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

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α										
~	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period		2020/2								
B Owner	rate	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LE	EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
		Blue Stream Communications, LLC								
				C	07219	2020/2				
					007219	2020/2				
		12409 NW 35th Street								
		Coral Springs, FL 33065-2413								
С		STRUCTIONS: In line 1, give any business or trade names used to i								
	nai	mes already appear in space B. In line 2, give the mailing address o	f the system, if dif	ferent from the address giv	en in spac	e B.				
System	1	IDENTIFICATION OF CABLE SYSTEM:								
		MAILING ADDRESS OF CABLE SYSTEM:								
	2	(Number, street, rural route, apartment, or suite number)								
		(City, town, state, zjp code)								
D	1.									
_		structions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on paç	je 1b				
Area Served	WIL	h all communities. CITY OR TOWN	STATE							
First		Coral Springs	FL							
Community	F	Below is a sample for reporting communities if you report multiple ch		Shace G						
	_	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	GRP#				
0la	Ald		MD	Α		1				
Sample	Alli	ance	MD	В		2				
	Ge	ring	MD	В		3				
	_									
-		ction 111 of title 17 of the United States Code authorizes the Copyright Offce to collec your statement of account. PII is any personal information that can be used to identify								
		II, you are agreeing to the routine use of it to establish and maintain a public record, v								
	•	for the public. The effect of not providing the PII requested is that it may delay proces	• •		ne					
completed record (ur stat	ements of account, and it may affect the legal suffciency of the fling, a determination t	nal would be made by	a court of law.						

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\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

3/1/2021

STATEMENT OF ACCOUNT

General instructions are located in

the first tab of this workbook.

D

Area

Served

SYSTEM ID# 007219

LECAL NAME		CABLE SYSTEM:
	JE OWNER OF	CADLE STOTEN.

Blue Stream Communications, LLC

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

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

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
Coral Springs	FL	Α	1	First
				Community
				See instructions for
				additional information on alphabetization.
				Add rows as necessary.
				I

		(/	/	1
	J	1	/	/	1
	J	ſ	/	1	1
	J	1	1	/	1
	ļ	Ţ		1	1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:									SY	STEM ID	
Name	Blue Stream Communications, LLC										00721	
Е	SECONDARY TRANSMISSION In General: The information in s	pace E should	l cover	all categories	of	seconda						
Secondary Transmission	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).											
Service: Sub- scribers and Rates	down by categories of secondar each category by counting the n separately for the particular serv Rate: Give the standard rate of unit in which it is generally billed	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 disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Not	t in space E, th to their subso e: Where an ir	ie form cribers. idividua	lists the categ Give the numl al or organizati	or ce or	r of subsention of subsention	cribers and rate	e at	for each li falls unde	sted category r 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.											
	BLC	DCK 1							BLOC			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE		CATE	GORY OF SE	R	VICE	NO. OF SUBSCRIBER	s	RATE
	Residential: • Service to first set • Service to additional set(s) • FM radio (if separate rate)	2	0,045	\$ 33.00								
	Motel, hotel Commercial											
	Converter • Residential • Non-residential		1,605	1.99 - 4.99								
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for ra not covered in space E, that is, i service for a single fee. There a furnished at cost or (2) services amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) description	te (not subscri hose services re two exception or facilities fur hit in which it is rate column. te charged by t your cable sy separate charge	ber) inf that are ons: you nished s usually the cab stem fu ge was	ormation with i e not offered ir u do not need to nonsubscrib y billed. If any le system for e irnished or offe made or estab	re: to to ra ea	spect to a combination give rate rs. Rate in tes are cl ch of the ed during	on with any set information co- nformation sho harged on a va applicable serve the accounting	on ou ari	ondary tra cerning (1 ld include able per-p ces listed. period tha	nsmission) services both the program basis, t were not		
		BLO				" 05	DATE		0.17500	BLOCK		
	CATEGORY OF SERVICE Continuing Services: • Pay cable	RATE \$ 20.95	Install	GORY OF SEF ation: Non-re			RATE		CATEGO	RY OF SERVI	CE	RATE
	 Pay cable—add'l channel Fire protection 	\$ 10.95	• Motel, hotel • Commercial • Pay cable			\$ 3.00						
	•Burglar protection Installation: Residential • First set • Additional set(s)	8.64 - 68.04	• Fir • Bu	y cable-add'l c e protection rglar protection services:								
	• FM radio (if separate rate) • Converter	1.99-4.99	• Re • Dis	connect sconnect			\$ 15.28 \$ 19.10					
			Outlet relocation Move to new address \$ 20.00									

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue	Stream	Communications,	LIC
Dine	Jucain	communications,	

PRIMARY TRANSMITTERS: TELEVISION

LEGAL NAME OF OWNER OF CABLE SYSTEM:

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

		CHANN	EL LINE-UP	AA		
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	
WWPBT	2	Е	NO		MIAMI, FL	
WWFOR	4	N	NO		MIAMI, FL	See instructions for
WAMI	69	I	NO		HOLLYWOOD, FL	additional information
W WTVJ	6	N - M	NO		MIAMI, FL	on alphabetization.
W:WSVN	7	I	NO		MIAMI, FL	
W WBFS	33	I	NO		MIAMI, FL	
W:WSFL	39	I - M	NO		MIAMI, FL	
WWPLG	10	N - M	NO		MIAMI, FL	
W WPXM	35	I - M	NO		MIAMI, FL	
W WHFT	45	I	NO		MIAMI, FL	
W WXEL	42	Е	NO		WEST PALM BCH, FL	
WWLRN	17	Е	NO		MIAMI, FL	
w:wscv	51	I	NO		FT. LAUDERDALE, FL	
WWLTV	23	I	NO]	MIAMI, FL	
W:WSBS	22	I	NO		MIAMI, FL	
WWGEN	8	I	NO		MIAMI, FL	

G

Primary Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, EEC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television station 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 (2)); and (2) certain stations carried or substitute program basis, as explained in the next paragraph	ei on a
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute pro basis under specific FCC rules, regulations, or authorizations:	ogran
• 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 oth basis. For further information concerning substitute basis stations, see page (v) of the general instructions locate in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Ide	ntify
each multicast stream associated with a station according to its over-the-air designation. For example, report multi	

report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir

its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM 007219 **Blue Stream Communications, LLC** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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 as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe 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 identifec 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 SIGN CARRIAGE CHANNEL OF (Yes or No) NUMBER STATION (If Distant)

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Bide Stream Communications, LEC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television statio 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 of 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 pro-	ei on a
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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 channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

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Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, LLC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television station 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 of substitute program basis, as explained in the next paragraph Substitute Basis Stations : With respect to any dictant stations carried by your cable system on a substitute program.	ei on a
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute pro basis under specific FCC rules, regulations, or authorizations:	gran
• 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 oth basis. For further information concerning substitute basis stations, see page (v) of the general instructions locate in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Ide	ntify
each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exampl WETA-simulcast).	ί€
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-ai 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 noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

	EL LINE-UP		
3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
	OF	OF (Yes or No) STATION	OF (Yes or No) CARRIAGE (If Distant)

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, EEC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television static 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 is 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.	eı on ≀
basis under specifc FCC rules, regulations, or authorizations;	0
• 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 oth basis. For further information concerning substitute basis stations, see page (v) of the general instructions locate in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Ide each multicast stream associated with a station according to its over-the-air designation. For example, report multi	ntify

SPN, etc. Identify report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir

its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, LLC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television static carried by your cable system during the accounting period except (1) stations carried only on a part-time basis und FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried 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 p	deı າະ d on ະ
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	rogram
 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some o basis. For further information concerning substitute basis stations, see page (v) of the general instructions loca in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Ic each multicast stream associated with a station according to its over-the-air designation. For example, report mult cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exam	ti .

