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:

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
7-30-21	\$
	ALLOCATION NUMBER

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		2021/1					
B Owner	rate	Tructions: Give the full legal name of the owner of the cable system. If the owner is a title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busine <i>If there were different owners during the accounting period, only the owner ingle statement of account and royalty fee payment covering the entire account</i> Check here if this is the system's first filing. If not, enter the system's ID	ess of the cable system for on the last day of the counting period.	n. e accounting period should su		1786	
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM HOOD CANAL TELEPHONE CO. INC.					
					1786	62021/1	
					1786	2021/1	
		PO BOX 249 UNION, WA 98592					
С		TRUCTIONS: In line 1, give any business or trade names used to innes already appear in space B. In line 2, give the mailing address o					
System	1	IDENTIFICATION OF CABLE SYSTEM:					
		MAILING ADDRESS OF CABLE SYSTEM:					
	2	(Number, street, rural route, apartment, or suite number) (City, town, state, zip code)					
D	Ins	tructions: For complete space D instructions, see page 1b. Identify	/ only the frst comm	unity served below and reli	st on page	1b	
Area Served	wit	n all communities.					
First		CITY OR TOWN UNION	STATE WA				
Community		elow is a sample for reporting communities if you report multiple ch		200 G			
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	GRP#	
Sample	Ald		MD	A		1	
Sample	Alliance MD B						
	Gei	ing	MD	В		3	
form in order to pro numbers. By provid search reports prep	cess y ling Pl pared t	tion 111 of title 17 of the United States Code authorizes the Copyright Offce to collec vour statement of account. PII is any personal information that can be used to identify I, you are agreeing to the routine use of it to establish and maintain a public record, w or the public. The effect of not providing the PII requested is that it may delay proces ments of account, and it may affect the legal suffciency of the fling, a determination t	or trace an individual, su which includes appearing using of your statement of	ich as name, address and telepho in the Offce's public indexes and i account and its placement in the	ne n		

D

Area

Served

SYSTEM ID#

SUB GRP#

1786

FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: HOOD CANAL TELEPHONE CO. INC. 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 identifcation 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. CH LINE UP CITY OR TOWN STATE 14/4

ONION	NVA		FIISL
			Community
			See instructions for
			additional information
			 on alphabetization.
			 Add rows as passage
			Add rows as necessary.

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, -	·	·,		

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Name													Ŭ		4700
	HOOD CANAL TELEPHO	ONE CO. INC.													1786
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in sp system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the nu- separately for the particular servi Rate: Give the standard rate of unit in which it is generally billed. category, but do not include disco Block 1: In the left-hand block systems most commonly provide that applies to your system. Note categories, that person or entity subscriber who pays extra for ca- first set" and would be counted of Block 2: If your cable system for printed in block 1 (for example, ti- with the number of subscribers a	pace E should co on of television ar vay cable) in space (June 30 or Dec blocks in space y transmission se umber of billings ice at the rate inc harged for each (Example: "\$20/ ounts allowed for in space E, the f to their subscrib be: Where an indivision should be counter ble service to ad- once again under has rate categorid iers of services th	over al nd rad ce F, n cembe E call ervice. in that dicated catego /mth"). r adva form lis oers. G vidual ed as a ditiona - "Serv es for hat inc	Il categories of iio broadcasts not here. All the r 31, as the ca l for the number of general, yo t category (the d—not the num ory of service. . Summarize a nice payment. sts the categor Give the number or organization a subscriber in al sets would b rice to addition secondary trans-	fs b e as e n ln an rie e n b e la l n s o la l n s	econdary y your sys facts you s e may be) of subscr can comp umber of ser of sets clude bottl y standarc es of seco of subscri is receivin ach applie included set(s)."	tem to su state must ibers to t persons receivin in the am drate var ndary tra ibers and g service cable cat in the co ervice th ary trans	Ibscrib st be t he cab or org g serv ount o iations I rate f e that f regory unt un at are missic	oper hose ople of an frice of the s w solutions fall . E: ode dif	s. Give in se existin system, if subscri- izations e). ne chargo vithin a p on service each list s under xample: r "Servic fferent fro	nform ng on broke bbers i charg e and articu e that ted ca differe a resi e to th com the m, to	ation the en in ed the lar rate cable tegory ent dentia he ose gether	/ 		
	sufficient.				F										
	BLC	DCK 1								BLOC			_		
	CATEGORY OF SERVICE	NO. OF SUBSCRIBER	25	RATE		CATE	GORY)E SEI	R\/	ICE		NO. O BSCRIE		R	ATE
	Residential:	GODGORIDER	10		H	UAIL				IOL	001			10	11
	Service to first set	3.0	048	\$ 99.95		RV Unit 2							242	\$	5.00
	Service to additional set(s)		<u> </u>	<i>v coloc</i>											
	• FM radio (if separate rate)														
	Motel, hotel														
	Commercial														
	Converter														
	• Residential														
	 Non-residential 														
F Services Other Than Secondary Transmissions: Rates	Services Services of a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.														
		BLOC	K 1					Ī				BLO	CK 2		
	CATEGORY OF SERVICE			GORY OF SER	٢V	ICE	RAT	E	(CATEGO	RY C	-	-	R	ATE
	Continuing Services:	Ir	nstalla	ation: Non-res	sic	lential									
	• Pay cable		• Mot	tel, hotel											
	 Pay cable—add'l channel 			nmercial]							
	 Fire protection 			/ cable											
	 Burglar protection 	ļ	-	/ cable-add'l cl	ha	innel									
	Installation: Residential			e protection											
	• First set		• Bur	glar protection	۱										
	 Additional set(s) 	0	Other s	services:											
	• FM radio (if separate rate)		• Rec	connect											
	• Converter		• Dise	connect											
			• Out	let relocation											
	Move to new address														

FORM SA3E. PAGE 2. SYSTEM ID#

Name

G

Primary Transmitters:

Television

			ACCOL	JNTII
FORM SA3E. PAGE 3.				
LEGAL NAME OF OWNER OF CABLE S	YSTEM:		SYSTEM I	
HOOD CANAL TELEPHON	E CO. INC.		17	86
PRIMARY TRANSMITTERS: TELEVISI	N			
In General: In space G, identify ever carried by your cable system during FCC rules and regulations in effect of 76.59(d)(2) and (4), 76.61(e)(2) and substitute program basis, as explain Substitute Basis Stations: With basis under specifc FCC rules, regul • Do not list the station here in space station was carried only on a subs • List the station here, and also in sp basis. For further information con in the paper SA3 form. Column 1: List each station's cal each multicast stream associated wi cast stream as "WETA-2". Simulcast WETA-simulcast). Column 2: Give the channel num its community of license. For exampl on which your cable system carried to Column 3: Indicate in each case educational station, by entering the I (for independent multicast), "E" (for r For the meaning of these terms, see Column 4: If the station is outside planation of local service area, see p Column 5: If you have entered "Y cable system carried the distant stati carried the distant station on a part-t	y television station (including t the accounting period, except (on June 24, 1981, permitting the (4), or 76.63 (referring to 76.61) ed in the next paragraph. respect to any distant stations ations, or authorizations: e G—but do list it in space I (the stitute basis. ace I, if the station was carried cerning substitute basis station I sign. Do not report origination th a station according to its over a streams must be reported in or aber the FCC has assigned to t e, WRC is Channel 4 in Wash he station. whether the station is a networe etter "N" (for network), "N-M" (for noncommercial educational), or page (v) of the general instruction at he local service area, (i.e. "do age (v) of the general instruction on during the accounting period ime basis because of lack of an the multicast stream that is not si on or before June 30, 2009, before so enter "E". If you carried the or an or before stream that is not si	(1) stations carried e carriage of certa (e)(2) and (4))]; ar carried by your ca e Special Stateme both on a substitu s, see page (v) of program services er-the-air designati column 1 (list each he television static ington, D.C. This r k station, an indep or network multica "E-M" (for noncor tions located in the splete column 5, st d. Indicate by ente ctivated channel ca ubject to a royalty ween a cable systs enting the primary channel on any oth	only on a part-time basis under in network programs [sections ad (2) certain stations carried on a ble system on a substitute program int and Program Log)—if the the basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial st), "I" (for independent), "I-M" nmercial educational multicast). e paper SA3 form. "." If not, enter "No". For an ex- paper SA3 form. tating the basis on which your sring "LAC" if your cable system apacity. payment because it is the subject em or an association representing a transmitter, enter the designa- er basis, enter "O." For a further	
FCC. For Mexican or Canadian station			to which the station is licensed by the	
Note: If you are utilizing multiple cha				
	CHANNEL LINE-UP	AA		
1 CALL 2 B'CAST	3 TYPE 4 DISTANT?	5 BASIS OF	6 LOCATION OF STATION	

	CHANNEL 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				
комо	30	N	No		Seattle, WA				
KOMO-2	30	N-M	No		Seattle, WA				
KOMO-3	30	N-M	No		Seattle, WA	additional information			
KING	25	N	No		Seattle, WA	on alphabetization.			
KING-2	25	N-M	No		Seattle, WA				
KING-3	25	N-M	No		Seattle, WA				
KIRO	23	N	No		Seattle, WA				
KIRO-2	23	N-M	No		Seattle, WA				
KIRO-3	23	N-M	No		Seattle, WA				
кстѕ	9	E	No		Seattle, WA				
КСТЅ-З	9	E	No		Seattle, WA				
KZJO	36	I	No		Seattle, WA				
KZJO-3	36	I	No		Seattle, WA				
кѕтѡ	11	I	No		Seattle, WA				
KCPQ	13	N	No		Seattle, WA				
KCPQ-2	13	N-M	No		Seattle, WA				
KCPQ-3	13	N-M	No		Seattle, WA				
KONG	31	N	No		Seattle, WA				

