the next	paragraph.	· / · / · · · · · · · · · · · · · · · ·	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0Do not list the station station was carried	here in space	G—but do lis		ne Special Statem	ent and Program Log)—if the	
• List the station here,	and also in sparformation cond	ace I, if the st			tute basis and also on some other of the general instructions located	
Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast).	ch station's call associated wit a-2". Simulcast	h a station ac streams mus	ccording to its over the temperature of the tempera	ver-the-air designa column 1 (list eac	es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example	
	se. For example	e, WRC is Ch	-		tion for broadcasting over-the-air in may be different from the channel	
Column 3: Indicate educational station, by (for independent multipersonal for the meaning of the	e in each case of entering the le cast), "E" (for n ese terms, see	whether the setter "N" (for noncommercian page (v) of the	etwork), "N-M" (al educational), d e general instru	(for network multic or "E-M" (for nonce octions located in t		
planation of local servi Column 5: If you ha	ice area, see p ave entered "Y	age (v) of the es" in column	general instructus 4, you must co	tions located in the mplete column 5,	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
of a written agreement	ion of a distant entered into o	t multicast str n or before Ju	eam that is not a une 30, 2009, be	subject to a royalt etween a cable sy	y payment because it is the subject stem or an association representing	
tion "E" (exempt). For explanation of these th	simulcasts, als ree categories	o enter "E". If , see page (v	you carried the) of the general	channel on any or instructions locate	try transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the	
	Canadian statio	ns, if any, giv	ve the name of t	he community with	n which the station is identifed.	
		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	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40744 The Municipal Communications Utility of the City of Cedar Falls Iowa 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 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION **CARRIAGE** SIGN CHANNEL OF (Yes or No) NUMBER **STATION** (If Distant)

The Municipal Communications Utility of the City of Cedar Falls lowa Repairs Transmitters: Television Repairs Transmitters: Television Repairs Transmitters: Television station (including translator stations and low power television stations) and control by your cable system during the accounting period, except (1) stations carried only on a part-time basis under PCD dies and registers (accounting the carriage of carried may be carried to the CPD dies and registers) and (1) that the CPD dies are the CPD dies	LEGAL NAME OF OWN	NER OF CABLE S'	YSTEM:			SYSTEM ID#	
General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules an degulations in effect on June 24, 1981, permitting the carriage of certain network programs Jescitions 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **On to this the station here, and also in space (- the to list it in space the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space (- 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 associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast streams multicast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 4: In indicate in each case whether the station is a network station, or a noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. **Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating th	The Municipal	Communica	ations Utili	ty of the City	of Cedar Falls	s Iowa 40744	Name
CC ulum 1. List each station is call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "META-2". Simulcast streams must be reported in column 1, (list each stream), Por example well-of indicate in each case whether the station, as noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network), "N-M" (for network), "indicate in each case whether the station, as no apart-time basis under specific FCC rules, regulations, or authorizations: List the station here, and also in space I, if the station was carried by your cable system on a substitute program 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 streams "WETA-2". 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), "T" (for independent), "H" (for independent multicast), "E" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subje	PRIMARY TRANSMITT	ERS: TELEVISION	ON .				
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 basis under specific FCC rules, regulations, or authorizations: **To hon clist the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **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), 'E'' (for independent multicast), 'E'' (for network), 'N-M'' (for network multicast), 'F' (for independent), 'I-M'' (for independent multicast), 'E'' (for independent multicast), 'E'' (for independent multicast), 'E'' (for independent multicast), 'E'' (for independent multicast), 'F'' (for independent multicast), 'E'' (for independent multicast), 'E'' (for independent multicast), 'E'' (for independent mu	carried by your cable	system during t	the accounting	g period, except	t (1) stations carrie	ed only on a part-time basis under	G
Television Televi	_				_	. •	Primary
basis under specific FCC rules, regulations, or authorizations: *Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. *List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. *Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as occidated 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), "If (for independent)," "I" (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		•					
• 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 multi-cast stream associated with a station according to its over-the-air designation. For example, report multi-cast streams 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" (tor 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 on a part-time basis beca			•	•	s carried by your o	cable system on a substitute program	Television
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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 1. CALL SIGN SIGN CHANNEL CHANNEL SIGN CHANNEL CHANNE		•		tation is a netwo	ork station, an inde	ependent station, or a noncommercial	
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CHANNEL LINE-UP AD 1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE					•		
SIGN CHANNEL OF (Yes or No) CARRIAGE	,		•		•	·	
SIGN CHANNEL OF (Yes or No) CARRIAGE	1 CALL	2 B'CAST	3 TYPE	4 DISTANT?	5 BASIS OF	6 LOCATION OF STATION	
				_		C. LOCATION OF STATION	
		NUMBER	STATION	, ,	(If Distant)		
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U.S. Copyright Office

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LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	M-
The Municipal	Communica	ations Utili	ty of the City	of Cedar Falls	s Iowa 40744	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
carried by your cable s	system during t	he accounting	g period, except	(1) stations carrie	and low power television stations) d only on a part-time basis under	G
_				=	ain network programs [sections and (2) certain stations carried on a	Primary
substitute program bas	sis, as explaine	ed in the next	paragraph.	() () () ()	` ,	Transmitters:
		•	•	s carried by your c	able system on a substitute program	Television
basis under specifc F0Do not list the station		•		he Special Statem	ent and Program Log)—if the	
station was carried	only on a subs	stitute basis.	•	·	· .	
	nformation cond				tute basis and also on some other of the general instructions located	
· ·		sign. Do not	report origination	on program service	es such as HBO, ESPN, etc. Identify	
			-	_	tion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams mus	t be reported in	column 1 (list eac	h stream separately; for example	
	e channel num	ber the FCC I	has assigned to	the television stat	ion for broadcasting over-the-air in	
_			nannel 4 in Was	hington, D.C. This	may be different from the channel	
on which your cable sy Column 3: Indicate			tation is a netwo	ork station, an inde	ependent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
· ·	, ,		•	,	ommercial educational multicast).	
For the meaning of the Column 4: If the st		. • , ,	•		he paper SA3 form. es". If not, enter "No". For an ex-	
planation of local servi						
•			•	•	stating the basis on which your	
cable system carried t		-	• .	•	tering "LAC" if your cable system	
	•				payment because it is the subject	
of a written agreement	t entered into o	n or before Ju	une 30, 2009, b	etween a cable sys	stem or an association representing	
					ry transmitter, enter the designa- ther basis, enter "O." For a further	
					ed in the paper SA3 form.	
Column 6: Give the	e location of ea	ach station. Fo	or U.S. stations,	list the community	y to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing				-	which the station is identifed.	
Note: If you are utilizing	ig multiple cha	-	EL LINE-UP		channer ime-up.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NONDER	STATION		(II Distailt)		

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LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	
The Municipal	Communica	tions Utili	ty of the City	of Cedar Falls	s Iowa 40744	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	DN .				
In General: In space (carried by your cable s	G, identify ever system during t	y television st he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (ed in the next	referring to 76.6 paragraph.	1(e)(2) and (4))];	tain network programs [sections and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0	CC rules, regulant in the contract of the cont	ations, or auth G—but do lis	norizations:		nent and Program Log)—if the	
	formation cond				itute basis and also on some other of the general instructions located	
each multicast stream cast stream as "WETA	associated wit	h a station ac	cording to its ov	ver-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multich stream separately; for example	
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Column 3: Indicate educational station, by	e in each case of the le	whether the setter "N" (for n	etwork), "N-M"	(for network multic	ependent station, or a noncommercial cast), "I" (for independent), "I-M" ommercial educational multicast).	
For the meaning of the	ese terms, see ation is outside	page (v) of the the local ser	e general instru vice area, (i.e. "	ctions located in t distant"), enter "Y	he paper SA3 form. es". If not, enter "No". For an ex-	
Column 5: If you ha	ave entered "Y he distant stati	es" in column on during the	4, you must co accounting peri	mplete column 5, od. Indicate by en	stating the basis on which your stering "LAC" if your cable system	
of a written agreement	entered into o	n or before Ju	une 30, 2009, be	etween a cable sy	y payment because it is the subject stem or an association representing transmitter, enter the designa-	
explanation of these th	ree categories	, see page (v) of the general	instructions locate	ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing		nnel line-ups,	use a separate	space G for each	n which the station is identifed. channel line-up.	
	1	CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40744 The Municipal Communications Utility of the City of Cedar Falls Iowa 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 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION **CARRIAGE** SIGN CHANNEL OF (Yes or No) NUMBER **STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40744 The Municipal Communications Utility of the City of Cedar Falls Iowa 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 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION **CARRIAGE** SIGN CHANNEL OF (Yes or No) NUMBER **STATION** (If Distant)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40744 The Municipal Communications Utility of the City of Cedar Falls Iowa 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 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION **CARRIAGE** SIGN CHANNEL OF (Yes or No) NUMBER **STATION** (If Distant)

LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	
The Municipal	Communica	tions Utili	ty of the City	of Cedar Fall	s Iowa 40744	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	DN .				
In General: In space (carried by your cable s	G, identify ever system during t	y television st he accounting	g period, except	(1) stations carrie	s and low power television stations) ed only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (ed in the next	referring to 76.6 paragraph.	61(e)(2) and (4))];	tain network programs [sections and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0	CC rules, regulant here in space	ations, or autl G—but do lis	horizations:		nent and Program Log)—if the	
	nformation cond				itute basis and also on some other of the general instructions located	
each multicast stream cast stream as "WETA	associated wit	h a station ac	ccording to its ov	ver-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multi- ch stream separately; for example	
its community of licens	se. For example	e, WRC is Ch	•		tion for broadcasting over-the-air in may be different from the channel	
educational station, by	e in each case of the least of	whether the setter "N" (for n	etwork), "N-M"	(for network multic	ependent station, or a noncommercial cast), "I" (for independent), "I-M"	
For the meaning of the	ese terms, see ation is outside	page (v) of the the local ser	ne general instru vice area, (i.e. "	ctions located in t distant"), enter "Y	es". If not, enter "No". For an ex-	
Column 5: If you ha	ave entered "Y he distant stati	es" in column on during the	4, you must co accounting peri	mplete column 5, iod. Indicate by er	stating the basis on which your ntering "LAC" if your cable system	
For the retransmiss of a written agreement	sion of a distan t entered into o	t multicast str n or before Ju	eam that is not une 30, 2009, be	subject to a royalt etween a cable sy	y payment because it is the subject stem or an association representing ary transmitter, enter the designa-	
tion "E" (exempt). For explanation of these th	simulcasts, als rree categories	o enter "E". If , see page (v	you carried the of the general	channel on any o	ther basis, enter "O." For a further ed in the paper SA3 form. The sy to which the station is licensed by the	
	Canadian statio	ons, if any, giv	ve the name of t use a separate	he community with space G for each	h which the station is identifed.	
		CHANN	EL LINE-UP	AW		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40744 The Municipal Communications Utility of the City of Cedar Falls Iowa PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Transmitters:** receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. **Column 1:** Identify the call sign of each station carried. **Column 2:** State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). **CALL SIGN** 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 The Municipal Commu			e City of Cedar Falls I	owa		S	YSTEM ID# 40744	Name
SUBSTITUTE CARRIAGI In General: In space I, ident substitute basis during the a explanation of the programm form.	ify every nor	nnetwork televi eriod, under spe	sion program broadcast by a	a distant stati CC rules, regu	ılations, or aut	horizations	. For a further	Substitute
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? ———————————————————————————————————								
2. LOG OF SUBSTITUTE In General: List each substiclear. If you need more spate Column 1: Give the title period, was broadcast by a under certain FCC rules, rescaled for further informatitles, for example, "I Love Lolumn 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Carcolumn 5: Give the more first. Example: for May 7 gives Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	ce, please a of every nor distant stati gulations, o tion. Do not ucy" or "NE or was broad sign of the stationation stationation and day be "5/7." The swhen the Example: a cer "R" if the and regulation ogramming	attach addition anetwork televion and that your authorization at use general as Basketball: deast live, enterstation broades on's location (thous, if any, the when your system is substitute program carrillisted program cons in effect deattach additional as the program carrillisted	al pages. ision program (substitute pour cable system substitute as. See page (vi) of the ger categories like "movies", or 76ers vs. Bulls." In "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your eled by a system from 6:01: I was substituted for programing the accounting period	orogram) that d for the properal instruction "basketball" lo." am. station is lice station is ide program. Use cable system 15 p.m. to 6:: amming that d; enter the less to the program in the less than the less th	ensed by the land the sensed by the land the numerals, where the sensed by the land	ccounting another stand the paper of program FCC or, in with the more accurate ould be was require listed pro	ntion r nth ely	
S	UBSTITUT	E PROGRAM	<u> </u>		EN SUBSTIT IAGE OCCU		7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIN FROM — —	MES TO	DELETION	