WETA-simulcast). **Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM 007219 **Blue Stream Communications, LLC** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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 as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe 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 identifec Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AK 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CARRIAGE CHANNEL OF (Yes or No) NUMBER STATION (If Distant)

G

Primary

Transmitters:

Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM 007219 **Blue Stream Communications, LLC** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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 as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe 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 identifec Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AL 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CARRIAGE CHANNEL OF (Yes or No) NUMBER STATION (If Distant)

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, LLC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television station 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 or substitute program basis, as explained in the next paragraph	ei (
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute pro	ogran
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 oth basis. For further information concerning substitute basis stations, see page (v) of the general instructions locate in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Ide	entify
each multicast stream associated with a station according to its over-the-air designation. For example, report multi	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for examp WETA-simulcast).	le
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-ai	ir ir
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the chan 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 noncomm	nercia

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, LLC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television static carried by your cable system during the accounting period except (1) stations carried only on a part-time basis und FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section]	leı [′]
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 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 pr	ogran
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 of basis. For further information concerning substitute basis stations, see page (v) of the general instructions locat in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Id	entify
each multicast stream associated with a station according to its over-the-air designation. For example, report multi	

each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir

its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary Transmitters:

Television

SYSTEM ID#

007219

Plue Streem Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, LLC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television stati carried by your cable system during the accounting period except (1) stations carried only on a part-time basis und FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried	leı [°]
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 pr basis under specifc FCC rules, regulations, or authorizations:	ogran
• 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 of basis. For further information concerning substitute basis stations, see page (v) of the general instructions locat in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Id each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example, WETA-simulcast).	

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

Blue Stream Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe 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. Identifier 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 ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary Transmitters:

Television

SYSTEM ID#

007219

Plue Streem Communications, LLC

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, LLC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television static carried by your cable system during the accounting period except (1) stations carried only on a part-time basis und FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried substitute program basis, as explained in the next paragraph	deı N
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute p	rogran
 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 o basis. For further information concerning substitute basis stations, see page (v) of the general instructions loca in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Id each multicast stream associated with a station according to its over-the-air designation. For example, report mult cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example, report wETA-simulcast).	i .

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

G

Primary

Transmitters:

Television

SYSTEM ID#

007219

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Blue Stream Communications, LLC	007
PRIMARY TRANSMITTERS: TELEVISION	
In General: In space G, identify every television station (including translator stations and low power television station 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 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.	ei on a
basis under specific FCC rules, regulations, or authorizations:	Jyrun
 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 otl basis. For further information concerning substitute basis stations, see page (v) of the general instructions locate in the paper SA3 form. 	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Ide each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for examp WETA-simulcast).	•
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-a	ir ir
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the chan 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 noncomr educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M	

commercia onal station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex

planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Blue Stream Communications, LLC 007219												
	Blue Stream	n Commun	cation	s, LLC				007219					
н	PRIMARY TRANSMITTERS: RADIO 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.												
	all-band basis whose signals were "generally receivable" by your cable system during the accounting period.												
Primary Transmitters: Radio													
	Column 3: li	f the radio sta	system as a	separate	e and discrete								
				k mark in the "S/D" column.	he station is lice	nsed by the F	CC or i	n the case of					
	Column 4: Give the station's location (the community to which the Mexican or Canadian stations, if any, the community with which the s						0001,1						
			-, , ,	···· · · · · · · · · · · · · · · · · ·									
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION					
	1				L								

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2020/2											
LEGAL NAME OF OWNER OF Blue Stream Commun					5	8YSTEM ID# 007219	Name				
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG											
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.											
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE C • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program State											
broadcast by a distant station?											
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted											
s	UBSTITUT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRED	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. TIMES FROM — TO	DELETION					
					—						
				· · · · · · · · · · · · · · · · · · ·							
				· · · · · · · · · · · · · · · · · · ·		······································					
				· · · · · · · · · · · · · · · · · · ·							
				· · · · · · · · · · · · · · · · · · ·							

									SYS	STEM ID#		
Name	Blue Stream Communications, LLC 007219											
J Part-Time Carriage Log	 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app." 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." 											
		1	DA	TES A	ND HOURS (DF F	PART-TIME CAF	RIAGE				
		WHEN	I CARRIAGE OC	CCUR	RED			WHEN	I CARRIAGE O	CCURR	ED	
	CALL SIGN		НС	OURS	3		CALL SIGN		Н	OURS		
		DATE	FROM		то			DATE	FROM		то	
										-		
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FORM	SA3E. PAGE 7.									
	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name					
Blu	e Stream Communications, LLC			007219						
Inst all a (as pag	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.									
				*						
 Instru Con Con If yo fee t If yo accord 	 COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. 									
bloc	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.									
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be e clow.	entered on	ı line 2 in l	block						
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be ente	ered on lir	ne						
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.									
	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.	\$		902,508.00						
	This is your minimum fee.	\$		9,602.69						
	 DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block. Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. Ine 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE 	nn 4, you r od?	must chec ne 1, block	k						
	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 Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 	\$		9,602.69	Cable systems submitting					
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	r		0.00	additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing						
	Line 4. FILING FEE	\$		725.00	additional fees. Division for the appropriate					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	10,327.69	form for submitting the additional fees.							
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form for more information.)									