FORM SA3E. PAGE 3.					OVOTEMID	4
LEGAL NAME OF OW					SYSTEM ID	Name
HOOD CANAL	TELEPHON	E CO. INC.			1780	ő
PRIMARY TRANSMIT	ERS: TELEVISIO	N				
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba- basis under specifc F Do not list the static station was carrier basis. For further in the paper SA3 t Column 1: List ea each multicast strear cast stream as "WET WETA-simulcast). Column 2: Give th ts community of licer on which your cable s Column 3: Indica educational station, b for independent mul- For the meaning of th Column 4: If the so column 5: If you	G, identify every system during the ations in effect or 76.61(e)(2) and (4 asis, as explaine Stations: With r FCC rules, regular on here in space d only on a subsi- a, and also in space d only on a subsi- a, and also in space d only on a subsi- the station's call m associated with A-2". Simulcast the channel numb rese. For example system carried the te in each case w by entering the leat ticast), "E" (for no esse terms, see p station is outside vice area, see pa have entered "Ye the distant station"	y television state the accounting on June 24, 198 4), or 76.63 (m d in the next p respect to any ations, or auth G—but do list titute basis. ace I, if the state titute basis. ace I, if the state erning substit sign. Do not r th a station acc streams must ber the FCC h as station. whether the station. whether the station. whether the station concommercial page (v) of the the local serve age (v) of the ses" in column on during the a	period, except i 31, permitting th eferring to 76.61 baragraph. distant stations orizations: t it in space I (the tion was carried ute basis station eport origination cording to its ow be reported in or as assigned to t annel 4 in Wash ation is a netwo etwork), "N-M" (f educational), o e general instructi 4, you must con accounting period	(1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your c e Special Stateme I both on a substit ns, see page (v) o n program service er-the-air designa column 1 (list each che television stati ington, D.C. This rk station, an inde for network multica r "E-M" (for nonco titons located in the instant"), enter "Ye ons located in the nplete column 5, so	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	G Primary Transmitters Television
For the retransmis of a written agreemen the cable system and tion "E" (exempt). For explanation of these Column 6: Give th	ssion of a distant nt entered into or I a primary transi r simulcasts, also three categories he location of ea	multicast stren n or before Ju mitter or an as o enter "E". If <u>y</u> , see page (v) ch station. Fo	eam that is not s ne 30, 2009, be ssociation repres you carried the o of the general i r U.S. stations, l	ubject to a royalty tween a cable sys senting the primar channel on any ot nstructions locate list the community	payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. t owhich the station is licensed by the	
FCC. For Mexican or Note: If you are utiliz		nnel line-ups,		space G for each	which the station is identifed. channel line-up.	_
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	-
ктвw	21	Е	No		Seattle, WA	
КВТС	27	E	No		Seattle, WA	
		<u>с</u>				
KWPX	33		No		Seattle, WA	
KUNS	30	N	No		Seattle, WA	

FORM SA3E. PAGE 3.					SYSTEM ID#	
LEGAL NAME OF OWN					1786	Name
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA- WETA-simulcast). Column 2: Give the	G, identify every system during the ions in effect or 6.61(e)(2) and (e sis, as explaine Stations: With n CC rules, regular of the in space only on a substant and also in space formation concern. The station's call associated with the station's call associated with the station is call associated with the station is	v television sta ne accounting n June 24, 194 4), or 76.63 (r d in the next p respect to any titions, or auth G—but do list titute basis. Ince I, if the sta erning substit sign. Do not r n a station acc streams must ber the FCC h e, WRC is Cha	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: t it in space I (the tition was carried ute basis station report origination cording to its over be reported in c as assigned to t	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your ca e Special Stateme I both on a substitut ns, see page (v) of a program services er-the-air designat column 1 (list each he television station	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other i the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multion For the meaning of the Column 4: If the st planation of local serving Column 5: If you have cable system carried the carried the distant state For the retransmiss of a written agreement the cable system and the cable system and the system the cable system and the system and the system and the system the cable system and the system	rentering the le cast), "E" (for no ese terms, see p ation is outside ce area, see p ave entered "Ye he distant static ion on a part-tir ion of a distant entered into or a primary transp simulcasts, also aree categories e location of ea Canadian statio	tter "N" (for ne concommercial bage (v) of the the local serv age (v) of the ss" in column on during the a multicast streen or before Ju mitter or an as o enter "E". If see page (v) ch station. Fo ns, if any, give	etwork), "N-M" (fi l educational), or e general instruct vice area, (i.e. "d general instructi 4, you must com accounting perior ause of lack of as ne 30, 2009, bet ssociation repres you carried the co of the general in r U.S. stations, I e the name of th	or network multica r "E-M" (for noncol tions located in the listant"), enter "Ye ons located in the nplete column 5, s od. Indicate by ente ctivated channel c ubject to a royalty tween a cable sys senting the primar channel on any oth nstructions located ist the community e community with	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AC		
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	
		<u> </u>				

	NER OF CABLE SY	STEM:			SYSTEM ID#				
HOOD CANAL	TELEPHON	E CO. INC.			1786	Name			
PRIMARY TRANSMITT	ERS: TELEVISIO	N							
carried by your cable	system during th	ne accounting	period, except ((1) stations carried	and low power television stations) d only on a part-time basis under	G			
76.59(d)(2) and (4), 76	6.61(e)(2) and (4	4), or 76.63 (r	eferring to 76.61	•	in network programs [sections nd (2) certain stations carried on a	Primary Transmitters:			
substitute program ba Substitute Basis \$				carried by your ca	able system on a substitute program	Television			
basis under specifc F				o o					
 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 									
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located									
in the paper SA3 for Column 1: List eac		sian Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify				
		-			ion. For example, report multi-				
	A-2". Simulcast	streams must	be reported in c	column 1 (list each	a stream separately; for example				
WETA-simulcast). Column 2: Give th	e channel numb	per the FCC h	as assigned to t	he television station	on for broadcasting over-the-air in				
its community of licen	se. For example	e, WRC is Cha	-		may be different from the channel				
on which your cable s Column 3: Indicate	•		ation is a netwo	rk station an inde	pendent station, or a noncommercial				
educational station, by	y entering the le	tter "N" (for ne	etwork), "N-M" (f	or network multica	ast), "I" (for independent), "I-M"				
`	<i>,,</i> (<i>,</i> ,	(mmercial educational multicast).				
For the meaning of the Column 4: If the st		• • •	0		e paper SA3 form. s". If not, enter "No". For an ex-				
planation of local serv	ice area, see pa	age (v) of the	general instructi	ons located in the	paper SA3 form.				
-			-	-	tating the basis on which your				
carried the distant stat		-	• •	-	ering "LAC" if your cable system apacity.				
For the retransmiss	sion of a distant	multicast stre	am that is not s	ubject to a royalty	payment because it is the subject				
-				•	tem or an association representing y transmitter, enter the designa-				
				U .	her basis, enter "O." For a further				
					d in the paper SA3 form.				
					to which the station is licensed by the which the station is identifed.				
Note: If you are utilizin				-					
	-	CHANN	EL LINE-UP	AD					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE					
	NUMBER	STATION							
				(If Distant)					
						·			

LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#				
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name			
PRIMARY TRANSMITT	ERS: TELEVISIO	N							
carried by your cable s	system during th	ne accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G			
v	6.61(e)(2) and (4	4), or 76.63 (r	eferring to 76.61	•	ain network programs [sections nd (2) certain stations carried on a	Primary Transmitters:			
				carried by your ca	able system on a substitute program	Television			
basis under specifc F0									
 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. 									
• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other									
basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.									
		-			s such as HBO, ESPN, etc. Identify tion. For example, report multi-				
			•	J. J	n stream separately; for example				
WETA-simulcast).		or the ECC h	an annianad ta t	ha talaviaian atati	on for broadcasting over the air in				
			-		on for broadcasting over-the-air in may be different from the channel				
on which your cable s	•		otion in a natura	-	nondont station, or a noncommercial				
					pendent station, or a noncommercial ast), "I" (for independent), "I-M"				
· ·			· · ·	•	mmercial educational multicast).				
For the meaning of the Column 4: If the st		U ()	•		ie paper SA3 form. s". If not, enter "No". For an ex-				
planation of local serv	ice area, see pa	age (v) of the	general instructi	ons located in the	paper SA3 form.				
-			-	-	tating the basis on which your ering "LAC" if your cable system				
carried the distant stat		-	• •	-					
					payment because it is the subject				
-				-	tem or an association representing y transmitter, enter the designa-				
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the o	channel on any oth	ner basis, enter "O." For a further				
					d in the paper SA3 form. to which the station is licensed by the				
					which the station is identified.				
Note: If you are utilizin	ng multiple char	nnel line-ups,	use a separate s	space G for each	channel line-up.				
	1	CHANN	EL LINE-UP	AE					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE					
	NUMBER	STATION		(If Distant)		-			
		Ι							
		 							
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#				
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name			
PRIMARY TRANSMITTE	ERS: TELEVISIO	N							
In General: In space (carried by your cable s	G, identify every system during th	/ television sta	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G			
•			· · ·	•	ain network programs [sections nd (2) certain stations carried on a	Primary			
substitute program bas						Transmitters:			
basis under specifc F				carried by your c	able system on a substitute program	Television			
				e Special Stateme	ent and Program Log)—if the				
station was carried only on a substitute basis.									
 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. 									
		sign. Do not r	eport origination	n program service	s such as HBO, ESPN, etc. Identify				
			Ũ	•	tion. For example, report multi-				
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example				
,	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in				
,		,	annel 4 in Wash	ington, D.C. This	may be different from the channel				
	e in each case v	vhether the st			pendent station, or a noncommercial				
	•	•	,. · · · ·		ast), "I" (for independent), "I-M" mmercial educational multicast).				
For the meaning of the			· · ·		,				
				,	s". If not, enter "No". For an ex-				
planation of local serv					paper SA3 form. stating the basis on which your				
			•	-	ering "LAC" if your cable system				
carried the distant stat	•								
					payment because it is the subject tem or an association representing				
-				-	y transmitter, enter the designa-				
· · · /					her basis, enter "O." For a further				
					d in the paper SA3 form. to which the station is licensed by the				
				-	which the station is identifed.				
Note: If you are utilizir	ng multiple char	nnel line-ups,	use a separate s	space G for each	channel line-up.	+			
		CHANN	EL LINE-UP	AF		+			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)					
	NUIVIDER	STATION		(II Distant)		ł			
		<u> </u>			+				
		 							
				l					

1	IER OF CABLE SY	STEM:			SYSTEM ID#			
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	system during th	ne accounting	period, except ((1) stations carried	and low power television stations) d only on a part-time basis under	G		
76.59(d)(2) and (4), 76	6.61(e)(2) and (4	4), or 76.63 (r	eferring to 76.61	•	in network programs [sections nd (2) certain stations carried on a	Primary Transmitters:		
substitute program bas Substitute Basis S				carried by your ca	able system on a substitute program	Television		
basis under specifc FC				o o				
 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 spa	ice I, if the sta			ute basis and also on some other the general instructions located			
in the paper SA3 fo Column 1: List eac		sian Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify			
		-	•		ion. For example, report multi-			
	-2". Simulcast	streams must	be reported in c	column 1 (list each	a stream separately; for example			
WETA-simulcast). Column 2: Give the	e channel numb	per the FCC h	as assigned to t	he television station	on for broadcasting over-the-air in			
-			annel 4 in Wash	ington, D.C. This i	may be different from the channel			
	in each case v	vhether the st			pendent station, or a noncommercial			
	•	•	,. (ast), "I" (for independent), "I-M" mmercial educational multicast).			
For the meaning of the	, · · · ·		, ·		,			
			•		s". If not, enter "No". For an ex-			
planation of local servi Column 5: If you ha					tating the basis on which your			
-		-	÷ .	-	ering "LAC" if your cable system			
carried the distant stati	•				apacity. payment because it is the subject			
					tem or an association representing			
				U .	y transmitter, enter the designa- ner basis, enter "O." For a further			
· · · /			•		d in the paper SA3 form.			
					to which the station is licensed by the			
Note: If you are utilizin				-	which the station is identifed. channel line-up.			
		CHANN	EL LINE-UP	AG				
1. CALL	2. B'CAST			AU				
SIGN		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	•		
	CHANNEL	OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
	CHANNEL NUMBER		(Yes or No)	5. BASIS OF	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-		
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - - -		
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			

LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	
HOOD CANAL	TELEPHONE	E CO. INC.			1786	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space (G, identify every	/ television sta	ation (including t	ranslator stations	and low power television stations)	•
	, ,	•		· ·	d only on a part-time basis under	G
•				•	ain network programs [sections nd (2) certain stations carried on a	Primary
substitute program bas	sis, as explaine	d in the next p	paragraph.			Transmitters:
Substitute Basis S basis under specifc FC		-		carried by your ca	able system on a substitute program	Television
				e Special Stateme	ent and Program Log)—if the	
station was carried	only on a subst	titute basis.				
	nformation conc				ute basis and also on some other f the general instructions located	
		sign. Do not r	eport originatior	n program services	s such as HBO, ESPN, etc. Identify	
			J. J	•	tion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example	
,	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in	
-			annel 4 in Wash	ington, D.C. This	may be different from the channel	
on which your cable sy Column 3: Indicate	,		ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
· ·	· · · · ·		· · ·	•	mmercial educational multicast).	
For the meaning of the Column 4: If the st		• • •	•		s". If not, enter "No". For an ex-	
planation of local servi						
-			-	-	stating the basis on which your ering "LAC" if your cable system	
carried the distant stat		-		-		
					payment because it is the subject	
-				•	tem or an association representing y transmitter, enter the designa-	
•				• .	her basis, enter "O." For a further	
explanation of these the	nree categories,	, see page (v)	of the general i	nstructions locate	d in the paper SA3 form. / to which the station is licensed by the	
					which the station is identified.	
Note: If you are utilizin	ng multiple char	nnel line-ups,	use a separate s	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AH		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		-
					1	
		<u> </u>			<u>+</u>	
		<u> </u>			+	
					1	

FORM SA3E. PAGE 3.		OTEM			SYSTEM ID#	
LEGAL NAME OF OWN					1786	Name
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA- WETA-simulcast). Column 2: Give the	G, identify every system during the ions in effect or 6.61(e)(2) and (e sis, as explaine Stations: With r CC rules, regular of here in space only on a substant and also in space formation concern. The station's call associated with A-2". Simulcast e channel number se. For example	v television sta ne accounting n June 24, 199 4), or 76.63 (r d in the next j respect to any attions, or auth G—but do liss titute basis. Ince I, if the sta erning substit sign. Do not r n a station acc streams must ber the FCC h e, WRC is Cha	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: t it in space I (the tition was carried ute basis station report origination cording to its over be reported in c as assigned to t	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your ca e Special Stateme I both on a substitut ns, see page (v) of a program services er-the-air designat column 1 (list each he television station	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multion For the meaning of the Column 4: If the st planation of local serving Column 5: If you have cable system carried the carried the distant state For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the	r entering the le cast), "E" (for no ese terms, see p ation is outside ice area, see p ave entered "Ye he distant static ion on a part-tir sion of a distant a primary transp simulcasts, also nee categories e location of ea Canadian statio	tter "N" (for ne concommercial bage (v) of the the local serv age (v) of the service of the service of the service of the on during the multicast street or before Ju mitter or an as openter "E". If see page (v) ch station. Fo ns, if any, give	etwork), "N-M" (fi l educational), or e general instruct vice area, (i.e. "d general instructi 4, you must com accounting perior ause of lack of as ne 30, 2009, bet ssociation repres you carried the co of the general in r U.S. stations, I e the name of th	or network multica r "E-M" (for noncol tions located in the listant"), enter "Ye ons located in the nplete column 5, s od. Indicate by ente ctivated channel c ubject to a royalty tween a cable sys senting the primar channel on any oth nstructions located ist the community e community with	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AI		
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	

FORM SA3E. PAGE 3.		OTEM			SYSTEM ID#	
LEGAL NAME OF OWN					1786	Name
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis 5 basis under specifc F(• Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List ear each multicast stream cast stream as "WET/ WETA-simulcast).	G, identify every system during th tions in effect or 5.61(e)(2) and (sis, as explaine Stations: With 1 CC rules, regula n here in space only on a subs and also in spa formation conc orm. ch station's call associated with A-2". Simulcast	y television sta ne accounting n June 24, 194 4), or 76.63 (r d in the next p respect to any ations, or auth G—but do list titute basis. ace I, if the sta serning substit sign. Do not r n a station acc streams must	period, except (81, permitting the eferring to 76.61 baragraph. distant stations orizations: t it in space I (the ation was carried ute basis station report origination cording to its over be reported in c	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your ca e Special Stateme I both on a substitut hs, see page (v) of a program services er-the-air designat column 1 (list each	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located a such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television
on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the si planation of local serv Column 5: If you h cable system carried the carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	ystem carried the e in each case way of entering the lecast), "E" (for me ese terms, see p tation is outside ice area, see p ave entered "Yo the distant station ton on a part-tin sion of a distant t entered into on a primary transi simulcasts, also hree categories e location of ea Canadian statio	he station. whether the st titer "N" (for ne concommercial page (v) of the the local serv- age (v) of the concourse age (ation is a networ etwork), "N-M" (fi e ducational), or e general instruct vice area, (i.e. "d general instructi 4, you must com accounting perio ause of lack of ar- eam that is not si ne 30, 2009, bet ssociation represe you carried the co- of the general in r U.S. stations, I e the name of th	rk station, an inder or network multica r "E-M" (for noncon- tions located in the listant"), enter "Ye- ons located in the splete column 5, s od. Indicate by enter ctivated channel or ubject to a royalty tween a cable sys- senting the primar channel on any oth nstructions located ist the community e community with	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AJ		
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	
		+			<u>+</u>	
		+			<u>+</u>	
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#			
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	system during th	ne accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G		
76.59(d)(2) and (4), 76	6.61(e)(2) and (4	4), or 76.63 (r	eferring to 76.61	•	ain network programs [sections nd (2) certain stations carried on a	Primary Transmitters:		
substitute program bas Substitute Basis S				carried by your ca	able system on a substitute program	Television		
basis under specifc FC								
 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 spa	ace I, if the sta			ute basis and also on some other f the general instructions located			
in the paper SA3 fo Column 1: List eac		sian Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify			
		-	• •		tion. For example, report multi-			
	-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example			
WETA-simulcast). Column 2: Give the	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in			
-			annel 4 in Wash	ington, D.C. This	may be different from the channel			
	e in each case v	whether the st			pendent station, or a noncommercial			
	•		,. · · · ·		ast), "I" (for independent), "I-M" mmercial educational multicast).			
For the meaning of the			· · ·	•	,			
			•	,	s". If not, enter "No". For an ex-			
planation of local servi Column 5: If you ha					tating the basis on which your			
-		-	÷ ·	-	ering "LAC" if your cable system			
carried the distant stat	•				capacity. payment because it is the subject			
					tem or an association representing			
•				.	y transmitter, enter the designa-			
· · · /			•	•	ner basis, enter "O." For a further d in the paper SA3 form.			
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations, I	list the community	to which the station is licensed by the			
FCC. For Mexican or C Note: If you are utilizin				•	which the station is identifed. channel line-up.			
		CHANN	EL LINE-UP	AK				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE				
	NUMBER	STATION		(If Distant)				
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HOOD CANAL	NER OF CABLE SY	STEM:			SYSTEM ID#				
11000 CANAL	TELEPHONE	E CO. INC.			1786	Name			
PRIMARY TRANSMITT	ERS: TELEVISIO	N							
					and low power television stations) I only on a part-time basis under	G			
•				•	in network programs [sections nd (2) certain stations carried on a	Primary			
substitute program ba	asis, as explaine	d in the next p	paragraph.			Transmitters:			
		-		carried by your ca	able system on a substitute program	Television			
	pasis 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	-		tion was corriad	both on a substit	ute basis and also an same other				
	nformation conc				ute basis and also on some other f the general instructions located				
		-			s such as HBO, ESPN, etc. Identify				
			J. J	•	ion. For example, report multi- n stream separately; for example				
WETA-simulcast).			·	,					
			-		on for broadcasting over-the-air in may be different from the channel				
on which your cable s					may be different from the channel				
					pendent station, or a noncommercial				
	, ,	•	<i>.</i>		ast), "I" (for independent), "I-M" mmercial educational multicast).				
For the meaning of th	iese terms, see p	bage (v) of the	e general instruc	tions located in th	e paper SA3 form.				
Column 4: If the s				,.	s". If not, enter "No". For an ex-				
					tating the basis on which your				
-		-	• ·	-	ering "LAC" if your cable system				
carried the distant sta For the retransmis	•				apacity. payment because it is the subject				
of a written agreemen	nt entered into or	n or before Ju	ne 30, 2009, bei	tween a cable sys	tem or an association representing				
				• .	y transmitter, enter the designa- ner basis, enter "O." For a further				
explanation of these t	three categories,	, see page (v)	of the general i	nstructions locate	d in the paper SA3 form.				
					to which the station is licensed by the				
Note: If you are utilizi				•	which the station is identifed. channel line-up.				
	-	CHANN	EL LINE-UP						
1. CALL	2. B'CAST	3. TYPE		AL					
SIGN	CHANNEL	J. TIFL	4. DISTANT?	AL 5. BASIS OF	6. LOCATION OF STATION				
		OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-			
	NUMBER			5. BASIS OF	6. LOCATION OF STATION	-			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - -			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - - -			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - -			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - -			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· ·			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· · ·			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· · ·			
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF		5. BASIS OF CARRIAGE	6. LOCATION OF STATION				