ACCOUNTING PERIOD: 2020/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name The Municipal Communications Utility of the City of Cedar Falls Iowa 40744 **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 parttime 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** DATE **FROM** TO DATE FROM TO

	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
The	e Municipal Communications Utility of the City of Cedar Falls Iowa	40744	Name					
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)								
IMP	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	\$ 1,543,567.98 (Amount of gross receipts)						
InstruConIf your feeIf you accompany	YRIGHT ROYALTY FEE Ictions: Use the blocks in this space L to determine the royalty fee you owe: Inplete block 1, showing your minimum fee. Inplete block 2, showing whether your system carried any distant television stations. In system did not carry any distant television stations, leave block 3 blank. Enter the amount of the lock 1 on line 1 of block 4, and calculate the total royalty fee. In system did carry any distant television stations, you must complete the applicable part of the lock 1 of the DSE calculate to your statement of account.	rts of the DSE Schedule	L Copyright Royalty Fee					
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ck 3 below.	entered on line 1 or						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be en elow.	ntered on line 2 in block						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below.	ld be entered on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	is 1.064 percent of the						
	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.	\$ 1,543,567.98						
	This is your minimum fee.	\$ 16,423.56						
Block 2	 DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. 	n 4, you must check d?						
Block	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	_\$						
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00						
	Line 3. Add lines 1 and 2 and enter here	\$ -						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 16,423.56	Cable systems					
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	0.00	submitting additional					
	zero. Line 3. 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					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 17,148.56	appropriate form for submitting the					
	EFT Trace # or TRANSACTION ID #		additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Significant structions located in the paper SA3 form and the Excel instructions ta							

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
INAME	The Municipal Communications Utility of the City of Cedar Falls Iowa	40744
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	stations
	Enter the total number of channels on which the cable system carried television broadcast stations	27
	Enter the total number of activated channels on which the cable system carried television broadcast stations	
	and nonbroadcast services	263
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 David Schilling Telephone	319-268-5265
	Address 1 Utility Parkway (Number, street, rural route, apartment, or suite number)	
	Cedar Falls, Iowa, 50613	
	(City, town, state, zip)	
	Email david.schilling@cfunet.net Fax (optional) 319-266-8	8158
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regu	ulations.)
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 E	3; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable so in line 1 of space B and that the owner is not a corporation or partnership; or	system as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	ner of the cable system
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	I herein
	/s/ Steven E. Bernard	
	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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus comparts.	•
	Typed or printed name: /s/ Steve E. Bernard	
	Title: General Manager/CEO (Title of official position held in corporation or partnership)	
	Date: February 26, 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.

ACCOUNTING PERIOD: 2020/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
The Municipal Communications Utility of the City of Cedar Falls Iowa 40744	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Special Statement 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 Mailing Address 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 3 Multiply line 2 by the number of days late and enter the sum here	-
space L, (page 7)	-
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	E SYSTEM:			S'	YSTEM ID#			
1	The Municipal Commun	ications Utili	ty of the City of Cedar	Falls Iowa		40744			
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line				0.00				
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."								
Computation of DSEs for									
Category "O"	CATEGORY "O" STATIONS: DSEs								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Add rows as									
necessary.									
Remember to copy all									
formula into new									
rows.									
						·			
l		I				I			

	LEGAL NAME OF (OWNER OF CABLE	SYSTEM:						S	YSTEM ID#
Name	The Municip	al Communio	ations Utility of th	e City of C	edar Falls	lowa				40744
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		NUMBER OF HOURS CARRIED BY SYSTEM	3. NUMB OF HC STATI ON All	ER OURS ON	4. BASIS OF CARRIAG VALUE	=	5. TYPE VALUE	6. DS	SE
			÷		=		X		=	
			÷		=		X		=	
			÷		=		X		=	
			÷		_		х		=	
			<u>-</u>		=		X		=	
			÷ ÷				×		=	
	Add the DSEs	of each station.	Y LAC STATIONS: ne 2 of part 5 of this se	chedule,		▶		0.00		
Computation of DSEs for Substitute-Basis Stations	space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted							orm).		
			SUBSTITUTE	-BASIS S	STATIONS	S: COMPUTA	ATION OF	DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAM	OF DA	YS	DSE	1. CALL SIGN	2. NUM OF PRC	IBER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=				<u>+</u>		=
			÷	=				÷		=
			÷	=				÷		=
			<u>÷</u>	=				<u>+</u>		= <u></u>
			÷	=				÷		=
	Add the DSEs	of each station.	TE-BASIS STATIONS ne 3 of part 5 of this se					0.00		
5		ER OF DSEs: Gives applicable to you	ve the amounts from the our system.	e boxes in pa	rts 2, 3, and	4 of this schedul	le and add the	em to provide	the total	
Total Number		f DSEs from part					>		0.00	
of DSEs		f DSEs from part				<u> </u>			0.00	
	3. Number o	f DSEs from part					-		0.00	
	TOTAL NUMBE	R OF DSEs						>		0.00

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

LEGAL NAME OF O	WNER OF CABLE S	SYSTEM:					S	YSTEM ID#	
The Municipal	Communication	ons Utility	of the City	of Cedar Falls	Iowa			40744	Name
Instructions: Bloc In block A: • If your answer if '	·		art 6 and part 7	of the DSE sched	lule blank and	complete part	8, (page 16) of th	e	6
schedule. If your answer if '	"No," complete blo	cks B and C	below.						
	BLOCK A: TELEVISION MARKETS								Computation of
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981? Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7. No—Complete blocks B and C below.									3.75 Fee
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.))	
Column 2: BASIS OF PERMITTED CARRIAGE	Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station. BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to								
Column 3:		e stations ide	ntified by the le	parts 2, 3, and 4 o			rksheet on page ′	14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of l	DSEs from	part 5 of this s	schedule			·		
Line 2: Enter the	·							-	
Line 3: Subtract (If zero, le				of DSEs subject 7 of this schedule		ate. 		0.00	
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				х		partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 and	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

	OWNER OF CABLE		of the City	of Cedar Falls	Iowa			7STEM ID# 40744	Name
		BLOCK	A: TELEVIS	SION MARKETS	(CONTIN	UED)			_
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation 3.75 Fee
									001
		<u> </u>							

	LEGAL NAME OF OWN	NER OF CABLE	SYSTEM:							S	YSTEM ID#
Name	The Municipal	Communic	ations Utility	of the City of	C	e	dar Falls Iowa				40744
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identified 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, 1981 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 e 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 designated statement of account on fle in the Licensing Division.									981. De entered	
		DEDMITT	-D DOE FOD OT	TIONS OF BRI		_	NI A DADT TIME AN	ID OLIDOTI	TUTE DAGIO		
	1. CALL SIGN	PERMITTI 2. PRIC DSE	OR 3. AC	BE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTI PERIOD CARRIAGE DSE DSE							
7 Computation of the		"Yes," comple	ete blocks B and 0		e pa	ar	t 8 of the DSE sched	lule.			
Syndicated			BLOC	K A: MAJOR	TE	Εl	LEVISION MARK	ET			
Exclusivity		aabla ayatam y	uithin a tan 100 ma	ior toloviolon m	ء ماء ۔	~4	an defend by anotion	76 F of FO	C mulaa ia affaat	i luna O/	1 40040
Surcharge	• Is any portion of the	,	•	ijor television ma	arke	et			o rules in effect	June 24	1, 1981?
	Yes—Complete	blocks B and	· C .				No—Proceed to	part 8			
	BLOCK B: Ca	arriage of VHF	-/Grade B Contou	r Stations			BLOCK	(C: Compu	itation of Exem	pt DSEs	3
	Is any station listed in commercial VHF statior in part, over the ca	ion that places				ni	Vas any station listed ity served by the cab o former FCC rule 76	le system p	•	-	
			th its appropriate pe	rmitted DSE			Yes—List each st			ate permi	tted DSE
	X No—Enter zero a	and proceed to p	part 8.				X No—Enter zero a	nd proceed t	o part 8.		
	CALL SIGN	DSE	CALL SIGN	DSE			CALL SIGN	DSE	CALL SIG	SN	DSE
			TOTAL DSEs	0.00				<u> </u>	TOTAL DS	Es	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa	SYSTEM ID# 40744	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,543,567.98	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 any	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	DE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2020/2

	LEGAL NAM		ULE. PAGE 16. SYSTEM ID#
Name		The Municipal Communications Utility of the City of Cedar Falls Iowa	40744
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	
8 Computation of Base Rate Fee	You me 6 was In blo If you If you blank What i	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. It answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. It answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. It is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers becated within that station's local service area and others were located outside that area. For the definition of a station's "located area," see page (v) of the general instructions.	ow
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	_
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	0.00

U.S. Copyright Office

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

	AME OF OWNER OF CABLE SYSTEM: Municipal Communications Utility of the City of Cedar Falls Iowa 40744	Name
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4	A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$	8
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computation of
	C. Multiply line B by 3.000 and enter here ►	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1)	
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here \$	
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.00	
shall in	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-Space G.	9
In Gen receipt	Peral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	Computation of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. 2. Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	and Syndicated Exclusivity Surcharge for
must a	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. er, if your cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and
Step 1	Identify a Subscriber Group for Partially Distant Stations : For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	for Partially Permitted Stations
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located at the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by me token, the station is distant to the subscriber.)	
Step 3 subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
-	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
	n section:	
	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the	
	ibers in the group.	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions e paper SA3 form.	
page.	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show	

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your actual calculations on the form.