ACCOUNTING PERIOD: 2020/2

ACCOUNTING FERM		FORM SA3E. PAGE								
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II								
Name	Blue Stream Communications, LLC	0072	19							
	CHANNELS									
м		-4-4								
IVI	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast	stations								
Channela	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
Channels	4. Fatantha tatal much as of all and all an adding the saddle									
	1. Enter the total number of channels on which the cable	16								
	system carried television broadcast stations									
	0. Enter the total source of a climate disk source in									
	2. Enter the total number of activated channels	[]								
	on which the cable system carried television broadcast stations	74								
	and nonbroadcast services	1								
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual									
	we can contact about this statement of account.)									
Individual to										
Be Contacted										
for Further	Name Candice Soeder Telephone	954-752-7244 x243								
Information										
	Address 12409 NW 35th Street									
	Address 12409 NW 35th Street (Number, street, rural route, apartment, or suite number)									
	Coral Springs, FL 33065 (City, town, state, zip)									
	Email csoeder@mybluestream.com Fax (optional)									
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regu	ulations.)								
0										
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)									
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space	B; or								
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable	system as identified								
	in line 1 of space B and that the owner is not a corporation or partnership; or	-,								
		<i>.</i>								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as ow in line 1 of space B.	iner of the cable system								
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained	ed herein								
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.									
	[18 U.S.C., Section 1001(1986)]									
	/s/ Joseph Canavan									
	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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus com									
		pationity settings.								
	Typed or printed name: /s/Joseph Canavan									
	Title: COO									
	(Title of official position held in corporation or partnership)									
	Date: March 1 2021									
	Date: March 1, 2021									
L										
	: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information ess your statement of account. PII is any personal information that can be used to identify or trace an individual, such as nam		-							

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 telephol numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in t completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of lay

FORM	SA3F	PAGE9.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nomo						
Blue Stream Communications, LLC	007219	Name						
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing 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 sub- scribers 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. 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								
INTEREST ASSESSMENTS								
You must complete this worksheet for those royalty payments submitted as a For an explanation of interest assessment, see page (viii) of the general instru		Q						
Line 1 Enter the amount of late payment or underpayment	A	Interest ssessment						
Line 2 Multiply line 1 by the interest rate* and enter the sum here	^							
Line 3 Multiply line 2 by the number of days late and enter the sum here	-							
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	\$ - (interest charge)							
* To view the interest rate chart click on www.copyright.gov/licensing/inter contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	rest-rate.pdf. For further assistance please							
** This is the decimal equivalent of 1/365, which is the interest assessmer	nt for one day late.							
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.								
Owner Address								
First community served Accounting period ID number								
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce	to collect the personally identifying information (PII) requested on th							

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

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

DSE SCHEDULE. PAGE 11.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

Distant Stations Carried Identification of Subscriber Groups In most cases under current FCC STATION DSE CITY OUTSIDE LOCAL GROSS RECEIPTS A (independent) SERVICE AREA OF FROM SUBSCRIBERS rules, all of Fairvale would be within 1.0 Santa Rosa Stations A, B, C, D ,E \$310,000.00 the local service area of both stations B (independent) 1.0 0.083 Stations A and C 100.000.00 C (part-time) Rapid City A and C and all of Rapid City and Bo-D (part-time) 0.139 Bodega Bay Stations A and C 70.000.00 dega Bay would be within the local service areas of stations B, D, and E. E (network) 0.25 Fairvale Stations B, D, and E 120,000.00 TOTAL DSEs TOTAL GROSS RECEIPTS \$600.000.00 2.472 Minimum Fee Total Gross Receipts \$600,000.00 Santa Rosa Stations A and C x .01064 35 mile zone \$6,384.00 First Subscriber Group Second Subscriber Group Third Subscriber Group (Santa Rosa) (Rapid City and Bodega Bay) (Fairvale) Fairvale Gross receipts \$310,000.00 Gross receipts \$170,000.00 Gross receipts \$120,000.00 DSEs DSEs Rapid City 2.472 DSFs 1.083 1.389 Base rate fee \$6,497.20 Base rate fee \$1,907.71 Base rate fee \$1,604.03 \$310,000 x .01064 x 1.0 = 3,298.40 \$170,000 x .01064 x 1.0 = 1,808.80 \$120,000 x .01064 x 1.0 = 1,276.80 Bodega \$310,000 x .00701 x 1.472 = 3,198.80 \$170,000 x .00701 x .083 = 98.91 \$120,000 x .00701 x .389 = 327.23 Bav \$6,497.20 Base rate fee \$1,907.71 \$1,604.03 Base rate fee Base rate fee Stations B, D, 1 Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 and E

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

35 mile zone

ACCOUNTING PERIOD: 2020/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
1	Blue Stream Communic	ations, LLC				007219					
	 Add the DSEs of each station 	SUM OF DSEs OF CATEGORY "O" STATIONS: Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. 0.00									
2 Computation of DSEs for	the letter "O" in column 5 each network or noncom-										
Category "O"	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		

	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:					:	SYSTEM ID#	
Name	Blue Stream Communications, LLC 007								
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all dista Provide the information of the informat	he number of hours mation given in space he total number of ho mn 2 by the figure in nal point. This is the station, give the "type lumn 4 by the figure	your cable system the J. Calculate or pours that the stat in column 3, and g "basis of carriag e-value" as "1.0." in column 5, and	m carried the sta ly one DSE for e ion broadcast ov give the result in e value" for the s For each networ	tion during the acco each station. er the air during the decimals in column station. rk or noncommercia n column 6. Round	accounting period. 4. This figure must I educational station, o no less than the		
Capacity		CATEGORY LAC STATIONS: COMPUTATION OF DSEs							
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. NU JRS OI D BY ST	JMBER F HOURS FATION N AIR	4. BASIS OF CARRIAG VALUE	= 5. T`	YPE 6. DA	SE	
			÷			×	=		
			÷ ÷			x x	=		
					•••••••••••••••••••••••••••••••••••••••	x	=		
			÷			x	=		
			<u>.</u>			×	=		
			÷ ÷			x x	=		
	Add the DSEs	OF CATEGORY LAC S of each station. Im here and in line 2 of pa		9,	Þ		0.00		
4 Computation of DSEs for Substitute- Basis Stations	 Was carried tions in effe Broadcast of space I). Column 2: at your option. Column 3: Column 4: 	For each station give the This figure should corres Enter the number of days Divide the figure in colum	itution for a program as shown by the lett ork programs during number of live, noni spond with the inform in the calendar yea in 2 by the figure in o	that your system er "P" in column that optional carri- network program nation in space I. r: 365, except in column 3, and giv	was permitted t 7 of space I); and age (as shown by s carried in subs a leap year. ve the result in co	o delete under FCC d the word "Yes" in co titution for programs plumn 4. Round to n	rules and regular- umn 2 of that were deleted o less than the third	orm).	
		SU	BSTITUTE-BAS	IS STATION	S: COMPUTA	TION OF DSE			
	1. CALL	2. NUMBER	3. NUMBER	4. DSE	1. CALL	2. NUMBER	3. NUMBER	4. DSE	
	SIGN	OF PROGRAMS	OF DAYS IN YEAR		SIGN				
		+					÷	=	
		÷					÷	=	
		÷ +				2. NUMBER OF PROGRAMS : · · · · ·			
		÷					•••••••	=	
		÷	•	-			÷	=	
	Add the DSEs	oF SUBSTITUTE-BASI of each station. Im here and in line 3 of page		9,			0.00		
5		ER OF DSEs: Give the am s applicable to your system		in parts 2, 3, and	4 of this schedule	e and add them to pr	ovide the total		
Total Number	1. Number o	f DSEs from part 2 ●				•	0.00		
of DSEs	2. Number o	f DSEs from part 3 ●			!		0.00		
	3. Number o	f DSEs from part 4 ●			I	•	0.00		
	TOTAL NUMBE	R OF DSEs					_▶	0.00	