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#			
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space C carried by your cable s	G, identify every system during th	/ television sta ne accounting	period, except ((1) stations carried	and low power television stations) d only on a part-time basis under	G		
76.59(d)(2) and (4), 76	6.61(e)(2) and (4	4), or 76.63 (r	eferring to 76.61	•	ain network programs [sections nd (2) certain stations carried on a	Primary		
substitute program bas Substitute Basis S				carried by your ca	able system on a substitute program	Transmitters: Television		
basis under specifc FC				Sumou by your of		Television		
• 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								
basis. For further in	formation conc				ute basis and also on some other f the general instructions located			
in the paper SA3 fo Column 1: List eac		sian. Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify			
		-	•		tion. For example, report multi-			
	-2". Simulcast	streams must	be reported in c	column 1 (list each	n stream separately; for example			
WETA-simulcast).	e channel num	per the ECC h	as assigned to t	he television stati	on for broadcasting over-the-air in			
			-		may be different from the channel			
on which your cable sy				5, -	,			
					pendent station, or a noncommercial			
	•		,. (ast), "I" (for independent), "I-M" mmercial educational multicast).			
For the meaning of the	, · · · ·		, ·	•	,			
Column 4: If the sta	ation is outside	the local serv	/ice area, (i.e. "d	listant"), enter "Ye	s". If not, enter "No". For an ex-			
planation of local servi								
-			•	-	tating the basis on which your ering "LAC" if your cable system			
carried the distant stat		-	÷ .	-				
					payment because it is the subject			
-				-	tem or an association representing			
•				U 1	y transmitter, enter the designa- ner basis, enter "O." For a further			
· · · /			•	•	d in the paper SA3 form.			
					to which the station is licensed by the			
				•	which the station is identifed.			
Note: If you are utilizin	ig multiple char	• •	•	•	channel line-up.			
			EL LINE-UP					
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
SIGN	NUMBER	STATION	` '	(If Distant)				
	NOWBER	Onthon		(ii Distant)		ł		
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FORM SA3E. PAGE 3.		OTEM			SYSTEM ID#	
LEGAL NAME OF OWNE					1786	Name
In General: In space G, carried by your cable sy FCC rules and regulatio 76.59(d)(2) and (4), 76.6 substitute program basis Substitute Basis St basis under specifc FCC • Do not list the station f station was carried o • List the station here, a basis. For further info in the paper SA3 forr Column 1: List each each multicast stream a cast stream as "WETA- WETA-simulcast). Column 2: Give the	identify every stem during the ns in effect on 61(e)(2) and (2 s, as explained ations: With r C rules, regula here in space nly on a subst nd also in spa ormation concern. station's call ssociated with 2". Simulcast st channel numb	television sta e accounting June 24, 199 J, or 76.63 (r d in the next p espect to any tions, or auth G—but do list itute basis. ce I, if the sta erning substit sign. Do not r a station acc streams must wer the FCC h	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: t it in space I (the tition was carried ute basis station report origination cording to its over be reported in c as assigned to t	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your ca e Special Stateme I both on a substitut ns, see page (v) of a program services er-the-air designat column 1 (list each he television station	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located a such as HBO, ESPN, etc. Identify ion. For example, report multi- a stream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television
on which your cable sys Column 3: Indicate i educational station, by ed (for independent multica For the meaning of thes Column 4: If the stat planation of local service Column 5: If you have cable system carried the carried the distant station For the retransmission of a written agreement of the cable system and a tion "E" (exempt). For si explanation of these thre Column 6: Give the	tem carried th n each case we entering the let ast), "E" (for no e terms, see p tion is outside e area, see pa we entered "Ye e distant statio on on a part-tin on of a distant entered into or primary transr mulcasts, also ee categories, location of ead anadian station	e station. whether the st tter "N" (for ne page (v) of the the local serv- age (v) of the es" in column in during the a- me basis beca- multicast stre- or before Ju- mitter or an as- penter "E". If see page (v) ch station. Fo- ns, if any, give	ation is a networ etwork), "N-M" (fi e ducational), or e general instruct vice area, (i.e. "d general instructi 4, you must com accounting perio ause of lack of ar- eam that is not s ne 30, 2009, bel ssociation represe you carried the co- of the general in r U.S. stations, I e the name of th	rk station, an inder or network multica r "E-M" (for noncon- tions located in the listant"), enter "Ye- ons located in the splete column 5, s od. Indicate by enter ctivated channel or ubject to a royalty tween a cable sys- senting the primar channel on any oth instructions located ist the community e community with	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AN		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	NER OF CABLE SY	'STEM:			SYSTEM ID#	
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space (G, identify every	/ television sta	· ·		and low power television stations) d only on a part-time basis under	G
•				•	ain network programs [sections nd (2) certain stations carried on a	Primary
substitute program ba						Transmitters:
basis under specifc F				carried by your c	able system on a substitute program	Television
				e Special Stateme	ent and Program Log)—if the	
station was carried			4			
	nformation conc				ute basis and also on some other f the general instructions located	
		sign. Do not r	eport originatior	n program service	s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi-	
Cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example	
,	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in	
,		,	annel 4 in Wash	ington, D.C. This	may be different from the channel	
	e in each case v	whether the st			pendent station, or a noncommercial	
	U U				ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the	<i>.</i>		<i>,</i> .	•	,	
				,	s". If not, enter "No". For an ex-	
planation of local serv					paper SA3 form. stating the basis on which your	
			-	-	ering "LAC" if your cable system	
carried the distant stat	•					
					payment because it is the subject tem or an association representing	
-				-	y transmitter, enter the designa-	
· · · /					her basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
				-	which the station is identifed.	
Note: If you are utilizir	ng multiple char	• •	•	•	channel line-up.	
		CHANN	EL LINE-UP	AO		+
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NUMBER	STATION				ł
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LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s	G, identify every system during th	/ television sta ne accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G
76.59(d)(2) and (4), 76	6.61(e)(2) and (4	4), or 76.63 (r	eferring to 76.61	•	ain network programs [sections nd (2) certain stations carried on a	Primary
substitute program bas				corried by your o	able quatem on a substitute program	Transmitters:
basis under specifc FC				carried by your ca	able system on a substitute program	Television
				e Special Stateme	ent and Program Log)—if the	
station was carried	only on a subs	titute basis.				
basis. For further in	formation conc				ute basis and also on some other f the general instructions located	
in the paper SA3 fo Column 1: List eac		sign. Do not r	eport originatior	n program services	s such as HBO, ESPN, etc. Identify	
		-	• •		tion. For example, report multi-	
	-2". Simulcast	streams must	be reported in o	column 1 (list each	n stream separately; for example	
WETA-simulcast). Column 2: Give the	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in	
			-		may be different from the channel	
on which your cable sy						
				,	pendent station, or a noncommercial	
	•		,. · · · ·		ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the			<i>,</i> .	``	,	
			•	,	s". If not, enter "No". For an ex-	
planation of local servi					e paper SA3 form. stating the basis on which your	
-			•	-	ering "LAC" if your cable system	
carried the distant stat		-	÷ ·	-		
					payment because it is the subject	
-				•	tem or an association representing	
				• .	y transmitter, enter the designa- her basis, enter "O." For a further	
· · /					d in the paper SA3 form.	
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations, I	list the community	to which the station is licensed by the	
				-	which the station is identifed.	
Note: If you are utilizin	ig multiple char	• •	•	•		+
			EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN	NUMBER	STATION	(Yes or No)	(If Distant)		
	NOWBER	UTATION				ł
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#				
HOOD CANAL	TELEPHONE	E CO. INC.			1786	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
In General: In space (G, identify every	television sta	, -		and low power television stations) d only on a part-time basis under	G			
		-		. ,	in network programs [sections	•			
		, .	-	(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary			
substitute program bas				corried by your or	able system on a substitute program	Transmitters:			
basis under specifc FC				camed by your ca	able system on a substitute program	Television			
	• 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									
	formation conc				ute basis and also on some other f the general instructions located				
		sign. Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify				
each multicast stream	associated with	n a station acc	cording to its ove	er-the-air designat	ion. For example, report multi-				
	-2". Simulcast	streams must	be reported in c	column 1 (list each	n stream separately; for example				
WETA-simulcast). Column 2: Give the	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in				
			-		may be different from the channel				
on which your cable sy									
					pendent station, or a noncommercial				
	•		,. (ast), "I" (for independent), "I-M" mmercial educational multicast).				
For the meaning of the			, ·	•	,				
			•		s". If not, enter "No". For an ex-				
planation of local servi					paper SA3 form. tating the basis on which your				
-			•	-	ering "LAC" if your cable system				
carried the distant stat		-	÷ .	-					
					payment because it is the subject				
-				-	tem or an association representing y transmitter, enter the designa-				
				U 1	her basis, enter "O." For a further				
explanation of these th	ree categories,	, see page (v)	of the general i	nstructions locate	d in the paper SA3 form.				
					to which the station is licensed by the				
FCC. For Mexican or (Note: If you are utilizin				•	which the station is identifed.				
Note. Il you are utilizit		• •	EL LINE-UP	•	channer inte-up.				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE					
	NUMBER	STATION		(If Distant)					
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LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#			
HOOD CANAL	TELEPHON	E CO. INC.			1786	Name		
PRIMARY TRANSMITT	ERS: TELEVISIO	N						
In General: In space	G, identify every	/ television sta	, -		and low power television stations) I only on a part-time basis under	G		
FCC rules and regulat	tions in effect or	n June 24, 198	81, permitting th	e carriage of certa	in network programs [sections			
76.59(d)(2) and (4), 76 substitute program ba		, ,	-	(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters:		
				carried by your ca	able system on a substitute program	Television		
basis under specifc F								
 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. 								
			tion was carried	l both on a substit	ute basis and also on some other			
		erning substit	ute basis statior	ns, see page (v) of	the general instructions located			
in the paper SA3 fo		sian Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify			
		-	•		ion. For example, report multi-			
	A-2". Simulcast	streams must	be reported in c	column 1 (list each	stream separately; for example			
WETA-simulcast). Column 2: Give th	e channel num	per the FCC h	as assigned to t	he television station	on for broadcasting over-the-air in			
			-		may be different from the channel			
on which your cable s			- 41 1 4					
					pendent station, or a noncommercial ast), "I" (for independent), "I-M"			
			,. (mmercial educational multicast).			
For the meaning of the		U ()	•					
planation of local serv			•		s". If not, enter "No". For an ex- paper SA3 form			
					tating the basis on which your			
-		-	÷ .	-	ering "LAC" if your cable system			
carried the distant stat	•				apacity. payment because it is the subject			
					tem or an association representing			
				U .	y transmitter, enter the designa-			
· · · /			•		ner basis, enter "O." For a further d in the paper SA3 form.			
					to which the station is licensed by the			
				-	which the station is identifed.			
Note: If you are utilizin	ng multiple char	nnel line-ups,	use a separate s	space G for each o	channel line-up.			
			EL LINE-UP					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)				
	NOMBER	onnion		(ii Distant)				
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FORM SA3E. PAGE 3.		OTEM			SYSTEM ID#	
LEGAL NAME OF OWN					1786	Name
carried by your cable s FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis 5 basis under specifc F(• Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List ear each multicast stream cast stream as "WET/ WETA-simulcast).	G, identify every system during the ions in effect or S.61(e)(2) and (c sis, as explaine Stations: With the CC rules, regular to here in space only on a subs and also in space on a subs and also in a subs a	y television sta ne accounting n June 24, 194 4), or 76.63 (r d in the next p respect to any ations, or auth G—but do list titute basis. ace I, if the sta serning substit sign. Do not r n a station acc streams must	period, except (81, permitting the eferring to 76.61 baragraph. distant stations orizations: t it in space I (the ation was carried ute basis station report origination cording to its over be reported in c	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your ca e Special Stateme I both on a substitut hs, see page (v) of a program services er-the-air designat column 1 (list each	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located a such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television
on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the si planation of local serv Column 5: If you h cable system carried the carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	ystem carried the e in each case we were entering the le- cast), "E" (for no esse terms, see le- ation is outside ice area, see per ave entered "Yd he distant statio ion on a part-tin sion of a distant is entered into or a primary transmissimulcasts, also nere categories e location of ea Canadian statio	he station. whether the st titer "N" (for ne concommercial page (v) of the the local serv- age (v) of the concourse age (ation is a networ etwork), "N-M" (fi e ducational), or e general instruct vice area, (i.e. "d general instructi 4, you must com accounting perior ause of lack of ar- eam that is not si ne 30, 2009, bet ssociation represe you carried the co- of the general in r U.S. stations, I e the name of th	rk station, an inder or network multica r "E-M" (for noncon- tions located in the listant"), enter "Ye- ons located in the splete column 5, s od. Indicate by enter ctivated channel or ubject to a royalty tween a cable sys- senting the primar channel on any oth nstructions located ist the community with	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space 0	G, identify every	/ television sta			and low power television stations)	G
		-		. ,	d only on a part-time basis under ain network programs [sections	U
v			· · ·	•	nd (2) certain stations carried on a	Primary
substitute program bas						Transmitters:
				carried by your ca	able system on a substitute program	Television
 basis under specifc FC Do not list the station 				e Special Stateme	ent and Program Log)—if the	
station was carried			in in opuce i (in	o opoolal olatoine		
 List the station here, 	and also in spa	ace I, if the sta			ute basis and also on some other f the general instructions located	
in the paper SA3 fo						
		-	• •		s such as HBO, ESPN, etc. Identify	
			Ũ	U U	tion. For example, report multi- n stream separately; for example	
WETA-simulcast).			·	Υ.		
			-		on for broadcasting over-the-air in	
on which your cable sy			annel 4 in Wash	ington, D.C. This	may be different from the channel	
			ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
	•		,. · · · ·		ast), "I" (for independent), "I-M"	
· ·			· · ·	•	mmercial educational multicast).	
For the meaning of the Column 4: If the st		U ()	•		s". If not, enter "No". For an ex-	
planation of local servi			•	,		
-			•	-	tating the basis on which your	
-		-	÷ ·	-	ering "LAC" if your cable system	
carried the distant stat					payment because it is the subject	
					tem or an association representing	
•				.	y transmitter, enter the designa-	
· · · /			•	•	ner basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
					which the station is identifed.	
Note: If you are utilizin	ig multiple char	nnel line-ups,	use a separate :	space G for each	channel line-up.	
	1	CHANN	EL LINE-UP	AT		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		1
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FORM SA3E. PAGE 3.		OTEM			SYSTEM ID#	
LEGAL NAME OF OWI					1786	Name
carried by your cable = FCC rules and regular 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis = basis under specific Fi • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List ear cast stream as "WETA- WETA-simulcast). Column 2: Give the	G, identify even system during th tions in effect or 5.61(e)(2) and (sis, as explaine Stations: With CC rules, regula n here in space only on a subs and also in space formation concor- orm. ch station's call associated with A-2". Simulcast e channel numl se. For example	y television sta ne accounting n June 24, 199 4), or 76.63 (r d in the next j respect to any ations, or auth G—but do liss titute basis. ace I, if the sta serning substit sign. Do not r h a station acc streams must ber the FCC h e, WRC is Cha	period, except (81, permitting th eferring to 76.61 paragraph. distant stations orizations: t it in space I (the ation was carried tute basis station report origination cording to its over t be reported in c mas assigned to t	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your ca e Special Stateme I both on a substitut ns, see page (v) of a program services er-the-air designat column 1 (list each he television station	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multi- a stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried to carried the distant stas For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	y entering the le cast), "E" (for m ese terms, see tation is outside ice area, see p have entered "Yu the distant static tion on a part-tii sion of a distant t entered into of a primary trans simulcasts, also hree categories e location of ea Canadian statio	tter "N" (for no concommercial page (v) of the the local servage (v) of the ser in column on during the a multicast streat or before Ju mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give	etwork), "N-M" (f I educational), or e general instruct vice area, (i.e. "d general instructi 4, you must com accounting peric ause of lack of a seam that is not s ne 30, 2009, bei ssociation repres you carried the o of the general ii r U.S. stations, I e the name of th	or network multica r "E-M" (for noncol tions located in the listant"), enter "Ye ons located in the nplete column 5, s od. Indicate by ente ctivated channel c ubject to a royalty tween a cable sys senting the primar channel on any oth nstructions located ist the community e community with	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AU		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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HOOD CANAL	IER OF CABLE SY	STEM:			SYSTEM ID#				
	TELEPHONI	E CO. INC.			1786	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
In General: In space (G, identify every	television sta			and low power television stations) I only on a part-time basis under	G			
		-		. ,	in network programs [sections	_			
		, .	-	l(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary			
substitute program bas Substitute Basis S				carried by your ca	able system on a substitute program	Transmitters: Television			
basis under specifc F0	CC rules, regula	ations, or auth	orizations:			TOTOTOTOT			
			t it in space I (the	e Special Stateme	ent and Program Log)—if the				
 station was carried List the station here. 			ation was carried	l both on a substit	ute basis and also on some other				
					the general instructions located				
in the paper SA3 fo		aign Da natr	onort origination	program convice	auch as HPO FSPN ata Identify				
		-			s such as HBO, ESPN, etc. Identify ion. For example, report multi-				
			Ũ	U U	stream separately; for example				
WETA-simulcast).	e channel num	or the ECC h	as assigned to t	he television stati	on for broadcasting over the air in				
			-		on for broadcasting over-the-air in may be different from the channel				
on which your cable s	stem carried th	e station.		-					
					pendent station, or a noncommercial				
	•	•	,. (ast), "I" (for independent), "I-M" mmercial educational multicast).				
For the meaning of the			· · ·	•	,				
				,	s". If not, enter "No". For an ex-				
planation of local serv Column 5: If you h					paper SA3 form. tating the basis on which your				
-			-	-	ering "LAC" if your cable system				
carried the distant stat	•								
					payment because it is the subject tem or an association representing				
-				•	y transmitter, enter the designa-				
· · · /				•	ner basis, enter "O." For a further				
					d in the paper SA3 form. to which the station is licensed by the				
					which the station is identifed.				
Note: If you are utilizin	ng multiple char	nnel line-ups,	use a separate s	space G for each	channel line-up.				
		CHANN	CHANNEL LINE-UP AV						
1. CALL	2. B'CAST	1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION							
SIGN		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	-			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-			
	CHANNEL NUMBER		(Yes or No)	5. BASIS OF	6. LOCATION OF STATION	•			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	•			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - - -			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - -			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· ·			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	- - - -			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· · ·			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· · ·			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· · ·			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· · · · · · · · · · · · · · · · · · ·			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· ·			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	· · · ·			
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
		OF	(Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
HOOD CANAL	TELEPHONI	E CO. INC.			1786	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s	G, identify every system during th	/ television sta	period, except ((1) stations carried	and low power television stations) d only on a part-time basis under	G
•				•	ain network programs [sections nd (2) certain stations carried on a	Primary
substitute program bas						Transmitters:
basis under specifc FC				carried by your ca	able system on a substitute program	Television
				e Special Stateme	ent and Program Log)—if the	
station was carried			4	1 h - 4h h - 4 ⁴ 4		
	formation conc				ute basis and also on some other f the general instructions located	
		sign. Do not r	eport origination	n program service:	s such as HBO, ESPN, etc. Identify	
			J. J	•	tion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	-2". Simulcast	streams must	be reported in c	column 1 (list each	n stream separately; for example	
,	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in	
,		,	annel 4 in Wash	ington, D.C. This	may be different from the channel	
	in each case v	vhether the st			pendent station, or a noncommercial	
	•		,. (ast), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the			· · ·	``	,	
					s". If not, enter "No". For an ex-	
planation of local servi					paper SA3 form. stating the basis on which your	
-			•	-	ering "LAC" if your cable system	
carried the distant stat	•					
					payment because it is the subject tem or an association representing	
-				•	y transmitter, enter the designa-	
· · · /					her basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
				-	which the station is identifed.	
Note: If you are utilizin	g multiple char	• •	•	•	channel line-up.	
		CHANN	EL LINE-UP	AW		+
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NUNDER	STATION		(II Distant)		ł
		••••••				
					1	
		••••••			<u> </u>	
		<u> </u>			+	
		1				