LEGAL NAME OF OWNER The Municipal Con			e City of	Cedar Falls Iowa			STEM ID# 40744	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU			SECOND	SUBSCRIBER GROUP	>	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIT	DOL	OALL GIGIN	DOL	OALL GIGIT	DOL	OALL GIOIN	DOL	Base Rate F
						-		and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
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 al	oove.	\$	0.00	

I4 Name		DED ODOLLO	OLIDOCE:	TE EEEO EOO E 4 O			0014.1	
	JP	SUBSCRIBER GROUP		TE FEES FOR EACH		SUBSCRIBER GROU		BL
	0			COMMUNITY/ AREA				COMMUNITY/ AREA
Computa	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndica			-			-		
Exclusiv Surchar			-					
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 Gro
- -								
<u> </u>	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup 	ase Rate Fee First Gro
		SUBSCRIBER GROUI		Base Rate Fee Secon		\$ SUBSCRIBER GROU		
				Base Rate Fee Secon COMMUNITY/ AREA	JP			S
D	JP				JP			OMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	S
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	SOMMUNITY/ AREA
D	JP 0	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA
	JP O	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	SEVENTH	CALL SIGN
	DSE O.00	SUBSCRIBER GROU	EIGHTH	COMMUNITY/ AREA	DSE O.00	SUBSCRIBER GROU	SEVENTH	OMMUNITY/ AREA CALL SIGN
	JP O	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN otal DSEs
	DSE O.00	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs
	DSE O.00	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE 0 0 0 0 0 0 0 0 0 0 0 0	CALL SIGN	DSE	COMMUNITY/ AREA

LEGAL NAME OF OWN The Municipal C			he City of	Cedar Falls Iowa			40744	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
_	NINTH	SUBSCRIBER GRO	DUP		TENTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
otal 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	
	EI EVENTU	SUBSCRIBER GRO	NID .		T\\/EL\/TU	SUBSCRIBER GROU	ID.	
COMMUNITY/ AREA		SOBSCRIBER GRO	0	COMMUNITY/ AREA		SOBSCRIBER GROC	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			0.00					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Door Data For The	1.0		0.00	Beer Bete Fee Fe	ulb O		0.00	
Base Rate Fee Third	a Group	\$	0.00	Base Rate Fee Four	tn Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		
and here and in bio	o, mic 1, 8	pado L (page 1)				Ψ		

4 Name	40744							
	D.			TE FEES FOR EACH				
9	0	SUBSCRIBER GROUI	RIEENIH	COMMUNITY/ AREA		SUBSCRIBER GROU	CIEENIH	THIR COMMUNITY/ AREA
Computat	U			COMMUNITY AREA	<u> </u>			COMMUNITY AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicat								
Exclusiv								
Surchar								
for								
Partially Distant								
Stations								
			-					
_								
.	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	auc	Gross Receipts First Gro
	0.00	Ψ	a 0.0up	Croco recorpto Cocom				
	0.00		и отоир	Cross resolpts seed.				
.	0.00	\$	·	Base Rate Fee Secon	0.00	\$		
 	0.00	\$	d Group	Base Rate Fee Secon			oup	Base Rate Fee First Gro
 = -	0.00		d Group	Base Rate Fee Secon	JP	\$ SUBSCRIBER GROU	oup	Jase Rate Fee First Gro
 	0.00	\$	d Group	Base Rate Fee Secon	JP		oup	Base Rate Fee First Gro
	0.00	\$	d Group	Base Rate Fee Secon	JP		oup	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	Sase Rate Fee First Gro
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	Sase Rate Fee First Gro
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIF
	0.00 P	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	TEENTH	FIFE COMMUNITY/ AREA
	0.00 P 0	\$ SUBSCRIBER GROUI	d Group	Base Rate Fee Secon S COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TEENTH	FIFE COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROUI	DSE	Base Rate Fee Secon S COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	FIF COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 P	\$ SUBSCRIBER GROUI CALL SIGN	DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	FIF COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 P	\$ SUBSCRIBER GROUI CALL SIGN	DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	DSE 0 0 0 0 0 0 0 0 0 0 0 0	CALL SIGN	DSE	Base Rate Fee First Gro FIF COMMUNITY/ AREA

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY	STEM ID# 40744	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
SEVEN	TEENTH	SUBSCRIBER GROU	IP	EIG	HTEENTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
							••••••	Distant
		-						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
NIN	TEENTH	SUBSCRIBER GROU	IP	TV	VENTIETH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	II as shown in the boxes ab	oove.	\$		

EGAL NAME OF OWNE			e City of	Cedar Falls Iowa		S	40744	Name
				ATE FEES FOR EACH				
TWEI	NTY-FIRST	SUBSCRIBER GROU	JP 0	TWENT COMMUNITY/ AREA	Y-SECOND	SUBSCRIBER GROU	P 0	9
SOMMONTI II AREA				COMMONT I/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		-						and
								Syndicate Exclusivit
		-						Surcharge
								for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
sase Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWE	NTY-THIRD	SUBSCRIBER GROU	JP	TWENT	Y-FOURTH	SUBSCRIBER GROU	Р	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					····			
		-						
					·····			
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	Group ne base rat	\$	0.00		n Group	\$		

R EACH SUBSCRIBER GROUP					
TWENTY-SIXTH SUBSCRIBER GROUP (/ AREA 0			SUBSCRIBER GRO	<u>ry-fifth</u>	
Comput	COMMUNITY/ AREA	U			COMMUNITY/ AREA
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Ra					
and					
Syndic			-		
Exclus Surch					
foi			-		
Partia			-		
Dista					
Statio		<mark>.</mark>			
			-		
0.00	Total DSEs	0.00			otal DSEs
ots Second Group \$ 0.00	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
				7	
ee Second Group \$ 0.00	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gro
TWENTY-EIGHTH SUBSCRIBER GROUP	TWENT	JP	SUBSCRIBER GRO	EVENTH	TWENTY-S
// AREA	COMMUNITY/ AREA	0			OMMUNITY/ AREA
DSE CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			A contract of the contract of		
			-		
			-		
	Total DSEs	0.00			otal DSEs
	Total DSEs Gross Receipts Fourth	0.00	\$	oup	
			\$	oup	Fotal DSEs Gross Receipts Third G

		try of the City of	Cedar Falls Iowa			40744	Name
			ATE FEES FOR EAC				
TWENTY-NIP DMMUNITY/ AREA	ITH SUBSCRIE	BER GROUP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	0	9
JIVIIVIONII I/ AREA		<u> </u>	COMMONT TO AREA				Computat
CALL SIGN DS	E CALL SI	GN 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	
oss Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
	<u> </u>			O. O. O. O.	<u>-</u>		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIRTY-FII	RST SUBSCRIE	ER GROUP	THIR	TY-SECOND	SUBSCRIBER GROU	IP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
DALL CION DO							
CALL SIGN DS	CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DS	CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
JALL SIGN DS	E CALL SI	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs	E CALL SI	GN DSE	Total DSEs	DSE	CALL SIGN	DSE	
	S CALL SI				CALL SIGN		
otal DSEs		0.00	Total DSEs			0.00	

131 / 3/31/	A. COMPUTATION		TE EEEO FOD FAOI				
	A: COMPUTATION RD SUBSCRIBER G		TE FEES FOR EACH		SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0/122 0/0/1	37.22 37314	302	07122 01011	302	07122 01011	302	Base Rate F
							and
							Syndicated
							Exclusivity
					-		Surcharge
							for
							Partially
							Distant Stations
							Otations
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
THIRTY-FIF	TH SUBSCRIBER G	ROUP	THI	DTV 01VTU	SUBSCRIBER GROU	ID	
			 	RTY-SIXTH	30B3CRIBER GROC)P	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	RTY-SIXTH	SOBSCRIBER GROC	0	
OMMUNITY/ AREA CALL SIGN DSE	CALL SIGN			DSE	CALL SIGN		
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
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	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
	CALL SIGN	0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN	DSE		DSE	

LEGAL NAME OF OWN The Municipal Co			ne City of	Cedar Falls Iowa			YSTEM ID# 40744	Name
				TE FEES FOR EACH				
		SUBSCRIBER GRO	UP 0	1	TY-EIGHTH	SUBSCRIBER GROU	1P 0	9
COMMUNITY/ AREA			U	COMMUNITY/ AREA			U	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicate
								Exclusivit Surcharge
		-						for
								Partially
		T						Distant
								Stations
Total 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	
TH	RTY-NINTH	SUBSCRIBER GRO			FORTIETH	SUBSCRIBER GROU	IP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes a	above.	\$		

				TE FEES FOR EAC				
FO	RTY-FIRST	SUBSCRIBER GRO	UP	FOF	RTY-SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	9 Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate I
								and
								Syndicate
								Exclusivit
								Surcharg for
								Partially
								Distant
								Stations
		II.	_					
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First (3roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First 0	3roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	•							
	RTY-THIRD	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
			<mark></mark>					
		-						
otal DSEs			0.00	Total DSEs			0.00	
	Group				rth Group		_	
	Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third		\$	0.00	Gross Receipts Fou		\$	0.00	
		\$	0.00			\$	_	
ross Receipts Third			0.00	Gross Receipts Fou			0.00	
ross Receipts Third ase Rate Fee Third	Group	\$	0.00	Gross Receipts Fou	rth Group		0.00	

LEGAL NAME OF OWI			he City of	Cedar Falls Iowa			40744	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
F	ORTY-FIFTH	SUBSCRIBER GRO	UP	FC	ORTY-SIXTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		-						and
		-						Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
otal 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	and Group	\$	0.00	
	•							
FOR I COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	0	
JOIWINONTI I/ AIREA				COMMONT IT AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DCC			0.00	
otal DSEs			0.00	Total DSEs			_	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	¢	0.00	Base Rate Fee Four	th Group	<u> </u>	0.00	
Juse Nate Fee IIIII	ι Οιουρ	\$	0.00	Dase Nate Fee Four	ит Отоир	\$	0.00	
Dana Barra =	Lille a T				ah a			
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		
		. (1.23-1)						

The Municipal Con	munica	tions Utility of th	e City of	Cedar Falls Iowa			40744	Name
				ATE FEES FOR EACH				
	Y-NINTH	SUBSCRIBER GROU			FIFTIETH	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
		-						and
		-						Syndicate
								Exclusivit Surcharg
		-						for
		-						Partially
								Distant
		-						Stations
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FIF	ΓY-FIRST	SUBSCRIBER GROU	JP	FIFT	Y-SECOND	SUBSCRIBER GROU	IP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				<u>II</u>				

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY	STEM ID# 40744	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
FIFT	Y-THIRD	SUBSCRIBER GROU	IP	FIFT	/-FOURTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
, , , , , , , , , , , , , , , , , , , ,					,			
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FIF	ΓY-FIFTH	SUBSCRIBER GROU	IP	FIF	TY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	II as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY	STEM ID# 40744	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
FIFTY-S	EVENTH	SUBSCRIBER GROU	IP	FIFT	Y-EIGHTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL CICIT	DOL	ONEE OF OTHER	502	O' LEE GIGIT	702	OALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
		-						Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FIFT	Y-NINTH	SUBSCRIBER GROU	IP		SIXTIETH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
-					•			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes at	oove.	\$		