	WNER OF CABLE S						~		
	communication						S	YSTEM ID# 007219	Name
structions: Blo	ck A must be comp	latad							
block A:									6
lf your answer if ' chedule.	"Yes," leave the re	mainder of pa	art 6 and part 7	7 of the DSE scheo	lule blank and	l complete part	8, (page 16) of the	e	6
f your answer if '	"No," complete blo								Computation
				TELEVISION M					Computation 3.75 Fee
the cable syster fect on June 24,	n located wholly oເ 1981?	utside of all m	ajor and smal	ler markets as defi	ned under sec	ction 76.5 of FC	C rules and regul	ations in	
Yes—Com	plete part 8 of the	schedule—D	О NOT COMP	LETE THE REMA	INDER OF PA	ART 6 AND 7.			
X No—Comp	lete blocks B and	C below.							
		BLO				SEs			
Column 1:	List the call signs			part 2, 3, and 4 of			m was permitted t	o carry	
CALL SIGN	under FCC rules	and regulatio e DSE Scheo	ns prior to Jun lule. (Note: Th	ie 25, 1981. For fui e letter M below re	ther explanati	ion of permitted	stations, see the	-	
Column 2:			0	sis on which you ca					
BASIS OF PERMITTED	•	•		elow pertain to thos ket quota rules [76			,)	
CARRIAGE	76.61(b)(c)]				, , , ,		() 0		
			. , .	6.59(d)(1), 76.61(e 9(c), 76.61(d), 76.6		•			
	D Grandfathered instructions for			raph regarding sub	stitution of gra	andfathered sta	tions in the		
	E Carried pursua	ant to individu	al waiver of F0	. ,					
				e or substitute bas ontour, [76.59(d)(5			ring to 76 61(e)(5)	1	
	M Retransmissio		•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , , ,		L.	
Column 3:		each distant s	tation listed in	parts 2, 3, and 4 o	f the schedule				
	this schedule to d			etter "F" in column			rksheet on page 1	4 of	
1. CALL				2. PERMITTED			rksheet on page 1 2. PERMITTED	4 of 3. DSE	
1. CALL SIGN	this schedule to d	letermine the	DSE.)	1	2, you must co	omplete the wo			
	this schedule to d	letermine the	DSE.)	2. PERMITTED	2, you must co	omplete the wo	2. PERMITTED		
	this schedule to d	letermine the	DSE.)	2. PERMITTED	2, you must cc 3. DSE	1. CALL SIGN	2. PERMITTED BASIS		
	this schedule to d	letermine the	DSE.)	2. PERMITTED	2, you must cc 3. DSE	omplete the wo	2. PERMITTED BASIS		
	this schedule to d	letermine the	DSE.)	2. PERMITTED	2, you must cc 3. DSE	1. CALL SIGN	2. PERMITTED BASIS		
	this schedule to d	letermine the	DSE.)	2. PERMITTED	2, you must cc 3. DSE	1. CALL SIGN	2. PERMITTED BASIS		
	this schedule to d	a. DSE	DSE.)	2. PERMITTED BASIS	2, you must cc	1. CALL SIGN	2. PERMITTED BASIS		
	this schedule to d	a. DSE	DSE.)	2. PERMITTED	2, you must cc	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
SIGN	this schedule to d	a. DSE	DSE.)	2. PERMITTED BASIS	2, you must cc	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
SIGN	this schedule to d	3. DSE	DSE.) 1. CALL SIGN BLOCK C: CC Dart 5 of this :	2. PERMITTED BASIS	2, you must cc	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
SIGN	this schedule to d	attermine the 3. DSE DSEs from p d DSEs from . This is the	DSE.) 1. CALL SIGN BLOCK C: CC Dart 5 of this solutions of the solution of	2. PERMITTED BASIS	2, you must cc 3. DSE 5 3.75 FEE to the 3.75 r	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
SIGN	this schedule to d	a. DSE	DSE.) 1. CALL SIGN BLOCK C: CC Dart 5 of this so total number inceed to part	2. PERMITTED BASIS	2, you must cc 3. DSE 5 3.75 FEE to the 3.75 r	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	-
SIGN	e total number of line 2 from line 1 eave lines 4–7 bl	a. DSE	DSE.) 1. CALL SIGN BLOCK C: CC Dart 5 of this so total number inceed to part	2. PERMITTED BASIS	2, you must cc 3. DSE 5 3.75 FEE to the 3.75 r	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	DSEs repres partially
SIGN ne 1: Enter the ne 2: Enter the ne 3: Subtract (If zero, Iv ne 4: Enter gro	e total number of line 2 from line 1 eave lines 4–7 bl	a. DSE	DSE.) 1. CALL SIGN BLOCK C: CC part 5 of this s h block B abo total number icceed to part age 7)	2. PERMITTED BASIS	2, you must cc 3. DSE 5 3.75 FEE to the 3.75 r	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	DSEs repres partially permited partially
SIGN ne 1: Enter the ne 2: Enter the ne 3: Subtract (If zero, lu ne 4: Enter gro ne 5: Multiply li	e total number of le sum of permittee line 2 from line 1 eave lines 4–7 bl	and enter su	DSE.) 1. CALL SIGN BLOCK C: CC part 5 of this s h block B abo total number ceed to part age 7) m here	2. PERMITTED BASIS	2, you must cc 3. DSE 5 3.75 FEE to the 3.75 r	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	Do any of ti DSEs repres partially nonpermittu carriage? If yes, see p
SIGN ne 1: Enter the ne 2: Enter the ne 3: Subtract (If zero, lu ne 4: Enter gro ne 5: Multiply li	this schedule to d	and enter su	DSE.) 1. CALL SIGN BLOCK C: CC part 5 of this s h block B abo total number ceed to part age 7) m here	2. PERMITTED BASIS	2, you must cc 3. DSE 5 3.75 FEE to the 3.75 r	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	DSEs repres partially permited/ partially nonpermitte carriage?