Name	LEGAL NAME OF C							SYSTEM ID# 1786
H Primary Transmitters: Radio	all-band basis v Special Instruct receivable if (1) on the basis of For detailed info located in the p Column 1: lo Column 2: S Column 3: lf	t every radio s whose signals whose signals whose signals whose signals whose signals where it is carried by monitoring, to promation about aper SA3 form dentify the call tate whether the the radio stati	tation ca were "ge rning All the syst be receive t the the sign of e ne statio on's sigr	rried on a separate and discre nerally receivable" by your cat I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the sy Copyright Office regulations o each station carried. n is AM or FM. nal was electronically processe	ole system during copyright Office re the system's hea ystem's FM anter n this point, see p	the accountin egulations, an idend, and (2) nna, during cer page (vi) of the	g period FM sign it can be rtain stat genera	l. al is generally e expected, ed intervals. I instructions
	Column 4: G	Sive the station	's locatio	a mark in the "S/D" column. on (the community to which the the community with which the s			or, in th	e case of
			S/D			AM or EM	S/D	
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION

FORM SA3E. PAGE 5.							PERIOD: 2021/1
LEGAL NAME OF OWNER OF I					S	SYSTEM ID# 1786	Name
SUBSTITUTE CARRIAGE	_	-			on that your cable system		I
substitute basis during the ad	counting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	
explanation of the programm				e general ins	tructions located in the pa	aper SA3 form.	Substitute Carriage:
 SPECIAL STATEMENT During the accounting per broadcast by a distant stat 	iod, did you			is, any nonne	etwork television program		Special Statement and
Note: If your answer is "No'		rest of this pad	ge blank. If your answer is '	"Yes," you m			Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broa the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please of every no distant stat gulations, c tion. Do no .ucy" or "NE n was broad sign of the s dcast static adian statid th and day <i>e</i> "5/7." as when the Example: a er "R" if the and regulati	am on a separa attach addition nnetwork telev ion and that yo or authorization ot use general (3A Basketball: dcast live, ente station broadca on's location (th ons, if any, the when your sys a substitute pro a program carri listed program ons in effect du	al pages. ision program (substitute p our cable system substitute s. See page (vi) of the gen categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "N asting the substitute progra he community to which the community with which the tem carried the substitute p gram was carried by your of ed by a system from 6:01:" was substituted for progra uring the accounting period	orogram) that d for the prog neral instructi r "basketball" lo." station is lice station is lice program. Use cable system 15 p.m. to 6:2 amming that y	, during the accounting gramming of another sta ons located in the paper '. List specific program ensed by the FCC or, in ntified). e numerals, with the mor I. List the times accurate 28:30 p.m. should be your system was require etter "P" if the listed pro	tion Ith Iy	
effect on October 19, 1976.	0 0		•		5		
					EN SUBSTITUTE	7. REASON	
	2. LIVE?	E PROGRAM		5. MONTH	6. TIMES	FOR DELETION	
1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	BEELIION	
					_		
					_		
					_		
					_		
					_		
					_		