	K A: COMP			ATE FEES FOR EAC		IBER GROUP		
	IRST SUBSC	CRIBER GRO	1UP	II SIV				
			0	COMMUNITY/ AREA		SUBSCRIBER GROU)P 0	9
				COMMONT 17 AREA	······································			Computat
CALL SIGN D	SE CAL	L 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	
Fross 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	
SIXTY-T	HIRD SUBSO	CRIBER GRO	UP	SIX	(TY-FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN D	SE CAL	L SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>					
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third Group	\$		0.00	Gross Receipts Fou	rth Group	\$	0.00	
								
	\$		0.00	Base Rate Fee Fou	rth Group	\$	0.00	

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY	STEM ID# 40744	Name
BL	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
SIX	ΓY-FIFTH	SUBSCRIBER GROU	IP	SIX	KTY-SIXTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
		-						and
		-						Syndicated
								Exclusivity
								Surcharge
								for
								Partially
		-				_		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	que	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
, , , , , , , , , , , , , , , , , , ,					. O. O. O.			
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SIXTY-S	EVENTH	SUBSCRIBER GROU	IP	SIXT	Y-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
T			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes at	oove.	\$		

	er of Cabli mmunica		e City of	Cedar Falls Iowa			YSTEM ID# 40744	Name
				TE FEES FOR EACH				
	XTY-NINTH	SUBSCRIBER GRO		ll		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		-						and
		-						Syndicate
								Exclusivity Surcharge
								for
		-						Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
•	•			,	·			
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVE	NTY-FIRST	SUBSCRIBER GRO	JP	SEVENT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		_						
		-						
			···					
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
		e fees for each subso	riber group	as shown in the boxes	above.	\$		

		f the City of				40744	Name
			ATE FEES FOR EACH			ID.	
SEVENTY-THI COMMUNITY/ AREA	RD SUBSCRIBER G	0	COMMUNITY/ AREA		SUBSCRIBER GROU	0	9
OWNINGTH TO AREA		U	COMMONT TO AREA			<u>U</u>	Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
							and
							Syndicat
							Exclusiv
							Surchar
							for Partiall
							Distan
							Station
otal DSEs		0.00	Total DSEs			0.00	
Fross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVENTY-FIF	TH SUBSCRIBER G	ROUP	SEVE	NTY-SIXTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE							
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	CALL SIGN			DSE	CALL SIGN		
otal DSEs		0.00	Total DSEs			0.00	
	CALL SIGN				CALL SIGN		
otal DSEs		0.00	Total DSEs			0.00	
otal DSEs		0.00	Total DSEs	h Group		0.00	

LEGAL NAME OF OWN The Municipal Co			he City of	Cedar Falls Iowa			40744	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	BER GROUP		
SEVENTY	/-SEVENTH	SUBSCRIBER GRO)UP	SEVE	NTY-EIGHTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
		П				П		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVE	NTY-NINTH	SUBSCRIBER GRO	DUP		EIGHTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
2.000 Noooipio IIIIIU	J. 54P	*		C. C.C. R. C. C. P. P. C. P. P. P. C. P.	.a. Oloup	*		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add tenter here and in bloc			criber group	as shown in the boxes	s above.	\$		
inter nere and in biod	л J, III IC 1, S	pace L (page 1)				Ψ		

	SAL NAME OF OWNER OF CABLE SYSTEM: e Municipal Communications Utility of the City of Cedar Falls Iowa 40744							Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
EIGH1	Y-FIRST	SUBSCRIBER GROU	IP	EIGHTY	'-SECOND	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL CICIT	DOL	OTTEL OTOTA	502	O' LEE GIGIT	702	CALLE GIGIT	502	Base Rate Fee
							()	and
								Syndicated
								Exclusivity
		-						Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GROU	IP	EIGHT	/-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	-	·		S. S		·		
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes at	oove.	\$		

		CABLE SYSTEM: nications Utility of the City of Cedar Falls Iowa 40744						Name
				ATE FEES FOR EACH				
	HTY-FIFTH	SUBSCRIBER GRO	JP 0	11	HTY-SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			U	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		-						and
		-						Syndicate
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
		-						
			···					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
	O. 0 up				.а Отоар	<u> </u>		
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
EIGHT	Y-SEVENTH	SUBSCRIBER GRO	JP	EIGH	TY-EIGHTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		_						
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				<u>II</u>				
			riber group	as shown in the boxes a	above.	•		
nter here and in bloc	ж э, iine 1, s	pace ∟ (page /)				\$		

	40744			pal Communications Utility of the City of Cedar Falls Iowa BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSO				
				TE FEES FOR EACH				
9	0	SUBSCRIBER GROU	NINTIETH	COMMUNITY/ AREA		SUBSCRIBER GROU	Y-NINTH	EIGH I COMMUNITY/ AREA
Computati				COMMONT IT AREA				COMMONIT IT AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and			-			-		
Syndicate							-	
Exclusivities Surcharg			-					
for						-		
Partially			-					
Distant								
Stations								
						-		
						-		
	0.00			Total DSEs	0.00			otal DSEs
	-	•	1.0			•		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
	0.00							
	0.00	\$	d Group	Base Rate Fee Secon	0.00	e Rate Fee First Group \$ 0.00		Base Rate Fee First Gro
		SUBSCRIBER GROU				SUBSCRIBER GROU		
								Base Rate Fee First Gro NINE COMMUNITY/ AREA
	P			NINET	JP			NINE
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINE ⁻ COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	'-SECOND	NINET COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	NINET COMMUNITY/ AREA
	DSE 0.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	CALL SIGN Cotal DSEs
	DSE	SUBSCRIBER GROU	DSE	NINET COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	NINE ⁻ COMMUNITY/ AREA

	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP					
NINETY-THIRD SUBSCRIBER GROUP UNITY/ AREA 0	NINE I Y-	FOURTH	SUBSCRIBER GROUP	0	9	
UNIT 1/ AREA	COMMONITY AREA				Computa	
SIGN DSE CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
					Base Rate	
					and	
<u> </u>					Syndicat	
					Exclusiv	
					Surchar for	
					Partiall	
					Distan	
					Station	
······································						
SEs 0.00	Total DSEs	•		0.00		
	Gross Receipts Second	Group	.	0.00		
Receipts First Group \$ 0.00	Gross Receipts Second	Group	\$	0.00		
tate Fee First Group \$ 0.00	Base Rate Fee Second	Group	\$	0.00		
NINETY-FIFTH SUBSCRIBER GROUP	NINE	ΓY-SIXTH :	SUBSCRIBER GROUP			
UNITY/ AREA0	COMMUNITY/ AREA					
				0		
. SIGN DSE CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE		
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
SIGN DSE CALL SIGN DSE		DSE	CALL SIGN			
		DSE	CALL SIGN			
SES	CALL SIGN		CALL SIGN	DSE		
SES	CALL SIGN CALL SIGN Total DSEs			DSE		

	SAL NAME OF OWNER OF CABLE SYSTEM: e Municipal Communications Utility of the City of Cedar Falls Iowa 40744							Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
NINETY-S	EVENTH	SUBSCRIBER GROU	Р	NINET	Y-EIGHTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL CICIT	DOL	O/ LEE GIGIT	- 502	O' LEE GIGIT	562	CALL GIGIT	502	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			••••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
NINET	Y-NINTH	SUBSCRIBER GROU	Р	ONE HUI	NDREDTH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes ab	oove.	\$		

						IAME OF OWNER OF CABLE SYSTEM: unicipal Communications Utility of the City of Cedar				
				TE FEES FOR EACH						
9		SUBSCRIBER GROUI	SECOND	 		SUBSCRIBER GRO	D FIRST			
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate										
and										
Syndicate						-				
Exclusivi						-				
Surcharg for										
Partially										
Distant						-				
Stations						-				
	0.00			Total DSEs	0.00			otal DSEs		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gro		
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro		
	D	SUBSCRIBER GROUI	FOURTH	ONE HUNDRE	JP	SUBSCRIBER GRO	D THIRD	ONE HUNDRE		
	0		ONE HUNDRED FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0					OMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
	0.00	CALL SIGN	DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	CALL SIGN		
	0.00			Total DSEs	0.00			otal DSEs		
		CALL SIGN				CALL SIGN				

		ile City of	Cedar Falls Iowa			40744	Name	
BLOCK A	: COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP			
ONE HUNDRED FIFT	H SUBSCRIBER GRO	DUP	ONE HUN	DRED SIXTH	SUBSCRIBER GROU	JP	•	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0	9	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
							Base Rate Fe	
							and	
							Syndicated	
							Exclusivity Surcharge	
							for	
							Partially	
							Distant	
							Stations	
Total DSEs		0.00	Total DSEs			0.00		
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
ONE HUNDRED SEVENT	H SUBSCRIBER GRO)UP	ONE HUND	RED EIGHTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs	11	0.00	Total DSEs		Ш	0.00		
	<u> </u>			eth Casses	•	_		
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rui Group	\$	0.00		
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
			Ш					

40744 Name							
			TE FEES FOR EACH				
<u> </u>	SUBSCRIBER GROUP	EDIENIH	COMMUNITY/ AREA		SUBSCRIBER GROU	H I MIN U	ONE HUNDRE
Computa			OOMMONT I, AND A				701VIIVIOTATI 17 7414274
DSE of	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat							
and					-		
Syndica Exclusi						-	
Surcha					-		
for							
Partia							
Dista					-		
Statio							
					-		
					-		
0.00			Total DSEs	0.00			otal DSEs
0.00	\$	d Group	Gross Receipts Seco	0.00	\$	oup	Gross Receipts First Gro
 -							
0.00							
0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	oup	Base Rate Fee First Gro
0.00	SUBSCRIBER GROUP				\$ SUBSCRIBER GROU		
0.00							ONE HUNDRED EL
			ONE HUNDRE	JP			ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
DSE	SUBSCRIBER GROUP	TWELVTH	ONE HUNDREI COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	EVENTH	ONE HUNDRED EL
0 DSE	SUBSCRIBER GROUP	DSE	ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED EL COMMUNITY/ AREA CALL SIGN Total DSEs
DSE	SUBSCRIBER GROUP	DSE	ONE HUNDREI COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	ONE HUNDRED EL COMMUNITY/ AREA CALL SIGN Total DSEs
0 DSE	CALL SIGN	DSE	ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	COMMUNITY/ AREA
0 DSE	CALL SIGN	DSE	ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE 0 0 0 0 0 0 0 0 0 0 0	CALL SIGN	DSE	ONE HUNDRED EL COMMUNITY/ AREA CALL SIGN Total DSEs

LEGAL NAME OF OWNE The Municipal Co			e City of	Cedar Falls Iowa		S	40744	Name
I	BLOCK A:	COMPUTATION OF	F BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TH	IRTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED FO	JRTEENTH	SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
		-						Stations
T-4-1 DOE:		II.	0.00	T-4-1 DOE		Ш	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED F	IFTEENTH	SUBSCRIBER GRO	JP	ONE HUNDRED S	SIXTEENTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
D D T	0.00		0.05	B B.(5 - 5 - 1	0.0			
Base Rate Fee Third	roup	 \$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Dana Bara El a Alla	L _ 1 ·	a face for soil 1	alle a service	and the same to the same	.l			
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes a	above.	\$		