	OWNER OF CABLE						S	YSTEM ID# 007219	
BLOCK A: TELEVISION MARKETS (CONTINUED)									
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
									Computatio 3.75 Fee
									3.75 Fee
		I							
	1	1	11	1	1		1	1	1

						DSE SCHEDULE. PAGE 14.			
Name	LEGAL NAME OF OWN					SYSTEM ID#			
	Blue Stream Co	ommunications,				007219			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 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 entere in block B, column 3 of part 6 for this station. 								
				IED ON A PART-TIME A					
l	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESENT	6. PERMITTED			
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE			
	Instructions, Block /) must be completed	•						
7	Instructions: Block A In block A:	a musi de completeu							
Computation		"Yes," complete blog							
of the	If your answer is	"No," leave blocks E	and C blank and comple	te part 8 of the DSE scheo	dule.				
Syndicated			BLOCK A: MAJOR	R TELEVISION MARK	KET				
Exclusivity Surcharge	 Is any portion of the of 	cable system within a	top 100 maior television m	arket as defned by section	76.5 of FCC rules in effect	June 24, 1981?			
j-		blocks B and C .		·	as defined by section 76.5 of FCC rules in effect June 24, 1981?				
	BLOCK B: Ca	arriage of VHF/Grad	e B Contour Stations	BLOCK C: Computation of Exempt DSEs					
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places a gra	e primary stream of a de B contour, in whole	ied in any commu- 31, 1972? (refer					
			propriate permitted DSE	to former FCC rule 7	station below with its approp	riate permitted DSE			
		and proceed to part 8.			and proceed to part 8.				
	CALL SIGN	DSE C	ALL SIGN DSE	CALL SIGN	DSE CALL S	IGN DSE			
		тс	TAL DSEs 0.00	<u> 1</u>	TOTAL	DSEs 0.00			
				H					

DSE SCHED	ULE. PAGE15
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LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Blue Stream Communications, LLC	SYSTEM ID# 007219	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	902,508.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	3E	
	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.		
0.5	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.		
-ru	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

ACCOUNTING PERIOD	. 2020/2	DSE SCH	EDULE. PAGE 16.
Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
		Blue Stream Communications, LLC	007219
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	
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)	_
		section 2) and enter here.	_
		F. Multiply line D by line E and enter here	
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.	
8 Computation of Base Rate Fee	You mi 6 was 6 • In blo • If you • If you blank What i were lo	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of 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 b is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers bocated within that station's local service area and others were located outside that area. For the definition of a station's "loc e area," see page (v) of the general instructions.	elow
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1)	
		(the amount in section 1)	
		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

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
Blue	Stream Communications, LLC 007219	ivanie
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) ► \$	U
	(the amount in section 1) ► \$	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1) ▶ \$	of Base Rate Fee
	C. Multiply line B by 3.000 and enter here ▶	Dase Nate I ee
	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	
IMPOS		
shall in	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-	9
	Space G.	Ŭ
	eral: 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	Computation of
this ex	clusion, you must:	Base Rate Fee
First: [Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Dura dia stand
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number o	 Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
-	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
must a	so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Distant
Howev	er, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially
) Identify a Subscriber Group for Partially Distant Stations	Permitted
	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne token, the station is distant to the subscriber.)	
Step 3	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
•	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
In each	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 bers in the group.	
• lf:		
, .	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, .	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 a paper SA3 form.	
• Comp page. DSEs f	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 or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM ID
Name	Blue Stream Communications, LLC	00721
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals	
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant.	
	Subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant	
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K.	
	Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge.	
	Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate	9
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNE Blue Stream Com							SYSTEM ID# 007219	Name
E				TE FEES FOR EA				
COMMUNITY/ AREA		SUBSCRIBER GRC	IUP	COMMUNITY/ ARE) SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA Coral Springs							•	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Dece Data D
								Base Rate F and
								Syndicate
								Exclusivit
								Surcharge for
								Partially
								Distant Stations
		+						Stations
		+						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 90	2,508.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
	THIRD	SUBSCRIBER GRC		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	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
-					-			
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee For	urth Group	\$	0.00	
				11				
Base Rate Fee: Add th	ne base rat	e fees for each subs	criber aroup a	as shown in the boxes	above			
Enter here and in block			siner group c			\$	0.00	

LEGAL NAME OF OWNE Blue Stream Com							SYSTEM ID# 007219	Na
E				TE FEES FOR EAC				 (
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otal DSEs			0.00	Total DSEs			0.00	
iross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
a se Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
]	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				<u> </u>				
		e fees for each subs						

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN Total DSEs CALL SIGN Total DSEs	UP 0 DSE	Compo Base R ar Syndi Exclu Surcl fc Part
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	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
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	0.00	\$	Group					

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				TE FEES FOR EACH				
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l	JP	SUBSCRIBER GRO	WENTIETH	Т	JP	SUBSCRIBER GRO	NTEENTH	NII
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ME OF OWNER OF CABLE SYSTEM: ream Communications, LLC		SYSTEM ID# 007219	
BLOCK A: COMPUTATION OF BASE RATE F			
TWENTY-FIRST SUBSCRIBER GROUP	TWENTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0		
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TWENTY-THIRD SUBSCRIBER GROUP		IRTH SUBSCRIBER GROUP	
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s 0.00_ Tota	NDSEs	0.00	
	al DSEs ss Receipts Fourth Group		

Name	6YSTEM ID# 007219	S						LEGAL NAME OF OWNER Blue Stream Comn
				TE FEES FOR EACH				
9	TWENTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0					SUBSCRIBER GROU	TY-FIFTH	TWEN COMMUNITY/ AREA
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	UP	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP	SUBSCRIBER GROU	SEVENTH	TWENTY-S
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LEGAL NAME OF OWN Blue Stream Com							SYSTEM ID# 007219	Name		
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Total DSEs			0.00	Total DSEs			0.00			
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Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
THI	RTY-FIRST	SUBSCRIBER GRC	UP	THIR	TY-SECONE) SUBSCRIBER GRO	UP			
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Total DSEs			0.00	Total DSEs			0.00			
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Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$				

Name	6YSTEM ID# 007219	S						LEGAL NAME OF OWNEF Blue Stream Comn
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		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
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N	6YSTEM ID# 007219						R OF CABLI	Blue Stream Comr
ļ				TE FEES FOR EACH				
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SYSTEM ID# 007219	5						EGAL NAME OF OWNE Blue Stream Comr
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Name	6YSTEM ID# 007219						R OF CABLI MUNICATI	Blue Stream Comr
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Name	6YSTEM ID# 007219	ę						LEGAL NAME OF OWNER Blue Stream Comm
				TE FEES FOR EACH				
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LEGAL NAME OF OWN Blue Stream Cor							SYSTEM ID# 007219	Name
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Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
F	IFTY-FIFTH	SUBSCRIBER GRO	UP		FIFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0		COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	II as shown in the boxes	above.	\$		

	A: COMPUTATION C TH SUBSCRIBER GRC CALL SIGN		F COMMUNITY/ ARE/	IFTY-EIGHTH	IBER GROUP	JP
COMMUNITY/ AREA		0	COMMUNITY/ ARE		SUBSCRIBER GRO	JP
	CALL SIGN			A		
CALL SIGN DSE	CALL SIGN	DSE				0
			CALL SIGN	DSE	CALL SIGN	DSE
					• <mark>•</mark>	
		0.00	T / 1 D D T			0.00
otal DSEs		0.00	Total DSEs			
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
FIFTY-NIN	TH SUBSCRIBER GRO	DUP		SIXTIETH	SUBSCRIBER GRO	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	۹		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					n <mark>-</mark>	
otal DSEs		0.00	Total DSEs			0.00
ross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
]
ase Rate Fee Third Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00