N	LEGAL NAME OF O	OWNER OF CABLE	SYSTEM:					SYSTEM ID#				
Name	HOOD CANA	AL TELEPHO	NE CO. INC.					1786				
J		s space ties in v	vith column 5 of spa									
Part-Time Carriage	I column 5 of space G											
Log	• Give the mont "4/10."	urred 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." 											
			DATES	AND HOURS (OF PART-TIME CAR	RIAGE						
	CALL SIGN	WHEN	I CARRIAGE OCCU	RRED	CALL SIGN	WHEN	N CARRIAGE O					
		DATE	HOUF FROM	RS TO		DATE	H FROM	OURS TO				
			-					_				
								_				
			<u> </u>									
								_ _				
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								_				
								_				
								_				

FORM	SA3E. PAGE 7.							
LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name				
но	DD CANAL TELEPHONE CO. INC.		1786	Name				
Inst all a (as i page	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.							
			• • • •					
Instru • Com • Com • If yo fee f • If yo acco	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: plete block 1, showing your minimum fee. plete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the amore rom block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable part impanying this form and attach the schedule to your statement of account. rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be of x 3 below.	s of the DSE S	Schedule	L Copyright Royalty Fee				
•	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be en	tered on line 2	in block					
	low. rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be entered o	n line					
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee i 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.	\$	2,004,549.05					
	This is your minimum fee.	\$	21,328.40					
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. In this block 3 below blank and carry Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or	14, you must c	heck					
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero	\$	-					
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00					
	Line 3. Add lines 1 and 2 and enter here	\$	-					
Block 4	 Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter 	\$	21,328.40 0.00	Cable systems submitting additional				
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	22,053.40	appropriate form for submitting the additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (So general instructions located in the paper SA3 form for more information.)	ee page (i) of t	he					

	FORM SA3E. PAG	GE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM HOOD CANAL TELEPHONE CO. INC. 1	i ID# 786
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations	
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) Name Brooke Ogg Telephone 360-898-2760	
Information	Address PO Box 249 (Number, street, rural route, apartment, or suite number) Union, WA 98592-0249 (City, town, state, zip) Email Accounting@hoodcanal.net Fax (optional) 360-898-3854	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or 	
	 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	/s/Mike Oblizalo Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: Mike Oblizalo Title: Vice President & General Manager (Title of official position held in corporation or partnership) Date: July 29, 2021	
Privacy Act Notice:	: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this	

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

GAL NAME OF OWNER OF CABL		SYSTEM ID# 1786	Name
The Satellite Home Viewer lowing sentence: "In determining the service of providing scribers and amoun	T CONCERNING GROSS RECEIPTS EXCLUSIONS Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding to total number of subscribers and the gross amounts paid to the cable system for the secondary transmissions of primary broadcast transmitters, the system shall not inc ts collected from subscribers receiving secondary transmissions pursuant to section nen to exclude these amounts, see the note on page (vii) of the general instructions	basic lude sub- 119."	P Special Statement Concerning Gross Receipts Exclusion
made by satellite carriers to	od did the cable system exclude any amounts of gross receipts for secondary transm o satellite dish owners? The and list the satellite carrier(s) below	nissions	
Name Mailing Address	Name Mailing Address		
•	ENTS rksheet for those royalty payments submitted as a result of a late payment or under est assessment, see page (viii) of the general instructions in the paper SA3 form.	payment.	Q
Line 1 Enter the amount of	f late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by th	e interest rate* and enter the sum here	days	
Line 3 Multiply line 2 by th	e number of days late and enter the sum here	- 0274	
	00274** enter here and on line 3, block 4, page 7)	- t charge)	
	ite chart click on <i>www.copyright.gov/licensing/interest-rate.pdf.</i> For further assistanc Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal e	quivalent of 1/365, which is the interest assessment for one day late.		
• •	worksheet covering a statement of account already submitted to the Copyright Offce , address, first community served, accounting period, and ID number as given in the		
Owner			
First community served Accounting period ID number			
ID number	e 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying informatio t of account. PII is any personal information that can be used to identify or trace an individual, such as nam eeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offcr	e, address and telephon	e

search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
1	HOOD CANAL TELEPHONE CO. INC. 1786								
	SUM OF DSEs OF CATEGORY "O" STATIONS:								
	Add the DSEs of each station.								
	Enter the sum here and in line 1	0.00							
	Instructions:								
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5								
Computation	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-								
	mercial educational station, give the DSE as ".25."								
Category "O"	CATEGORY "O" STATIONS: DSEs								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Add rows as									
necessary.									
Remember to copy all									
formula into new									
rows.									

		T	
		L	······

Nama	LEGAL NAME OF	OWNER OF CABLE SYSTEM:								SYSTEM ID#
Name	HOOD CANAL TELEPHONE CO. INC. 1786									
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	HOUD CANAL TELEPHONE CO. INC. 1786 Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station on rounding, see page (viii) of the general instructions in the paper SA3 form. CATEGORY LAC STATIONS: COMPUTATION OF DSEs									
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY	OF ST	IMBER HOURS ATION ATION	4. BASIS OF CARRIAG VALUE		5. TYPE VALUE	6. D	SE
			÷	-			x		=	
			÷			•	x		=	
			÷			=	x		=	
			÷				x	••••••	=	
			÷				X			
			+ +				x x			
			÷		••••••	-	x	••••••	=	
4 Computation of DSEs for Substitute- Basis Stations	Enter the sum here and in line 2 of part 5 of this schedule,									
		SL	JBSTITUTE	E-BAS		S: COMPUTA	ATION OF I	DSEs	Γ	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA IN YEA	YS	4. DSE	1. CALL SIGN	2. NUM OF PRO	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			+	=				÷		=
			÷ ÷	=				÷		=
			: :					- +		-
		4	÷	=				÷		=
	÷ = ÷ = SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. • • Add the DSEs of each station. • • • • Enter the sum here and in line 3 of part 5 of this schedule, • • • • •						=			
5		ER OF DSEs: Give the am s applicable to your system		boxes ir	n parts 2, 3, and 4	4 of this schedule	and add them	to provide th	ie total	
Total Number	1. Number	r of DSEs from part 2●					•		0.00	
of DSEs	2. Number of DSEs from part 3 •						0.00			
	3. Number	of DSEs from part 4 ●					•		0.00	
	TOTAL NUMBE	ER OF DSEs						>		0.00

LEGAL NAME OF O	WNER OF CABLE S	SYSTEM:					S	YSTEM ID#	
HOOD CANAL	TELEPHONE	CO. INC.						1786	Name
In block A: • If your answer if ' schedule.	k A must be comp 'Yes," leave the re 'No," complete blo	mainder of pa		of the DSE schedu	ule blank and	complete part	8, (page 16) of the		6
			BLOCK A:	TELEVISION M	ARKETS				Computation of 3.75 Fee
effect on June 24,	1981?	schedule—D		er markets as defin LETE THE REMAIN			C rules and regula	tions in	
		BLO	CK B: CARF	RIAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	gulations pric e DSE Scheo	or to June 25, 1 dule. (Note: The	part 2, 3, and 4 of th 981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted statio	ns, see the	-	
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station. BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.									
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								<u></u>	
								0.00	
		E	BLOCK C: CC	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	total number of l	DSEs from p	part 5 of this s	chedule				-	
Line 2: Enter the	sum of permittee	d DSEs from	n block B abov	/e				-	
				of DSEs subject t ′ of this schedule		ate.		0.00	
Line 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter sur	n here				x		partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line (3						carriage? If yes, see part 9 instructions.

Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7)

DSE SCHEDULE. PAGE 13.

0.00

DSE SCHEDULE. P.	AGE 13.	(CONTINUED)
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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786								Nomo		
	1. CALL	2. PERMITTED		A: TELEVIS	2. PERMITTED		UED) 1. CALL	2. PERMITTED	3. DSE	6
	SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		Computation of
										Computation of 3.75 Fee
·····			<u> </u>	ht 		+	1			1

ACCOUNTING PERIOD: 2021/1

							DSE S	CHEDULE. PAGE 14.			
	LEGAL NAME OF OWN	ER OF CABLE	SYSTEM:					SYSTEM ID#			
Name	HOOD CANAL 1	FELEPHON	E CO. INC.					1786			
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)(3)). 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 DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 and 5, and 4 must be accurate and is subject to verifcation from the designated statement of account on fle in the Licensing Division. 										
					ED ON A PART-TIME AN						
	1. CALL	2. PRIO		COUNTING	4. BASIS OF			6. PERMITTED			
	SIGN	DSE	PI	ERIOD	CARRIAGE		DSE	DSE			
7	Instructions: Block A	must be comp	oleted.								
'	In block A:										
Computation	If your answer is	"Yes," complet	e blocks B and C, b	pelow.							
of the	-	-			art 8 of the DSE schedul	e					
Syndicated			BLOCI	k a: Major	TELEVISION MARK	ET					
Exclusivity											
Surcharge	 Is any portion of the c 	able system wi	thin a top 100 major	television mark	et as defned by section 76	6.5 of FCC rι	lles in effect June 24	, 1981?			
	Yes—Complete	blocks B and (<u>-</u>		No Proceed to	No—Proceed to part 8					
	Tes—Complete	DIOCKS D allu (parto							
	BLOCK B: C	K C: Compu	utation of Exempt DSEs								
	Is any station listed in				Was any station listed		•				
	commercial VHF statio	•	a grade B contour,	in whole	nity served by the cab		rior to March 31, 197	2? (reter			
	or in part, over the cat	ble system?			to former FCC rule 76	.159)					
	Yes—List each st	ation below with	its appropriate perm	itted DSE	Yes—List each st	tation below v	vith its appropriate per	mitted DSE			
	X No—Enter zero a	nd proceed to pa	art 8.		X No-Enter zero a	nd proceed to	part 8.				
		, pe					•				
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	GALL SIGN		OALL SIGN	DGL	CALL SIGN	DGE	CALL SIGN	DOL			
						<mark></mark>		·····			
				T]				
				••••••		• • •••••••		•••••			
				·····		<mark>.</mark>		•••••			
		·1		0.00		•	TOTAL DOC-	0.00			
		l	TOTAL DSEs	0.00			TOTAL DSEs	0.00			

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: HOOD CANAL TELEPHONE CO. INC.	SYSTEM ID# 1786	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,004,549.05	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
• ls an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 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 DSI	=	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	-	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD: 2021/1

	, _	DSE SCHEDULE. PAG									
Name											
	HOOD CANAL TELEPHONE CO. INC.										
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									
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.									
		F. Multiply line D by line E and enter here									
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)									
		Syndicated Exclusivity Surcharge	<u></u>								
8	You m 6 was	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.									
Computation		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.									
of	-	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below									
Base Rate Fee		blank.									
		What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local									
	service	service area," see page (v) of the general instructions.									
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did y	• 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 following sections.										
	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE										
	1 Enter the amount of gross receipts from space K (page 7).										
	Section Enter the total number of permitted DSEs from block B, part 6 of this schedule. 2 (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)										
	Castian										
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.									
	A. Enter 0.01064 of gross receipts (the amount in section 1)										
		B. Enter 0.00701 of gross receipts (the amount in section 1)									
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here									
		D. Multiply line B by line C and enter here									
		E. Add lines A, and D. This is your base rate fee. Enter here	_								
	1	and in block 3, line 1, space L (page 7)									

0.00

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nomo
HOOI	D CANAL TELEPHONE CO. INC. 1786	Name
Section	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	
4		8
	A. Enter 0.01064 of gross receipts	Ŭ
	(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 Male i ee
	D. Enter 0.00330 of gross receipts	
l	(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	
l		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
	Base Rate Fee \$ 0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	•
Space		9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this on, you must:	of
Einet: [·	Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity Surcharge
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for
also co	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 must mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
•	For each community served, determine the local service area of each wholly distant and each partially distant station you	Stations
	to that community.	
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.)	
-	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.	
Compu groups	tting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
• ·	, 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, and s 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	ne 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 paper SA3 form.	
	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
DSEs f	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 your calculations on the form.	