		SLE SYSTEM: Sations Utility of the City of Cedar Falls Iowa 40744						Name
				TE FEES FOR EACH				
	ENTEENTH	SUBSCRIBER GROU		11	HTEENTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			O	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
		-						Syndicate
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts First C	Group	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
sase Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED N	IINTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GROUP	P	
OMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						•		
otal DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
								
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add tenter here and in bloc			riber group	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744							Name	
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED TWEN	TY-FIRST	SUBSCRIBER GROU	IP	ONE HUNDRED TWENT	Y-SECOND	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			O	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
							0	Surcharge
							0	for
		-						Partially
		-						Distant
		-						Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED TWEN	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWENT	Y-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes at	oove.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY	STEM ID# 40744	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED TWEN	TY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-SIXTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	T CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED TWENTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-EIGHTH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes ab	oove.	\$		

Name								
				TE FEES FOR EACH	BASE RA			
9	0	SUBSCRIBER GROUP	IHIKIIEIH	COMMUNITY/ AREA	0	SUBSCRIBER GROUP	I Y-INIIN I H	ONE HUNDRED TWEN COMMUNITY/ AREA
Computa								
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate			-					
and Syndicat			-			<u> </u>		
Exclusiv			-			_		
Surchar			-			_		
for								
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Distan Station								
Station			-					
						-		
	2.22							
_	0.00			Total DSEs	0.00			otal DSEs
_	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	oup	ross Receipts First Gro
¬								
	0.00	\$		Base Rate Fee Secor	0.00	\$		
		\$ SUBSCRIBER GROUP		ONE HUNDRED THIR		\$ SUBSCRIBER GROUP		ONE HUNDRED THIR
	0.00				0.00			ONE HUNDRED THIR
0				ONE HUNDRED THIR				ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
0	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
D	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
D	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR
	DSE	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN
	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED THIR	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN
	DSE	SUBSCRIBER GROUP	DSE	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP	DSE	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN Total DSEs
	DSE 0.000	CALL SIGN	DSE	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	DSE	COMMUNITY/ AREA
	DSE 0.000	CALL SIGN	TY-SECOND DSE Group	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	DSE	ONE HUNDRED THIR COMMUNITY/ AREA CALL SIGN Total DSEs

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY	40744	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED THIR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THIRT	Y-FOURTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SICN	DOE	L CALL SIGN	DOE	CALL SIGN	Dec	L CALL SIGN	Dec	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
		-						Syndicated
								Exclusivity
		-						Surcharge
								for
		-					0	Partially
								Distant
		-						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED THIR	TY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED THI	RTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY:	STEM ID# 40744	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-EIGHTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity
		-						Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		l I	0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED THIR	TY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED I	FORTIETH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes at	oove.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		SY	STEM ID# 40744	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED FOR	TY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FORT	Y-SECOND	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity
								Surcharge
***************************************								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FORT	Y-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			iber group	II as shown in the boxes ab	oove.	\$		

	cations Utility of t	SYSTEM ID# 5 Utility of the City of Cedar Falls Iowa 40744					Name
			TE FEES FOR EACH				
ONE HUNDRED FORTY-FIF	TH SUBSCRIBER GROU		Ħ		SUBSCRIBER GROUP		9
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	Partially Distant
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							Base Rate I
							and
							Syndicate
							Partially
							Distant
							Stations
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED FORTY-SEVEN	TH SUBSCRIBER GROU	P	ONE HUNDRED FO	RTY-EIGHTH	I SUBSCRIBER GROUP		
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		·····					
		0.00	T. () DOE :			0.00	
otal DSEs		0.00	Total DSEs			0.00	
otal DSEs			Gross Receipts Fourt	h Group	\$	0.00	
otal DSEs Bross Receipts Third Group	\$	0.00					
	\$ \$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744						Name		
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCR	BER GROUP		
ONE HUNDRED FOR	RTY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRE	D FIFTIETH	SUBSCRIBER GROUI	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FI	FTY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROUI	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	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes a	above.	\$		
	<u> </u>							

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744						Name		
Е	BLOCK A:	COMPUTATION OF	F BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROU		П		SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
	····							Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FI	FTY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FI	FTY-SIXTH	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 C	∃roup	\$	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	
				II				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	lbove.	\$		
		- •						

		COMPLITATION	E DACE D	TE EEEO FOD EAO		IDED CDOLID		
ONE HUNDRED FIE		SUBSCRIBER GROU		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROUP		
OME HONDRED FIF		. SOBSONIBLINGROU	0	COMMUNITY/ AREA		. SOBSONIBLIN GROOF	0	9
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
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								Surchar for
								Partial
								Distan
								Station
		Ш	0.00			11	0.00	
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
	_							
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED	FIFTY-NINTH	\$ SUBSCRIBER GROU	P	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP		
ONE HUNDRED	FIFTY-NINTH				RED SIXTIETH			
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH		P	ONE HUNDS	RED SIXTIETH			
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED COMMUNITY/ AREA CALL SIGN	FIFTY-NINTH	I SUBSCRIBER GROU	P 0	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP	0	
ONE HUNDRED OMMUNITY/ AREA CALL SIGN otal DSEs	DSE DSE	I SUBSCRIBER GROU	DSE	CALL SIGN	DSE	SUBSCRIBER GROUP	DSE	
ONE HUNDRED COMMUNITY/ AREA CALL SIGN	DSE DSE	CALL SIGN	DSE 0.00	CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	
CALL SIGN CALL SIGN Total DSEs Bross Receipts Third	DSE DSE	CALL SIGN ** ** ** ** ** ** ** ** **	DSE O.00 O.00 O.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Four	DSE THE Group	CALL SIGN	0 DSE	
ONE HUNDRED COMMUNITY/ AREA CALL SIGN	DSE DSE	CALL SIGN	DSE 0.00	CALL SIGN CALL SIGN Total DSEs	DSE THE Group	CALL SIGN	0 DSE	
ONE HUNDRED OMMUNITY/ AREA CALL SIGN Dial DSEs ross Receipts Third	DSE DSE	CALL SIGN ** ** ** ** ** ** ** ** **	DSE O.00 O.00 O.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Four	DSE THE Group	CALL SIGN	0 DSE	
ONE HUNDRED OMMUNITY/ AREA CALL SIGN Dital DSEs ross Receipts Third ase Rate Fee Third	DSE Group	SUBSCRIBER GROU CALL SIGN * \$ \$	DSE O.00 O.00 O.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Four	DSE th Group	CALL SIGN	0 DSE	

LEGAL NAME OF OWNE The Municipal Co			ne City of	Cedar Falls Iowa		S	6YSTEM ID# 40744	Name
E				ATE FEES FOR EAC				
	FIRST	SUBSCRIBER GRO				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
	<u></u>							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER 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 (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 block			criber group	as shown in the boxes	s above.	\$	0.00	

LEGAL NAME OF OWNE The Municipal Co			ne City of	Cedar Falls Iowa		S	6YSTEM ID# 40744	Name
E				ATE FEES FOR EAC				-
	FIFTH	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 G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Foul	rth Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE The Municipal Co			ne City of	Cedar Falls Iowa		S	3YSTEM ID# 40744	Name
I	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		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 G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	ELEVENTH	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	
•	-			·	•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE The Municipal Co			ne City of	Cedar Falls Iowa		S	40744	Name
				TE FEES FOR EAC				
	RTEENTH	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fo
								and Syndicated
		-						Exclusivity
								Surcharge
		-						for
			<u></u>					Partially Distant
								Stations
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco				
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
F	IFTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
								
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (aroun	<u> </u>	0.00	Gross Receipts Four	th Group	<u> </u>	0.00	
2.330 Rossipis Tilla C	oup	<u>*</u>		S. 333 Noosipis i oui	5 10 u p	*		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
				TE FEES FOR EAC					
	ITEENTH	SUBSCRIBER GROU		Ti .		SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i>.</i>		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					
Base Rate Fee First Gro	•	\$	0.00	Base Rate Fee Second		\$	0.00		
	ITEENTH	SUBSCRIBER GRO		ii .		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 Gr	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
				Ш					
Base Rate Fee: Add the		e fees for each subso pace L (page 7)	riber group	as shown in the boxes	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
				TE FEES FOR EAC					
	TY-FIRST	SUBSCRIBER GROU		- 		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 \$ 0.0			0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
TWEN	TY-THIRD	SUBSCRIBER GROU	JP	TWEN	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	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$			

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# The Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
				TE FEES FOR EACH					
		SUBSCRIBER GROU		H	NTY-SIXTH	SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			O	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
								Exclusivity Surcharge	
					<u></u>			for	
								Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00					
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
		SUBSCRIBER GROU		Ti .	TY-EIGHTH	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 Fourth	Group	\$	0.00		
,	•				•				
Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	n Group	\$	0.00			
			riber group	as shown in the boxes a	bove.	¢			
Enter here and in bloc	жэ, iine 1, s	pace ∟ (page /)				Ф			

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
				TE FEES FOR EAC					
	ΓΥ-NINTH	SUBSCRIBER GROU				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	
Total DSEs			0.00	Total DSEs			0.00		
	nun	•	0.00	Gross Receipts Seco	and Group	•	0.00		
Gross Receipts First Group \$ 0.0				Total Nobelpie Cool	ma Group				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
	TY-FIRST	SUBSCRIBER GROU		1		SUBSCRIBER GROU	_		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$			

	GAL NAME OF OWNER OF CABLE SYSTEM: Ne Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROUI	D			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee and		
								Syndicated		
								Exclusivity		
								Surcharge for		
								Partially		
								Distant Stations		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Group \$ 0.0			0.00	Gross Receipts Secon	nd Group	\$	0.00			
Base Rate Fee First Gr	•	\$	0.00	Base Rate Fee Secon	· .	\$	0.00			
THIR COMMUNITY/ AREA	TY-FIFTH	SUBSCRIBER GROU	1 <u>P</u> 0	COMMUNITY/ AREA	IRTY-SIXTH	SUBSCRIBER GROUI	0			
COMMONT I/ 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 Group \$ 0.00			0.00	Gross Receipts Fourtl	h Group	\$	0.00			
Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	h Group	\$	0.00				
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes a	above.	\$				