LEGAL NAME OF OWN Blue Stream Cor							SYSTEM ID# 007219	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		1		D SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	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
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	
S	IXTY-THIRD	SUBSCRIBER GRO)UP	SI	XTY-FOURTH	H SUBSCRIBER GRO	RIBER GROUP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
]]	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWI Blue Stream Col							SYSTEM ID# 007219	Name
				TE FEES FOR EAG				
COMMUNITY/ AREA		SUBSCRIBER GRO	0 DUP	COMMUNITY/ ARE		H SUBSCRIBER GRO	0 0	9 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	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	
SIXT	Y-SEVENTH	SUBSCRIBER GRO	OUP	S	IXTY-EIGHTH	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third Base Rate Fee: Add Enter here and in blo	the base rat	te fees for each subs		Base Rate Fee Fou		\$	0.00	

LEGAL NAME OF OWN Blue Stream Cor							SYSTEM ID# 007219	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		1		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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
		-						otations
		-						
Total DSEs		11	0.00	Total DSEs		1	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	
SEVE	ENTY-FIRST	SUBSCRIBER GRO	UP	SEVEN	TY-SECONE) SUBSCRIBER GRO	UP	
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	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

Name	6YSTEM ID# 007219	S						LEGAL NAME OF OWNEF Blue Stream Comn
				TE FEES FOR EACH				
9 Computation	0P 0	SUBSCRIBER GROU	-FOURTH	COMMUNITY/ AREA	9 0	SUBSCRIBER GROU	Y-THIRD	SEVENI COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate Exclusivit						-		
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	I Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	UP	SUBSCRIBER GROU	ITY-SIXTH	SEVE	IP	SUBSCRIBER GROU	TY-FIFTH	SEVEN
	0	COMMUNITY/ AREA						COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
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	0.00			Total DSEs	0.00			Total DSEs
		\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G
	0.00							

Nan	AL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID: e Stream Communications, LLC 007219							Blue Stream (
					BLOCK A: COMPUTATION OF BASE R SEVENTY-SEVENTH SUBSCRIBER GROUP					
9	SEVENTY-EIGHTH SUBSCRIBER GROUP				UP 0	1 SUBSCRIBER GRO	<u>SEVENTY-SEVENTI</u> TY/ AREA			
Comput	Ŭ				•					
of Base Ra	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	GN DSE	CALL SIGN		
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Partia										
Dista Statio										
otatio										
	0.00			Total DSEs	0.00	0.00		Fotal DSEs		
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	Base Rate Fee Second Group \$ 0.00									
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	Fee First Group	Base Rate Fee F		
		\$		Base Rate Fee Seco		\$				
				Base Rate Fee Seco			SEVENTY-NINT	S		
	JP				UP		SEVENTY-NINTI TY/ AREA	S		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	COMMUNITY/ AF		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S Community/ Af		
	JP 0	I SUBSCRIBER GROU	EIGHTIETH	COMMUNITY/ ARE#	UP 0	I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S COMMUNITY/ AF		
	JP 0	I SUBSCRIBER GROU		COMMUNITY/ AREA		I SUBSCRIBER GRO	SEVENTY-NINTI TY/ AREA	S COMMUNITY/ AF CALL SIGN		

Name	6YSTEM ID# 007219	S						LEGAL NAME OF OWNEF Blue Stream Comn
				TE FEES FOR EACH				
9	EIGHTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA O					EIGHTY-FIRST SUBSCRIBER GROUP		
Computatio of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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	0.00			Total DSEs	0.00			lotal DSEs
	0.00	\$	l Group	Gross Receipts Second	0.00	\$	oup	Bross Receipts First Gro
	0.00	\$	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro	
		SUBSCRIBER GROU	-FOURTH			SUBSCRIBER GROU	Y-THIRD	EIGHT
	0			COMMUNITY/ AREA	0		COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	oup	Gross Receipts Third Gr
						1		

Name	SYSTEM ID# 007219					E SYSTEM: ons, LLC		Blue Stream Com	
				TE FEES FOR EACH					
9		SUBSCRIBER GRO	HTY-SIXTH	1	JP 0	SUBSCRIBER GROU	ITY-FIFTH		
Computa	COMMUNITY/ AREA 0							COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate									
and Syndica		-							
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	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	oup	Gross Receipts First Gr	
	0.00	Base Rate Fee Second Group \$ 0.00				\$	oup	Base Rate Fee First Gr	
	UP	EIGHTY-EIGHTH SUBSCRIBER GROUP				SUBSCRIBER GROU	SEVENTH	EIGHTY-	
	0			COMMUNITY/ AREA	0		COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
						+			
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	S	Group	Total DSEs Gross Receipts Fourth	0.00	S	roup	Fotal DSEs Gross Receipts Third G	

Name	O07219	5						LEGAL NAME OF OWNER Blue Stream Comr
				TE FEES FOR EACH				
9		SUBSCRIBER GRO	NINTIETH			SUBSCRIBER GROU	TY-NINTH	
Computati	COMMUNITY/ AREA 0					MMUNITY/ AREA 0		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00		1 1	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
		SUBSCRIBER GRO	-SECOND	8		SUBSCRIBER GROU	TY-FIRST	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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						-		
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	0.00		1	Total DSEs	0.00		1 1	Fotal DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G
								,

Name	6YSTEM ID# 007219	5						LEGAL NAME OF OWNEF Blue Stream Comn		
				TE FEES FOR EACH						
9	UP 0	SUBSCRIBER GROU	-FOURTH	NINETY COMMUNITY/ AREA		NINETY-THIRD SUBSCRIBER GROUP IMUNITY/ AREA 0				
Computatio										
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate F										
and Syndicated										
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for						-				
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Stations										
						-				
	0.00			Total DSEs	0.00			Total DSEs		
	0.00	\$	l Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro		
	Base Rate Fee Second Group \$ 0.00				0.00	\$	oup	Base Rate Fee First Gro		
	UP	SUBSCRIBER GRO	TY-SIXTH	NINE	IP	SUBSCRIBER GROL	TY-FIFTH	NINE		
	0			COMMUNITY/ AREA	0		COMMUNITY/ AREA			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
		-				-				
						-				
	0.00		<u> </u>	Total DSEs	0.00		1	Fotal DSEs		
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G		