LEGAL NAME OF OWNER						SI	STEM ID# 1786	Name
E				TE FEES FOR EACH				
COMMUNITY/ AREA	FIRST	SUBSCRIBER GROUF	0	SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DGL		DGL		DGL		DGL	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 Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROUP		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 Group \$ 0.00		0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		, , ,						
Base Rate Fee: Add the Enter here and in block 3			per group a	s shown in the boxes abo	ove.	\$	0.00	

Legal name of own HOOD CANAL TE						S	YSTEM ID# 1786	Name
	BLOCK A:	COMPUTATION OF	F BASE RA	ATE FEES FOR EAC	H SUBSCR	BER GROUP		
	FIFTH	SUBSCRIBER GROU		<u> </u>	IP	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	3 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		+						Exclusivity Surcharge
		•	<mark>.</mark>					for
								Partially
								Distant
		+						Stations
		•						
		11	0.00			11	0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i>۱</i>		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
		+				+		
		+						
			0.00	TILIDOF			0.00	
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 bloc			iber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE HOOD CANAL TEL						S	YSTEM ID# 1786	Name
E				ATE FEES FOR EAC		IBER GROUP		
COMMUNITY/ AREA	NINTH	SUBSCRIBER GRO	0P 0	COMMUNITY/ ARE	9			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fe
			••••					and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	LEVENTH	SUBSCRIBER GRO				H SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•••• ••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes	above.	\$		

SYSTEM: SYSTEM ID# CO. INC. 1786	Name
COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP	9
0 COMMUNITY/ AREA 0	Computat
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	of
	Base Rate
	and Syndicat
	Exclusiv
	Surcharg
	for Partially
	Distant
	Station
0.00 Total DSEs 0.00	
\$ 0.00 Gross Receipts Second Group \$ 0.00	
\$ 0.00 Base Rate Fee Second Group \$ 0.00	
SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP	
0 COMMUNITY/ AREA 0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
0.00 Total DSEs 0.00	
\$ 0.00 Gross Receipts Fourth Group \$ 0.00	

Legal Name of OWN HOOD CANAL TE						5	SYSTEM ID# 1786	Name
				ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	ENTEENTH	SUBSCRIBER GRO			JP 0	9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		+	••• ••••••					and Syndicated
								Exclusivity
								Surcharge
								for Partially
		+	<mark></mark>					Distant
								Stations
		+	···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	¢	0.00	Gross Receipts Sec	and Group	¢.	0.00	
	Broup	3	0.00	Gloss Necelpts Sec		<u>\$</u>	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>					
		+	••• ••••••					
			<mark>.</mark>					
Total DSEs		11	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 bloo	the base rat	e fees for each subsc	riber group a	as shown in the boxes	above.			
		pace L (page 1)				4		

LEGAL NAME OF OWI						S	YSTEM ID# 1786	Name
	BLOCK A:	COMPUTATION	OF BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO				D SUBSCRIBER GROU		9
COMMUNITY/ AREA	A		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	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
TW	ENTY-THIRD	SUBSCRIBER GRO	DUP	TWE	NTY-FOURTH	H SUBSCRIBER GROU	P	
COMMUNITY/ AREA	<i></i>		0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
	I the base rat	e fees for each subs		as shown in the boxes		\$		

LEGAL NAME OF OWN						S	YSTEM ID# 1786	Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP TWENTY-FIFTH SUBSCRIBER GROUP TWENTY-SIXTH SUBSCRIBER GROUP									
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9				
CALL SIGN	DSE	CALL SIGN DS		CALL SIGN DSE CALL SIGN DSE				CALL SIGN	Computation of
								Base Rate Fe	
		-						Syndicated	
								Exclusivity	
								Surcharge for	
								Partially	
								Distant Stations	
Total DSEs	ļ	11	0.00	Total DSEs		11	0.00		
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
·	·	·				·			
Base Rate Fee First C		\$	0.00	Base Rate Fee Sec		\$	0.00		
TWENTY COMMUNITY/ AREA	-SEVENTH	SUBSCRIBER GRO	0UP 0	TWE		H SUBSCRIBER GROU	IP 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	irth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add t Enter here and in bloc			criber group a	II as shown in the boxes	above.	\$			

EGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786								
				ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
TWENTY-NINTH SUBSCRIBER GROUP THIRTIETH SUBSCRIBER GROUP								9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	•		0	Computati
CALL SIGN	DSE	CALL SIGN DSE	DSE CALL SIGN DSE CALL SIGN DS				DSE	of
								Base Rate F
								and
								Syndicate Exclusivit
								Surcharg
								for
								Partially
								Distant Stations
								Stations
otal DSEs	<u> </u>	11	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
·	·	·						
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GROU		ТНІБ				
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
		+						
		+						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts 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			iber group	as shown in the boxes	above.	\$		

HOOD CANAL II		E SYSTEM: E CO. INC.				:	SYSTEM ID# 1786	Name
TH		COMPUTATION C SUBSCRIBER GRO				IBER GROUP	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	9		
CALL SIGN	DSE	CALL SIGN DSE		CALL SIGN DSE CALL SIGN DSE CALL SIGN DS				Computatio
								Base Rate I
						•		and Syndicate
								Exclusivit
								Surcharg
								for Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
TH	HRTY-FIFTH	SUBSCRIBER GRO	UP	П	LIDTV CIVTL	SUBSCRIBER GRO	IID	
						T SOBSCINELY GROU		
OMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
COMMUNITY/ AREA		CALL SIGN						
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
CALL SIGN		CALL SIGN	0	COMMUNITY/ ARE	A	1	0	
CALL SIGN		CALL SIGN	0 DSE	COMMUNITY/ ARE		1	0 DSE	
COMMUNITY/ AREA CALL SIGN			0 DSE	COMMUNITY/ ARE		CALL SIGN	0 DSE	

LEGAL NAME OF OWNEF						s	SYSTEM ID# 1786	Name
				ATE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GROU				I SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee
						•		and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
		+						
		11	0.00			ļļ	0.00	
Total DSEs			0.00	Total DSEs		-		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROU	JP		FORTIETH	I SUBSCRIBER GROU	JP	
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 G	roup	<u>\$</u>	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add the	e base rat	e fees for each subsci	iber group a	as shown in the boxes	above.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OWI						\$	SYSTEM ID# 1786	Name
F		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP	UP	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
								Base Rate F
		+						and Syndicate
								Exclusivity
								Surcharge
		+						for Partially
								Distant
								Stations
		+						
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	-	\$	0.00	Base Rate Fee Sec	-	\$	0.00	
FC COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	FOI COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	
	·							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	II as shown in the boxes	above.	\$		

		E SYSTEM: E CO. INC.				S	SYSTEM ID# 1786	Nan
		COMPUTATION OF		ATE FEES FOR EAG	CH SUBSCR	IBER GROUP		
FORT	Y-FIFTH	SUBSCRIBER GROU	IP 0	1	FORTY-SIXTH SUBSCRIBER GROUP			
COMMUNITY/ AREA	OMMUNITY/ AREA			COMMUNITY/ AREA 0			0	9 Compu
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Ra
								and
								Syndic
								Exclus Surcha
								for
		-						Partia
								Dista
								Statio
			<u> </u>					
otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts First Gro	up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gro	up	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GROU	IP	FORTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
				-				
			· · · · · · · · · · · · · · · · · · ·					
otal DSEs			0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third Gro		s	0.00	Total DSEs Gross Receipts Fou	rth Group	<u>\$</u>	0.00	

FORM SA3E. PAGE 19.	FORM	SA3E.	PAGE	19.
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		DF BASE R	ATE FEES FOR EAG				
					IBER GROUP		
	TH SUBSCRIBER GRC				I SUBSCRIBER GROU		9
		0	COMMUNITY/ AREA 0			Compu	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Ra
					•		ano Syndic
							Exclus
							Surcha
					•		for
							Partia Dista
							Statio
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		\$	0.00	
	ST SUBSCRIBER GRC		11		SUBSCRIBER GROU		
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•		
Fotal DSEs		0.00	Total DSEs			0.00	
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	

HOOD CANAL TE	ER OF CABLI		_			S	YSTEM ID# 1786	Name		
	BLOCK A:	COMPUTATION OF	BASE R	ATE FEES FOR EAC	H SUBSCR	IBER GROUP				
FI	FTY-THIRD	SUBSCRIBER GROU	Р	FIF	TY-FOURTH	SUBSCRIBER GROU	Р	•		
COMMUNITY/ AREA	IUNITY/ AREAO COMMUNITY/ AREA			COMMUNITY/ AREA 0				9 Computat of		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
								Base Rate		
								and		
								Syndicate		
						•		Exclusivit Surcharg		
						•		for		
								Partially		
								Distant		
								Stations		
otal DSEs			0.00	Total DSEs			0.00			
ross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00			
·	·	-			·					
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00			
FI	FIFTY-FIFTH SUBSCRIBER GROUP				FIFTY-SIXTH SUBSCRIBER GROUP					
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						•				
otal DSEs			0.00	Total DSEs			0.00			
	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
ross Receipts Third (