LEGAL NAME OF OWNE The Municipal Cor			ne City of	Cedar Falls Iowa		5	6YSTEM ID# 40744	Name
				TE FEES FOR EAC				
THIRTY-	SEVENTH	SUBSCRIBER GRO		THI	RTY-EIGHTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0.1.2.2.3.3.1								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DCCs			0.00	
	roup	•	0.00	Total DSEs Gross Receipts Sec	and Group	•	0.00	
Gross Receipts First Group \$ 0.0				Oloss Necelpla Geo	опа Огоар	Ψ	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	P				2.24p	*		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744										
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROUI	P	0		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee and		
								Syndicated		
								Exclusivity Surcharge		
								for		
								Partially Distant		
								Stations		
Total DSEs			0.00	Total DSEs			0.00			
	OUD	c	0.00		Total DSEs 0.00 Gross Receipts Second Group \$ 0.00					
Gross Receipts First Group \$ 0.0				Gross Receipts Secon	na Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00			
FOR COMMUNITY/ AREA	TY-THIRD	SUBSCRIBER GROU	JP 0	FORT		SUBSCRIBER GROUI	P 0			
COMMONTI 1/ AREA			U	COMMUNITY AREA			U			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third Group \$ 0.00			0.00	Gross Receipts Fourt	h Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
				ATE FEES FOR EAC					
	TY-FIFTH	SUBSCRIBER GRO		11		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 \$ 0.0				Gross Receipts Second Group \$ 0.00					
Base Rate Fee First Gr	•	\$	0.00	Base Rate Fee Sec		\$	0.00		
	SEVENTH	SUBSCRIBER GRO		ii e		SUBSCRIBER GROU	_		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
									
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	above.	\$			

EGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
				TE FEES FOR EACH					
	TY-NINTH	SUBSCRIBER GROU			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 Fe	
		-						and	
								Syndicated Exclusivity	
	····							Surcharge	
								for	
								Partially	
								Distant	
								Stations	
		-							
			0.00				0.00		
Total DSEs		•	0.00	Total DSEs	d Oracin	•	0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	a Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00		
	TY-FIRST	SUBSCRIBER GROU		FIFT	Y-SECOND	SUBSCRIBER GROU	IP		
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			riber group	as shown in the boxes a	bove.	\$			

EGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744										
				TE FEES FOR EAC						
	TY-THIRD	SUBSCRIBER GRO		ii e		SUBSCRIBER GRO		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computatio		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
		-						Base Rate Fo		
								and Syndicated		
		-						Exclusivity		
								Surcharge		
		-						for		
								Partially Distant		
								Stations		
		_								
		-								
			·····							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco						
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
FII	TY-FIFTH	SUBSCRIBER GRO	UP		FIFTY-SIXTH	SUBSCRIBER GRO	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			·····							
		-								
		-								
Fotal DSEs			0.00	Total DSEs			0.00			
	2roup	•	0.00		th Group	¢	0.00			
Gross Receipts Third G	πουρ	*	0.00	Gross Receipts Four	ш отоир	D	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
Base Rate Fee: Add the	ne base rat	<u></u>				\$	0.00			

LEGAL NAME OF OWNER The Municipal Con			e City of	Cedar Falls Iowa		S	40744	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	SEVENTH	SUBSCRIBER GROU		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 Surcharge
								for
								Partially
								Distant
								Stations
					······			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FIF	TY-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	I 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		11	0.00	
	roup	•			th Croup	.	0.00	
Gross Receipts Third G	ισαρ	\$	0.00	Gross Receipts Four	iii Gioup	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

	He Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		BER GROUP SUBSCRIBER GROUP		0		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee and		
								Syndicated		
								Exclusivity		
								Surcharge for		
								Partially		
								Distant Stations		
T			0.00	T						
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00			
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00			
	Y-THIRD	SUBSCRIBER GROU		<u> </u>	'-FOURTH	SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		-								
			0.00	T						
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00			
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth	Group	\$	0.00			
	_									
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744								
				ATE FEES FOR EAC				-
SIX COMMUNITY/ AREA	(TY-FIFTH	SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
COMMONIT I/ AREA				COMMONIT IT AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
			·····					
Tatal DOFa			0.00	Total DOF			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO		1		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			·····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
·	-				-		$\neg \neg $	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Con			e City of	Cedar Falls Iowa		S	40744	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCR	IBER GROUP		
	TY-NINTH	SUBSCRIBER GROU		#		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		-						Surcharge
								for
								Partially
								Distant Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
SEVEN	TY-FIRST	SUBSCRIBER GROU	JP	SEVENT	Y-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
	•				,			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE The Municipal Co			e City of	Cedar Falls Iowa		S	40744	Name
Е	BLOCK A:	COMPUTATION OF	BASE R	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	ITY-THIRD	SUBSCRIBER GROU		#		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
							<u></u>	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	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVEN	NTY-FIFTH	SUBSCRIBER GROU	JP	SEVE	NTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		\$	6YSTEM ID# 40744	Name
Bl	OCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP	-	
SEVENTY-S	EVENTH	SUBSCRIBER GRO	UP	SEVE	NTY-EIGHTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
								Giations
			····					
				•				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
SEVENT	Y-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	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	
					46 0		_	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Four	tn Group	<u>\$</u>	0.00	
Raca Pata Faa Thind O	OUE	•	0.00	Raco Poto Foo Foor	th Grove	œ.	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Four	ın Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP EIGHTY-FIRST SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	O DSE	9
COMMUNITY/ AREA COMMUNITY/ AREA	DSE	a
CALL SIGN DSE CALL SIGN DSE CALL SIGN		Computation
		of
		Base Rate Fee
		and Syndicated
		Exclusivity
	,	Surcharge
		for Partially
		Distant
		Stations
Total DSEs Total DSEs	0.00	
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	0.00	
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00	
EIGHTY-THIRD SUBSCRIBER GROUP EIGHTY-FOURTH SUBSCRIBER GROUP		
COMMUNITY/ AREAO COMMUNITY/ AREA	0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE	
	,	
Total DSEs Total DSEs	0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)		

	GAL NAME OF OWNER OF CABLE SYSTEM: ne Municipal Communications Utility of the City of Cedar Falls Iowa 40744									
				TE FEES FOR EACH						
	TY-FIFTH	SUBSCRIBER GROU			HTY-SIXTH	SUBSCRIBER GROUI		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		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00			
EIGHTY-	SEVENTH	SUBSCRIBER GROU	JP	EIGHT	Y-EIGHTH	SUBSCRIBER GROU	D			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		-								
		-								
		-								
Total DCCs			0.00	Total DOFo			0.00			
Total DSEs			0.00	Total DSEs	0		0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes al	oove.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744								
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU	P 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744								
				ATE FEES FOR EACH				
	Y-THIRD	SUBSCRIBER GROU		TI .	'-FOURTH	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 DCFa			0.00	Total DCFo			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GROU		T T	TY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
							.	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block 3			iber group	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cedar Falls Iowa 40744								
				ATE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GROU		TI .	Y-EIGHTH	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
		-						
		-						
T			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
NINET	Y-NINTH	SUBSCRIBER GROU		ONE HUI	NDREDTH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		
	-,o 1, o	(pago 1)				T		

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# The Municipal Communications Utility of the City of Cedar Falls Iowa 40744								
				TE FEES FOR EAC				
	ED FIRST	SUBSCRIBER GROU		1		SUBSCRIBER GROL		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	Tatal DOF			0.00	
			0.00	Total DSEs			_	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRI	ED THIRD	SUBSCRIBER GROU	JP	ONE HUNDR	ED 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	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
							$\neg \neg $	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# The Municipal Communications Utility of the City of Cedar Falls Iowa 40744								
				TE FEES FOR EAC				
	ED FIFTH	SUBSCRIBER GROL		II		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 Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED S	SEVENTH	SUBSCRIBER GROU	IP	ONE HUNDR	RED EIGHTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
				TE FEES FOR EACH				
	D NINTH	SUBSCRIBER GROU		Ti .		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 Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED EL	EVENTH	SUBSCRIBER GROU	IP	ONE HUNDREI	D TWELVTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			E City of	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
				ATE FEES FOR EAC				
ONE HUNDRED THIS	RTEENTH	SUBSCRIBER GROU		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 Surcharge
								for
								Partially
								Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	IP	
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 Gr	oup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block:			iber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Con			e City of	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
			BASE RA	TE FEES FOR EACH				
	NTEENTH	SUBSCRIBER GROUP		Ħ		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
								o tu ti o ti o
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED NII	NTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED T	WENTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····			
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
,	•				· r			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER The Municipal Cor			e City of	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP		0
COMMUNITY/ AREA	***************************************		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	NTY-THIRD	SUBSCRIBER GROUP				SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	Г				- F			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
			BASE RA	TE FEES FOR EACH				
	NTY-FIFTH	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
T			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TWENTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			•	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
			BASE RA	TE FEES FOR EACH	H SUBSCR	BER GROUP		
ONE HUNDRED TWEN	TY-NINTH	SUBSCRIBER GROUP		Ti .		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	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED THIF	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIR	RTY-SECOND	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 Gr	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
Bl	OCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCR	IBER GROUP		
ONE HUNDRED THIR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THIF	RTY-FOURTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED THIR	TY-FIFTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
T			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			City of	Cedar Falls Iowa		SYS	STEM ID# 40744	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED THIRTY- COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GROUP	0	COMMUNITY/ AREA	I Y-EIGHTH	SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	Group	\$	0.00	
ONE HUNDRED THIRT	Y-NINTH	SUBSCRIBER GROU	P	ONE HUNDRED F	ORTIETH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				<u>II</u>				
Base Rate Fee: Add the Enter here and in block 3			iber group a	as shown in the boxes ab	ove.	\$		

LEGAL NAME OF OWNER The Municipal Con			e City of	Cedar Falls Iowa		SY	STEM ID# 40744	Name
			BASE RA	TE FEES FOR EACH				
	RTY-FIRST	SUBSCRIBER GROUP		Ħ	TY-SECOND	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	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	•	0.00	Gross Receipts Fourth	Group	•	0.00	
Gross Receipts Third G	oup	\$	0.00	Gioss Receipts Fourth	Group	v	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 a	bove.	\$		

LEGAL NAME OF OWNE The Municipal Cor			•	Cedar Falls Iowa		SY	STEM ID# 40744	Name			
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP					
	RTY-FIFTH	SUBSCRIBER GROUP		Ħ	ORTY-SIXTH	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 DCFa			0.00	Total DCFs			0.00				
Total DSEs Gross Receipts First G	oun.	\$	0.00	Total DSEs Gross Receipts Secon	nd Group	<u> </u>	0.00				
Gross Receipts First Gr	оир		0.00	Gross Receipts eccor	а Огоар						
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00				
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTH	SUBSCRIBER GROUP					
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
		-									
					<u></u>						
		-									
		-									
		-									
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00				
							$\neg \neg $				
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00				
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	bove.	\$					

LEGAL NAME OF OWNER The Municipal Com			City of	Cedar Falls Iowa		SYS	STEM ID# 40744	Name
ONE HUNDRED FORT			Р			BER 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	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	·	\$	0.00	Base Rate Fee Second	· ·	\$	0.00	
ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROU			-SECOND	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
							$\neg \neg $	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Page Pate Fee: Add 41-	hase ret	a face for each subsect	ihor arous	no chawa in the haves	2010			
Base Rate Fee: Add the Enter here and in block 3			ivei group i	as shown in the doxes ad	ouve.	\$		