-	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Blue Stream Communications, LLC 007219								
				TE FEES FOR EACH					
	NINETY-EIGHTH SUBSCRIBER GROUP				NINETY-SEVENTH SUBSCRIBER GROUP				
	~					0		OMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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_	0.00			Total DSEs	0.00			otal DSEs	
_	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	ross Receipts First G	
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	0.00	\$		Base Rate Fee Seco	0.00	\$			
	JP	\$ SUBSCRIBER GROU		ONE H	UP	\$ SUBSCRIBER GRO	NETY-NINTH	NIN	
						\$ SUBSCRIBER GRO	NETY-NINTH	NIN	
	JP			ONE H	UP	SUBSCRIBER GRO	NETY-NINTH	NINI DMMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI MMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI DMMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI MMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI DMMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI DMMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI DMMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI OMMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI OMMUNITY/ AREA	
	JP 0	SUBSCRIBER GRO	UNDREDTH	ONE H	UP 0	1	NETY-NINTH	NINI OMMUNITY/ AREA	
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	JP 0 DSE	SUBSCRIBER GROU		ONE H COMMUNITY/ AREA CALL SIGN		CALL SIGN	NETY-NINTH A DSE	ase Rate Fee First C NINI OMMUNITY/ AREA CALL SIGN	

LEGAL NAME OF OWNE Blue Stream Com						3	YSTEM ID# 007219	Name		
				TE FEES FOR EAC			6			
ONE HUNDE	RED FIRST	SUBSCRIBER GROU	<u>ч</u>	ONE HUNDR		SUBSCRIBER GROU	9 0	9		
								Computation		
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								and		
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Sec		\$	0.00			
ONE HUNDR	ED THIRD	SUBSCRIBER GROU	JP 0	ONE HUNDR		SUBSCRIBER GROU	IP 0			
COMMUNITY AREA			U	COMMONTLY 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	Gross Receipts Four	th Group	\$	0.00			
]			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
		t e fees for each subsc space L (page 7)	riber group	as shown in the boxes	above.	\$				

Nam	YSTEM ID# 007219						nmunicati	
				TE FEES FOR EAC				
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of Base Rat	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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ĺ	0.00			Total DSEs	0.00			otal DSEs
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		\$				\$\$		
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	0.00	\$	nd Group	Gross Receipts Seco Base Rate Fee Seco	0.00	\$	Group) SEVENTH	ase Rate Fee First G
	0.00 0.00	\$	nd Group	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR	0.00 0.00	\$	Group) SEVENTH	Base Rate Fee First G
-	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	ONE HUNDRED
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	ONE HUNDRED
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	ONE HUNDRED
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	ONE HUNDRED
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	ONE HUNDRED
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	ONE HUNDRED
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	ONE HUNDRED
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	Base Rate Fee First G ONE HUNDRED COMMUNITY/ AREA
	0.00 0.00	SUBSCRIBER GROU	nd Group ED EIGHTH	Gross Receipts Seco Base Rate Fee Seco ONE HUNDR COMMUNITY/ AREA	0.00 0.00	\$	Group	Base Rate Fee First G ONE HUNDRED COMMUNITY/ AREA
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9	JP 0	SUBSCRIBER GRO	D FIFTIETH		UP 0	SUBSCRIBER GRO	TY-NINTH			
Comput	U			COMMUNITY/ AREA	U			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate										
and Syndica										
Exclusiv										
Surcha										
for		-								
Partial Distar										
Station										
		-								
	0.00			Total DSEs	0.00			otal DSEs		
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	roup	Bross Receipts First G		
					<u> </u>					
	0.00 Base Rate Fee Second Group \$ 0.00					\$	a se Rate Fee First G			
	ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP				ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP OMMUNITY/ AREA 0					
	COMMUNITY/ AREA 0							COMMUNITY/ AREA		
	U			COMMUNITY/ AREA						
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN		
		CALL SIGN	DSE			CALL SIGN		CALL SIGN		
		CALL SIGN	DSE			CALL SIGN		CALL SIGN		
		CALL SIGN	DSE			CALL SIGN		CALL SIGN		
		CALL SIGN				CALL SIGN		CALL SIGN		
		CALL SIGN				CALL SIGN		CALL SIGN		
		S		CALL SIGN		S				

Name	007219	S				ions, LLC		LEGAL NAME OF OWNE Blue Stream Com
				TE FEES FOR EAC				
9		SUBSCRIBER GROU	Y-FOURTH	11	JP 0	SUBSCRIBER GROU		
Computa	COMMUNITY/ AREA 0							COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and Syndica								
Exclusiv								
Surchar								
for								
Partiall Distan								
Station						n -		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	Base Rate Fee Second Group \$ 0.00					e Rate Fee First Group \$ 0.00		
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	Group	Base Rate Fee First G
	JP	\$		ONE HUNDRED I	JP	\$	FIFTY-FIFTH	ONE HUNDRED FI
							FIFTY-FIFTH	ONE HUNDRED FI
	JP			ONE HUNDRED I	JP		FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0	SUBSCRIBER GROU	FTY-SIXTH	ONE HUNDRED I	JP 0	I SUBSCRIBER GROU	FIFTY-FIFTH	ONE HUNDRED FI
	JP 0 0	SUBSCRIBER GROU	FTY-SIXTH	CALL SIGN		I SUBSCRIBER GROU	FIFTY-FIFTH A DSE	ONE HUNDRED FII

	007219		01100000			ions, LLC			
		IBER GROUP		TE FEES FOR EACH	· BASE RA				
9 Computation of					JNDRED FIFTY-SEVENTH SUBSCRIBER GROUP			COMMUNITY/ AREA	
-	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F	DOL		DOL		DOL		DOL	ONLE CICIN	
and									
Syndicate Exclusivit		-							
Surcharg									
for									
Partially		-							
Distant Stations						n -			
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	roup	iross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secor	0.00	\$	roup	ase Rate Fee First Gr	
		SUBSCRIBER GROUP	D SIXTIETH	ONE HUNDR		I SUBSCRIBER GROUP	ONE HUNDRED FI		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
		-							
		_				.			
	0.00	· · ·	-	Total DSEs	0.00	··		otal DSEs	
			0	Gross Receipts Fourt	0.00	\$	Group	Gross Receipts Third G	
	0.00	\$	Group				•		

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Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER Blue Stream Comr			•			S	YSTEM ID# 007219	Name
В	FIRST	SUBSCRIBER GROU				IBER GROUP SUBSCRIBER GROL	JP	0
COMMUNITY/ AREA	OMMUNITY/ AREA Coral S			COMMUNITY/ AREA			9 Computation of	
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	OUD	s 902	,508.00	Gross Receipts Seco	nd Group	\$	0.00	
	oup		,			÷		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU				SUBSCRIBER GROU	-	
COMMUNITY/ AREA	MMUNITY/ 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	
				11				
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subscr pace L (page 7)	iber group a	as shown in the boxes a	above.	\$	0.00	

LEGAL NAME OF OWNEF Blue Stream Comn						SY	STEM ID# 007219	Name
BI	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
					DOF		005	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	
5	EVENTH	SUBSCRIBER GROU	IP		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	auo	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	-42	· · · · · · · · · · · · · · · · · · ·	5.00		Joup	· ·		
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes at	ove.	\$		

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LEGAL NAME OF OWNEF Blue Stream Comn						S	O07219	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	NINTH	SUBSCRIBER GROU	JP		TENTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			9	
				CALL SIGN DSE CALL SIGN DSE		Computation of Base Rate Fee		
CALL SIGN	DSE	CALL SIGN	DSE		DSE		DSE	
		-						and
								Syndicated
								Exclusivity
		-						Surcharge
		-				-		for
								Partially
								Distant Stations
						-		Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secor	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secor	d Group	\$	0.00	
EL	EVENTH	SUBSCRIBER GROU	JP		TWELVTH	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 Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	II as shown in the boxes a	bove.	\$		

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LEGAL NAME OF OW Blue Stream Co			•			:	SYSTEM ID# 007219	Name
				TE FEES FOR EAG		IBER GROUP		
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatior
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
								for
		_						Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FIFTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	A		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

	6YSTEM ID# 007219					E SYSTEM: ons, LLC		Blue Stream Com	
				TE FEES FOR EACH					
9	EIGHTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				JP 0	SUBSCRIBER GROU	NIEENTH	SEVEN COMMUNITY/ AREA	
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate	202		202		202		001		
and									
Syndicat									
Exclusiv									
Surchar for									
Partiall									
Distan		-				_			
Station		-							
						-			
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	a se Rate Fee First Gr	
	UP	SUBSCRIBER GRO	WENTIETH	Т	JP	SUBSCRIBER GROU	ITEENTH	NI	
	0		TWENTIETH SUBSCRIBER GROUP COMMUNITY/ AREA O				COMMUNITY/ AREA		
	DOF	n						CALL SIGN	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE		DSE		
	DSE		DSE	CALL SIGN	DSE		DSE		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE		DSE		
		CALL SIGN	DSE	CALL SIGN	DSE				
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
		CALL SIGN	DSE	CALL SIGN	DSE				
		CALL SIGN	DSE	CALL SIGN	DSE				
		CALL SIGN	DSE	CALL SIGN	DSE				
		CALL SIGN	DSE	CALL SIGN	DSE				
	0.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	0.00			oral DSEs	
		S				S			

							nunicatio	Blue Stream Comr
				TE FEES FOR EACH				
9 Computatio of	TWENTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				лр О	SUBSCRIBER GROU	IY-FIRST	I WEN COMMUNITY/ AREA
-	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base F								
а		-						
Synd						-		
Exclu Surc							-	
f							-	
Part						-		
Dis								
Stat						-		
							-	
							-	
	0.00				0.00			atal DSCa
				Total DSEs				otal DSEs
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	ross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00			a se Rate Fee First Gr
						\$	oup	ase Rate ree Filst Gi
		SUBSCRIBER GRO	-FOURTH			SUBSCRIBER GROU	-	
	UP 0	SUBSCRIBER GRO	-FOURTH			•	-	TWEN
		SUBSCRIBER GRO	2-FOURTH	TWENTY	JP	•	-	TWEN OMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN OMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN OMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN OMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN OMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN OMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN OMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN COMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN COMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN COMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN COMMUNITY/ AREA
	0	1	1	TWENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-THIRD	TWEN COMMUNITY/ AREA
	0 DSE	1	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	TWEN COMMUNITY/ AREA CALL SIGN
	0 DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN	JP 0 DSE 0.00	SUBSCRIBER GROU	DSE	TWEN" COMMUNITY/ AREA CALL SIGN

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LEGAL NAME OF OWNE Blue Stream Com						ŝ	6YSTEM ID# 007219	Name
E	BLOCK A:		BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
TWE	NTY-FIFTH	SUBSCRIBER GROU	JP	TWE	ENTY-SIXTH	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity
								Surcharge
		-						for
								Partially Distant
								Stations
		-						otationo
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWENTY	SEVENTH	SUBSCRIBER GROU	JP	TWEN	NTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						. =		
		-						
		· · · · · · · · · · · · · · · · · · ·					·····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

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LEGAL NAME OF OWNEF Blue Stream Comn						SY	STEM ID# 007219	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				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	
тнв		SUBSCRIBER GROU		THIRTY		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	-OLCOND	SODGERIDER GROOT	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 Date Face A 11		- food for!	ih er	no obour in the low of				
Enter here and in block			inei group a	as shown in the boxes ab	oove.	\$		

				TE FEES FOR EACH				
	JP 0	SUBSCRIBER GROU	THIRT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ry-third	THIR COMMUNITY/ AREA	
Comp	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base I			202		202			0/122 01011
а								
Sync		-						
Excl								
Surc f						-		
Par		-				-		
Dis						-		
Stat								
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Bross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gr
		\$ SUBSCRIBER GROU	-			\$ SUBSCRIBER GROU	-	
			-			<u>-</u>	-	THIR
	JP		-	ТНІ	JP	<u>-</u>	-	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	THIR OMMUNITY/ AREA
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	6YSTEM ID# 007219	\$						LEGAL NAME OF OWNER Blue Stream Comm
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EGAL NAME OF OWNER OF CA	ations, LLC					007219	
	A: COMPUTATION C				BER GROUP		
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Name	007219							LEGAL NAME OF OWNER Blue Stream Comn
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	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	oup	ase Rate Fee First G
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LEGAL NAME OF OWNE						5	6YSTEM ID# 007219	Name
	BLOCK A:		BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
SI	XTY-FIFTH	SUBSCRIBER GROU	JP	5	SIXTY-SIXTH	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	۸ 		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIXTY	-SEVENTH	SUBSCRIBER GROU	JP	SI	XTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	\		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			riber group	as shown in the boxes	above.	\$		

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LEGAL NAME OF OWN						5	6YSTEM ID# 007219	Name
	BLOCK A:		BASE RA	TE FEES FOR EACH	I SUBSCR	IBER GROUP		
SI	XTY-NINTH	SUBSCRIBER GROU	JP	S	EVENTIETH	SUBSCRIBER GROU	UP	9
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			riber group a	II as shown in the boxes a	above.	\$		

GAL NAME OF OWNER OF CAE lue Stream Communica						
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tal DSEs		0.00	Total DSEs			0.00
oss Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
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· · · · · · · · · · · · · · · · · · ·				ENTY-SIXTH		
SEVENTY-FIFT	·	DUP	SEVI	ENTY-SIXTH		DUP
SEVENTY-FIFT	H SUBSCRIBER GRC	DUP 0	COMMUNITY/ AREA	ENTY-SIXTH	I SUBSCRIBER GRC	0UP 0
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ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
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LEGAL NAME OF OWNER Blue Stream Comm						S	6YSTEM ID# 007219	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
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Name	6YSTEM ID# 007219					E SYSTEM: ons, LLC		Blue Stream Comr
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Blue Stream Communications, LLC 007219 BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
		BER GROUP	SUBSCR	TE FEES FOR EACH						
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