LEGAL NAME OF OWNER The Municipal Com			E City of	Cedar Falls Iowa		S	YSTEM ID# 40744	Name
				TE FEES FOR EAC				
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU				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
					<u></u>			
	•				·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED F	FIFTY-SIXTH	SUBSCRIBER GROU	IP	
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 Gr	oup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block :			iber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER The Municipal Com			e City of	Cedar Falls Iowa		S	40744	Name
Bl	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	1 SUBSCR	IBER GROUP		
ONE HUNDRED FIFTY-	SEVENTH	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
		G7.122 G1G1.	302	07.22 0.0.1	202		301	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED FIFT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRE	D SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•••••							
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
,	•				- r			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	The Municipal Communications Utility of the City of Cedar	Falls Iowa 40744
	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 to Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of		Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated Exclusivity Surcharge for Partially	 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 entered in the subscriber group using the Step 4: Compute the surcharge for each subscriber group using the step 4. 	for the VHF Grade B contour stations that were classified as 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.	ures applicable to the particular group. You do not need to show
	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 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	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	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	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Co		EM ID
			40744
		LUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROU	<u>P</u>
9	If your cable system is located within a top 100 television market Syndicated Exclusivity Surcharge. Indicate which major television by section 76.5 of FCC rules in effect on June 24, 1981:	and the station is not exempt in Part 7, you must also compute a narket any portion of your cable system is located in as defined	
Computation			
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market	
and		mmercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber gr	roup for the VHF Grade B contour stations that were classified as	
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If non	ne enter zero.	
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total num Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·	
Distant Stations	schedule. In making this computation, use gross receip your actual calculations on this form.	ots figures applicable to the particular group. You do not need to show	V
	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	Line 3: Subtract line 2 from line 1	
	and enter here. This is the	and enter here. This is the	
	total number of DSEs for	total number of DSEs for	
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	SEVENTH SUBSCRIBER GROUP	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	_
	SYNDICATED EXCLUSIVITY	syndicated exclusivity	
	SURCHARGE	SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (e for each subscriber group as shown page 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Co	SYSTEM ID
	The Municipal Communications Utility of the City of Ce	
	BLOCK B: COMPUTATION OF SYNDICATED EXCL	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:	
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 con	nmercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber gro	oup 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 Step 3: In line 3, subtract line 2 from line 1. This is the total number 1.	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·
	NINTH CURCOURER CROUP	TENTH CHROODINGS OROUG
	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	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 computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	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	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	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	for each subscriber group as shown age 7)

Name	The Municipal Communications Utility of the City of Ceda	SYSTEM ID# ar Falls Iowa 40744
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may	
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 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 is 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 by your actual calculations on this form. 	p for the VHF Grade B contour stations that were classified as enter zero. For of DSEs used to compute the surcharge.
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH 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 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 First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTEENTH SUBSCRIBER GROUP	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 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 ge 7)

Name	The Municipal Communications Utility of the City of Ced	lar Falls Iowa 4074
	BLOCK B: COMPUTATION OF SYNDICATED EXCLU	JSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television may be section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	by Section 76.5 of FCC fules in effect off Julie 24, 1961.	
of	First 50 major television market	Second 50 major television market
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for common step 1.	mercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule.	
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber ground Exempt DSEs in block C, part 7 of this schedule. If none	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts your actual calculations on this form.	ne 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
	OEVENTEENTH OUROODIRER OROUR	
	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	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	SURCHARGE
	First Group	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	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 1) and the surcharge for in the boxes above.	or each subscriber group as shown age 7)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Ce	SYSTEM I edar Falls Iowa 407
		LUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market Syndicated Exclusivity Surcharge. Indicate which major television 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	Step 1: In line 1, give the total DSEs by subscriber group for couthis schedule.	mmercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity		roup for the VHF Grade B contour stations that were classified as
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If non Step 3: In line 3, subtract line 2 from line 1. This is the total num	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·
	TWENTY FIRST SURSCRIPED COOLD	TWENTY SECOND SUBSCRIPED CROUD
	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	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 computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	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	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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	Tima Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	e for each subscriber group as shown page 7)

Name	The Municipal Communications Utility of the City of Ce	SYSTEM ID
		LUSIVITY 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:	
Computation		
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for corthis schedule.	mmercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber gr	oup 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 Step 3: In line 3, subtract line 2 from line 1. This is the total num	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·
	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	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	Surcharge 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	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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	Tillia Gloup	r oditir Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	for each subscriber group as shown page 7)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Ce	SYSTE	EM ID# 40744
		LUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	<u> </u>
9	If your cable system is located within a top 100 television market Syndicated Exclusivity Surcharge. Indicate which major television 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	Step 1: In line 1, give the total DSEs by subscriber group for couthis schedule.	mmercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity		roup for the VHF Grade B contour stations that were classified as	
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If non Step 3: In line 3, subtract line 2 from line 1. This is the total num		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	•	I
	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 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	<u>. </u>
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	Surcharge 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 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	<u>. </u>
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE Third Group	SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	e for each subscriber group as shown page 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Ce	SYSTEM ID#
		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:	
Computation		
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	☐ Second 50 major television market
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for conthis schedule.	nmercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber gro	oup 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 Step 3: In line 3, subtract line 2 from line 1. This is the total numl	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·
	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	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	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	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	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	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	for each subscriber group as shown age 7)

The Municipal Communications Utility of the City of Co	SYSTEM ID# edar Falls Iowa 40744
If your cable system is located within a top 100 television market Syndicated Exclusivity Surcharge. Indicate which major television	
First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for co this schedule.	☐ Second 50 major television market mmercial VHF Grade B contour stations listed in block A, part 9 of roup for the VHF Grade B contour stations that were classified as
Exempt DSEs in block C, part 7 of this schedule. If non Step 3: In line 3, subtract line 2 from line 1. This is the total num Step 4: Compute the surcharge for each subscriber group using schedule. In making this computation, use gross receip your actual calculations on this form.	nber of DSEs used to compute the surcharge.
THIRTY-SEVENTH SUBSCRIBER GROUP	THIRTY-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 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 in the boxes above. Enter here and in block 4, line 2 of space L (e for each subscriber group as shown spage 7)
	Syndicated Exclusivity Surcharge. Indicate which major television by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	The Municipal Communications Utility of the City of Cedar	Falls Iowa 40744	
	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		Second 50 major television market	
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant		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 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	
	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 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	SYNDICATED EXCLUSIVITY	
	SURCHARGE Third Group	SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)	

The Municipal Communications Utility of the City of (SYSTEM II Cedar Falls Iowa 4074
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:	
	☐ Second 50 major television market
INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for containing this schedule. Step 2: In line 2, give the total number of DSEs by subscriber Exempt DSEs in block C, part 7 of this schedule. If not Step 3: In line 3, subtract line 2 from line 1. This is the total number 4: Compute the surcharge for each subscriber group using	commercial VHF Grade B contour stations listed in block A, part 9 of group for the VHF Grade B contour stations that were classified as one enter zero.
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 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
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 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	SYNDICATED EXCLUSIVITY
SURCHARGE Third Group	SURCHARGE Fourth Group
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L	ge for each subscriber group as shown (page 7)
	Syndicated Exclusivity Surcharge. Indicate which major televisite by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

Name	The Municipal Communications Utility of the City of C	SYSTEM II Sedar Falls Iowa 4074	
	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		Second 50 major television market	
of Base Rate Fee	☐ First 50 major television market ☐ Second 50 major television market INSTRUCTIONS:		
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for cothis schedule.	ommercial 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 of	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 not Step 3: In line 3, subtract line 2 from line 1. This is the total nur		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using schedule. In making this computation, use gross receipyour actual calculations on this form.	g the formula outlined in block D, section 3 or 4 of part 7 of this pts figures applicable to the particular group. You do not need to show	
	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 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	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	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	FIFTY-FIRST SUBSCRIBER GROUP	FIFTY-SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 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 Third Group	SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharg in the boxes above. Enter here and in block 4, line 2 of space L	e for each subscriber group as shown (page 7)	

Name	The Municipal Communications Utility of the City of Ce	SYSTEM ID edar Falls Iowa 4074	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROU		
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 ☐ Second 50 major television market INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for con	nmercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber gro	oup 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 Step 3: In line 3, subtract line 2 from line 1. This is the total numl		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	•	
	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	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	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	FIFTY-FIFTH SUBSCRIBER GROUP	FIFTY-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	total number of DSEs for 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 in the boxes above. Enter here and in block 4, line 2 of space L (p	for each subscriber group as shown page 7)	

The Municipal Communications Utility of the City of Ceda	SYSTEM ID: ar Falls Iowa 4074
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 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm	☐ Second 50 major television market nercial VHF Grade B contour stations listed in block A, part 9 of
Step 2: In line 2, give the total number of DSEs by subscriber group 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	nter zero. r 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 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-NINTH SUBSCRIBER GROUP	SIXTIETH 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 in the boxes above. Enter here and in block 4, line 2 of space L (page)	r each subscriber group as shown ge 7)
	Syndicated Exclusivity Surcharge. Indicate which major television mby section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cec	SYSTEM ID# dar Falls Iowa 40744
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	
by section 76.5 of FCC rules in effect on June 24, 1981: Computation		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
	SIXTY-FIRST SUBSCRIBER GROUP	SIXTY-SECOND SUBSCRIBER GROUP
	SIATT-FIRST 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 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 1) and the surcharge for in the boxes above.	or each subscriber group as shown

The Municipal Communications Utility of the City of C BLOCK B: COMPUTATION OF SYNDICATED EXC	
BLOCK B: COMPUTATION OF SYNDICATED EXC	NI LIGIVITY GLIDCHADGE EOD EACH GLIDGODIRED GDOLID
	DEUSIVIT I SUNCHANGE FUN 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 costion 76.5 of ECC rules in effect on June 24, 1981:	
<u> </u>	Second 50 major television market
	ommercial VHF Grade B contour stations listed in block A, part 9 of
Exempt DSEs in block C, part 7 of this schedule. If nor Step 3: In line 3, subtract line 2 from line 1. This is the total number 1.	mber of DSEs used to compute the surcharge.
	pts figures 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	Line 3: Subtract line 2 from line 1 and enter here. This is the
total number of DSEs for	total number of DSEs for
this subscriber group	this subscriber group subject to the surcharge
computation	computation
SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
SURCHARGE	SURCHARGE
First Group	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	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
SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Fourth Group
Tillia Gioap	- Journal Group
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (e for each subscriber group as shown (page 7)
	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber of Exempt DSEs in block C, part 7 of this schedule. If no Step 3: In line 3, subtract line 2 from line 1. This is the total number of Compute the surcharge for each subscriber group usin schedule. In making this computation, use gross receip your actual calculations on this form. SIXTY-FIFTH 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 computation SYNDICATED EXCLUSIVITY SURCHARGE First Group Line 3: Subtract line 2 from line 1 and enter here. This is the total number of 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

Name	The Municipal Communications Utility of the City of Ce	SYSTEM ID# dar Falls Iowa 40744	
		USIVITY 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 ☐ Second 50 major television market INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for com	nmercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber gro	oup 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 Step 3: In line 3, subtract line 2 from line 1. This is the total number		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·	
	SIVTY NINTH SUBSCRIPED CROUD	SEVENITIETH SUBSCRIBER CROUD	
	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	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 computation	subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	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	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 Third Group	SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge 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)	

Name	The Municipal Communications Utility of the City of Ced	SYSTEM ID# dar Falls Iowa 40744	
		USIVITY 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 ☐ Second 50 major television market INSTRUCTIONS:		
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comthis schedule.	nmercial 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 gro	·	
Surcharge for	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		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·	
	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 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	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	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	SEVENTY-FIFTH SUBSCRIBER GROUP	SEVENTY-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 Third Group	SURCHARGE Fourth Group	
	111110 Oloup	- Candi Giodp	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge 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)	

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	The Municipal Communications Utility of the City of Cedar	Falls Iowa 40744	
	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	☐ First 50 major television market ☐ Second 50 major television market		
Base Rate Fee and Syndicated Exclusivity	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.		
Surcharge for Partially Distant Stations	for Partially Distant 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 particular group. You do receipts figures applicable to the particular group. You do receipts figures applicable to the particular group.		
	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 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	SYNDICATED EXCLUSIVITY	
	SURCHARGE Third Group	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)	

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	The Municipal Communications Utility of the City of Cedar	Falls Iowa 40744	
	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	☐ First 50 major television market ☐ Second 50 major television market		
Base Rate Fee and Syndicated Exclusivity	 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 entertail the process of the	for the VHF Grade B contour stations that were classified as	
Surcharge for Partially Distant Stations	for DSEs used to compute the surcharge. If of DSEs used to compute the surcharge. If ormula outlined in block D, section 3 or 4 of part 7 of this ures applicable to the particular group. You do not need to show		
	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	SYNDICATED EXCLUSIVITY	
	SURCHARGE Third Group	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	The Municipal Communications Utility of the City of Ce		TEM ID#
			40744
		LUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROU	JP
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 ☐ Second 50 major television market INSTRUCTIONS:		
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for conthis schedule.	mmercial 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 gro	·	
Surcharge for	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 1.		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	•	W
	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	Line 3: Subtract line 2 from line 1 and enter here. This is the	
	total number of DSEs for	total number of DSEs for this subscriber group	
	this subscriber group subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	First Group	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	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 Third Group	SURCHARGE Fourth Group	
	<u></u>		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	for each subscriber group as shown page 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Ce		SYSTEM ID# 40744
		CLUSIVITY SURCHARGE FOR EACH SUBSCRIBER G	
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 ☐ Second 50 major television market INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for cothis schedule.	mmercial VHF Grade B contour stations listed in block A, part 9	9 of
Syndicated Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber gr	roup for the VHF Grade B contour stations that were classified	l as
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If non Step 3: In line 3, subtract line 2 from line 1. This is the total num		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·	
		NINETIETU QUEQUEER ORQUE	
	EIGHTY-NINTH SUBSCRIBER GROUP	NINETIETH 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 computation	subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY	
	First Group	SURCHARGE Second Group	
	NINETY-FIRST SUBSCRIBER GROUP	NINETY-SECOND SUBSCRIBER GROUP	<u> </u>
	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 Third Group	SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge	e for each subscriber group as shown	
	in the boxes above. Enter here and in block 4, line 2 of space L (page /)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of C	SYSTEM ID redar Falls Iowa 4074
	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 by section 76.5 of FCC rules in effect on June 24, 1981:	
9		
Computation		
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for cothis schedule.	ommercial 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 g	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 nor Step 3: In line 3, subtract line 2 from line 1. This is the total nur	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·
	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 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 computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	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 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 Third Group	SURCHARGE Fourth Group
	Tima Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (e for each subscriber group as shown (page 7)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Cec		#40744
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		UP
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 com 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 of DSEs by subscriber group. Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts your actual calculations on this form. 	up for the VHF Grade B contour stations that were classified as enter zero. er 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	<u>-</u>
	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 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 1).	for each subscriber group as shown age 7)	

Name	The Municipal Communications Utility of the City of Ce	SYSTEM dar Falls lowa	ID# 744
			/ 44
		LUSIVITY 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 con	mmercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber gro	oup 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 Step 3: In line 3, subtract line 2 from line 1. This is the total number 1.		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	· · · · · · · · · · · · · · · · · · ·	
	ONE HUNDERED FIRST SUBSCRIBER GROUP	ONE HUNDERED SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	1
	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 computation	subject to the surcharge computation	_
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	_
	SURCHARGE First Group	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 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 Third Group	SURCHARGE Fourth Group	
		Todatat Group	<u>-</u>
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	for each subscriber group as shown page 7)	

Name	The Municipal Communications Utility of the City of Ced	SYSTEM ID: ar Falls Iowa 40744
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 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 6 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 a your actual calculations on this form. 	up for the VHF Grade B contour stations that were classified as enter zero. er 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 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)	or each subscriber group as shown ge 7)

The Municipal Communications Utility of the City of Ced	far Falls Iowa	I ID# 744
		<i></i>
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: First 50 major television market INSTRUCTIONS:	☐ Second 50 major television market	
this schedule. Step 2: In line 2, give the total number of DSEs by subscriber gro 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 numb Step 4: Compute the surcharge for each subscriber group using t	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	
ONE HUNDRED NINTH SUBSCRIBER GROUP	ONE HUNDRED TENTH SUBSCRIBER GROUP	
Line 1: Enter the VHE DSEs	Line 1: Enter the VHE 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 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 f in the boxes above. Enter here and in block 4, line 2 of space L (page 1) and the boxes above.	or each subscriber group as shown age 7)	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLU If your cable system is located within a top 100 television market at Syndicated Exclusivity Surcharge. Indicate which major television or by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market IINSTRUCTIONS: In line 1, give the total DSEs by subscriber group for come this schedule. Step 1: In line 2, give the total number of DSEs by subscriber group this schedule. In one Step 3: In line 3, subtract line 2 from line 1. This is the total numb Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts your actual calculations on this form. ONE HUNDRED NINTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First 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 SYNDICATED EXCLUSIVITY SURCHARGE First Group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Third Group 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 by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market	

Name	The Municipal Communications Utility of the City of Ced	lar Falls Iowa 40	1 ID# 1744
	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		
Computation	by section 76.5 of FCC rules in effect on June 24, 1981:		
of Base Rate Fee	First 50 major television market	Second 50 major television market	
and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comr	mercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated	this schedule.		
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber ground Exempt DSEs in block C, part 7 of this schedule. If none of the schedule is the schedule of the schedule of the schedule.		
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts your actual calculations on this form.	ne 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	
		II	
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP	ONE HUNDRED 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	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	subject to the surcharge	
	computation	computation	_
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	_
	SURCHARGE First Group	Surcharge Second Group	
	ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP	ONE HUNDRED 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	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 1) and the boxes above.	or each subscriber group as shown age 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Ced	ar Falls Iowa SYSTEM ID#
	BLOCK B: COMPUTATION OF SYNDICATED EXCLU	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	First 50 major television market INSTRUCTIONS:	Second 50 major television market
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for common this schedule.	mercial 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 grou	
Surcharge for	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	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the	· · · · · · · · · · · · · · · · · · ·
	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	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	Surcharge Second Group
	ONE HUNDRED NINTEENTH SUBSCRIBER GROUP	ONE HUNDRED TWENTIETH 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 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 (particle)	or each subscriber group as shown ge 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM II	
Name	The Municipal Communications Utility of the City of Cedar	Falls Iowa 40744
	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	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	
Surcharge for Partially Distant Stations 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 particular group. You describe to the particular group. You describe to the particular group and the formula outlined in block D, section 3 or 4 of particular group. You describe to the particular group and the formula outlined in block D, section 3 or 4 of particular group. You describe the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group. You describe the formula outlined in block D, section 3 or 4 of particular group. You describe the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular group and the formula outlined in block D, section 3 or 4 of particular		ter zero. of DSEs used to compute the surcharge. formula outlined in block D, section 3 or 4 of part 7 of this
	ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED 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 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 TWENTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED TWENTY-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 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 on the boxes above. Enter here and in block 4, line 2 of space L (page)	each subscriber group as shown (7) \$

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	The Municipal Communications Utility of the City of Ceda	ar Falls Iowa 40744
	BLOCK B: COMPUTATION OF SYNDICATED EXCLU	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	Step 1: In line 1, give the total DSEs by subscriber group for commutation this schedule.	
Exclusivity Surcharge for	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 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. If none exempt DSEs in line 3, subtract line 2 from line 1. This is the total number of DSEs by subscriber group Exempt DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none exempt DSEs in block C, part 7 of this schedule.	enter zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the	· · · · · · · · · · · · · · · · · · ·
	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	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 First Group	SURCHARGE Second Group
	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
	Trilla Group	Fourth Group
	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)

The Municipal Communications Utility of the City of Ced	SYSTEM IDa ar Falls Iowa 40744
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 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 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.
your actual calculations on this form.	
ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED THIRTIETH 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 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 THIRTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED THIRTY-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 in the boxes above. Enter here and in block 4, line 2 of space L (page)	or each subscriber group as shown ge 7)
	Syndicated Exclusivity Surcharge. Indicate which major television mby section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market

Name	The Municipal Communications Utility of the City of Ced	ar Falls Iowa SYSTEM ID#
		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: First 50 major television market Second 50 major television market Second 50 major television Second 50 major	
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations		
	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 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 THIRTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED THIRTY-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 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)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Ceda	r Falls Iowa SYSTEM ID#
		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	
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 fit 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 HINDDED THIDTY SEVENTH SUBSCRIBED COOLD	ONE HINDRED THIRTY FIGURE SURSCRIBER CROUD
	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 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 THIRTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED FORTIETH 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	SYNDICATED EXCLUSIVITY
	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 (page	each subscriber group as shown e 7)

Name	The Municipal Communications Utility of the City of Ced	SYSTEM ID# ar Falls Iowa 40744	
	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		
Computation of Base Rate Fee and Syndicated	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 community this schedule.	Second 50 major television market mercial VHF Grade B contour stations listed in block A, part 9 of	
Exclusivity Surcharge for Partially Distant Stations	 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 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)	or each subscriber group as shown ge 7)	

	ar Falls Iowa 40744	
The Municipal Communications Utility of the City of Cedar Falls Iowa BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROU		
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: 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.		
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	
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-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	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)	or each subscriber group as shown ge 7)	
	Syndicated Exclusivity Surcharge. Indicate which major television in by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Litility of the City of Ced	SYSTEM ID# ar Falls Iowa 40744		
	The Municipal Communications Utility of the City of Cedar Falls Iowa			
	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 by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS:			
9				
Computation				
of Base Rate Fee				
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for common this schedule.	mercial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	up 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 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.			
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	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 computation	subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE First Group	SURCHARGE Second Group		
	ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 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	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 1) and the boxes above.	or each subscriber group as shown ge 7)		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: The Municipal Communications Utility of the City of Ced	SYSTEM ID# lar Falls Iowa 40744	
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 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		
	ONE LILINDRED FIETY THIRD CHROCOLIDED COOLID		
	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 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	SYNDICATED EXCLUSIVITY	
	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 (pa	or each subscriber group as shown age 7)	

The Municipal Communications Utility of the City of Ceda	SYSTEM ID# ar Falls Iowa 40744	
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		
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 commutation this schedule.	Second 50 major television market ercial VHF Grade B contour stations listed in block A, part 9 of	
 Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 		
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	
SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED SIXTIETH 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 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)	
	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may be section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market	