LEGAL NAME OF OWI HOOD CANAL T						S	SYSTEM ID# 1786	Name
				ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		FIFTY-EIGHTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						•		and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	<u> </u>	0.00	Gross Receipts Sec	ond Group	\$	0.00	
		·						
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	· · · · · · · · · · · · · · · · · · ·		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•		
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				11				
Base Rate Fee: Add Enter here and in blo	the base rat	te fees for each subso	riber group a	as shown in the boxes	above.	\$		
		pase = (page 1)				¥		

LEGAL NAME OF OW HOOD CANAL T						S	YSTEM ID# 1786	Name
		COMPUTATION (SUBSCRIBER GRO		ATE FEES FOR EA		RIBER GROUP D SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant Stations
Total DSEs		11	0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
		-						
Base Rate Fee First	-	\$	0.00	Base Rate Fee Sec		\$	0.00	
	SIXTY-THIRD SUBSCRIBER GROUP				SIXTY-FOURTH SUBSCRIBER GROUP			
	¬		Ŭ					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		11	0.00	Total DSEs			0.00	
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
					-			
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				11				
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	¢		
		phane r (hañe i)				φ		

LEGAL NAME OF OWN						S	YSTEM ID# 1786	Name
	BLOCK A:	COMPUTATION	OF BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO				H SUBSCRIBER GROU		9
COMMUNITY/ AREA	MUNITY/ AREA 0 COMMUNITY/ AREA			UNITY/ AREA 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	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
SIXT	Y-SEVENTH	SUBSCRIBER GRO	DUP	s	SIXTY-EIGHTH	H SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
	the base rat	te fees for each subs		as shown in the boxes		\$		

	1786						ER OF CABLE	HOOD CANAL TE
		BER GROUP	I SUBSCRI	TE FEES FOR EAC	BASE RA	COMPUTATION O	BLOCK A:	
9		SUBSCRIBER GROU	EVENTIETH	11		SUBSCRIBER GROU	XTY-NINTH	
Compu	COMMUNITY/ AREA 0			0		COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat								
and Syndica								
Exclusi			••••					
Surcha								
for								
Partia Dista								
Statio								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	Base Rate Fee First G
	IP	SUBSCRIBER GROU	Y-SECOND		JP	SUBSCRIBER GROU	NTY-FIRST	SEVE
	51			SEVEN				
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
		CALL SIGN	DSE		0 DSE	CALL SIGN	DSE	COMMUNITY/ AREA
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		COMMUNITY/ AREA
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		
	0	CALL SIGN		COMMUNITY/ AREA		CALL SIGN		CALL SIGN
	0 DSE	S		COMMUNITY/ AREA	DSE	CALL SIGN	DSE	

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786										
SEVE		COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee and		
								Syndicated		
								Exclusivity Surcharge		
		+						for		
								Partially Distant		
								Stations		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
		SUBSCRIBER GRO				I SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		+								
		+								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	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 a	as shown in the boxes	above.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 1786										
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP				
	FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GROU	JP	•		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
						-		Surcharge		
								for		
	<mark>.</mark>							Partially		
	•••••••••••••••••••••••••••••••••••••••				•••••••••••••••••••••••••••••••••••••••			Distant Stations		
	•••••••••••••••••••••••••••••••••••••••							olutions		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00			
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	•••••••••••••••••••••••••••••••••••••••									
	•									
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00			
]			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00			
							,			
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$	0.00			
	, ., e									

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786									
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP			
	FIFTH	SUBSCRIBER GROU	Р		SIXTH	SUBSCRIBER GROU	IP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
	SEVENTH	SUBSCRIBER GROU	Р		EIGHTH	SUBSCRIBER GROU	IP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					•				
	 				.				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00				
Base Rate Fee: Add the	e base rate	e fees for each subscri	ber group a	as shown in the boxes ab	ove.				
Enter here and in block	3, line 1, sj	pace L (page 7)				\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786									
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP			
	NINTH	SUBSCRIBER GROU	Р		TENTH	SUBSCRIBER GROUP))	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9	
			DOF				DOF	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee	
								and	
		-						Syndicated	
								Exclusivity	
								Surcharge	
						-		for	
								Partially	
								Distant	
								Stations	
		-				-			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00					
					·				
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
El	EVENTH	SUBSCRIBER GROU	Р		TWELVTH	SUBSCRIBER GROUP)		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
					+		···		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth	Group	\$	0.00			
				11					
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes abo	ove.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786									
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP			
THI	RTEENTH	SUBSCRIBER GROU	Р	FOL	IRTEENTH	SUBSCRIBER GROU	JP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9	
								Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee	
								and	
								Syndicated	
		-		•				Exclusivity	
								Surcharge	
								for	
						-		Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.0					
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
FI	FTEENTH	SUBSCRIBER GROU	Р	S	IXTEENTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
						-			
						-			
					†	+			
		-							
							0.00		
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 Group \$ 0.00			0.00	Base Rate Fee Fourth Group \$ 0.00			0.00		
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes abo	ove.	\$			
	, ,								

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
SEVEN	ITEENTH	SUBSCRIBER GROU	Р	EIG	HTEENTH	SUBSCRIBER GROU	IP	•	
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	pup	\$	0.00	Gross Receipts Second	d Group	\$	0.00		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
NIN	ITEENTH	SUBSCRIBER GROU	Р	Т\	WENTIETH	SUBSCRIBER GROU	IP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
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					.				
Total DSEs	II		0.00	Total DSEs		L I	0.00		
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00			
Boos Data Face A LLT	hace	food for and the state	har	a abaum in the barry b					
Enter here and in block 3	3, line 1, sp	pace L (page 7)	bei group a	as shown in the boxes abo	UVE.	\$			

and and and Syndicar	LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786										
COMMUNITY AREA 0 COMMUNITY AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Common	E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH		BER GROUP				
CALL SIGN DSE Status	TWEN	ITY-FIRST	SUBSCRIBER GROU	Р	TWEN	TY-SECOND	SUBSCRIBER GRO	UP	•		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndhese Image: Sign of the state free for the state state free for the state state for the state for the state state for the state s	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	•		
Total DSEs 0.00 Total DSEs 0.00 Gross Roccipts First Group \$ 0.00 Base Rate Fee Socied Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Total DSEs 0.00 DSE 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 Total DSEs 0.00 Total DSEs 0.00 \$ 0.00 Base Rate Fee Socied Group \$ 0.00 Total DSEs 0.00 Base Rate Fee Socied Group \$ 0.00 Base Rate Fee Socied Group \$ 0.00 Total DSEs 0.00 Gross Roccipts Socied Group \$ 0.00 DSE 0.00 Total DSE 0.00 COMMUNITY AREA 0 0.00 0.00 DSE 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 0.00 Total DSEs 0.00 Total DSE CALL SIGN DSE 0.00 0.00 0.00 0.00 Gross Roccipts Fourth Group \$ 0.00 0.00 0.00 0.00<	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Syndica Image: Syndic									Base Rate Fee		
Total DSEs 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Total DSEs 0.00 Gross Receipts Group \$ 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Total DSEs 0.00 Gross Receipts Group \$ 0.00 Total DSEs CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Grous Receipts Fourth Group \$ 0.00 Group 1 1 1 1 1 1 1 Group 0.00 1 1 1 1 1 1 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>and</td>									and		
Surchar Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Partial Distants Image: Surchar for Distants Image: Surchar for Distants Image: Surchar for Dis									Syndicated		
Image: Second Group Image: Second Group<									Exclusivity		
Total DSEs 0.00 Total DSEs 0.00 Statistical DSEs 0.00 Gross Receipts First Group \$ 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 GALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group CALL SIGN DSE CALL SIGN<									Surcharge		
Distant Station Station Total DSEs Gross Receipts First Group \$ \$ 0.00 Gross Receipts First Group \$ \$ 0.00 Gross Receipts First Group \$ \$ 0.00 Base Rate Fee First Group \$ \$ 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ \$ 0.00 Total DSEs 0.00 Base Rate Fee First Group \$ \$ 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN											
Station Image: Statio											
Total DSEs 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 Gault SIGN DSE CALL SIGN DSE CALL SIGN DSE Gault SIGN DSE CALL SIGN DSE CALL SIGN DSE Gault SIGN DSE CALL SIGN DSE CALL SIGN DSE Gault SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gault SIGN DSE CALL SIGN DSE 0.00 Total DSEs 0.000 Total DSEs 0.000 Gross Receipts Fourth Group 0.000 Base Rate Fee Third Group \$ 0.000 Base Rate Fee Fourth Group \$ 0.000 Base Rate Fee Third Group \$ 0.000 Base Rate Fee Fourth Group \$ 0.000									Stations		
Gross Receipts First Group s 0.00 Base Rate Fee First Group g 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY/ AREA O COMMUNITY AREA											
Gross Receipts First Group s 0.00 Base Rate Fee First Group g 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY/ AREA O COMMUNITY AREA											
Gross Receipts First Group s 0.00 Base Rate Fee First Group g 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY/ AREA O COMMUNITY AREA											
Gross Receipts First Group s 0.00 Base Rate Fee First Group g 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY/ AREA O COMMUNITY AREA											
Gross Receipts First Group s 0.00 Base Rate Fee First Group g 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY/ AREA O COMMUNITY AREA											
Gross Receipts First Group s 0.00 Base Rate Fee First Group g 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY/ AREA O COMMUNITY AREA											
Base Rate Fee First Group \$ 0.00 TWENTY-THIRD SUBSCRIBER GROUP TWENTY-FOURTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs 0.00 Total DSEs 0.00 Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00											
TwenTY-THIRD SUBSCRIBER GROUP TwenTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMUNITY/ AREA D COMUNITY DSE CALL SIGN DSE CALL SIGN DSE COMUNITY Total DSE Gros	Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00			
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE CALL SIGN DSE Call SIGN DSE CALL SIGN DSE Call SIGN DSE Gross Receipts Third Group \$ 0.00 S 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. S 0.00	Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00			
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Call Sign DSE CALL SIGN DSE Call Sign DSE Call Sign DSE Call Sign DSE Call Sign DSE Call Sign DSE Call Sign DSE Call Sign DSE Call Sign DSE Call Sign DSE Call Sign DSE Total DSEs 0.00 Signs Receipts Fourth Group S 0.00 Base Rate Fee Third Group S 0.00 Base Rate Fee Fourth Group S 0.00	TWEN	TY-THIRD	SUBSCRIBER GROU	Р	TWEN	TY-FOURTH	SUBSCRIBER GRO	UP			
Total DSEs 0.00 Gross Receipts Third Group \$ \$ 0.00 Base Rate Fee Third Group \$ \$ 0.00 Base Rate Fee Third Group \$ \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$		•••									
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$											
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$											
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$											
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Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$											
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$											
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$											
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$											
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$								·····			
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$		•					+				
Gross Receipts Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. \$							•				
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Total DSEs			0.00	Total DSEs			0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
	Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourt	h Group	\$	0.00					
				ber group a	as shown in the boxes a	bove.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786										
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	I SUBSCRI	BER GROUP				
TWEN	ITY-FIFTH	SUBSCRIBER GROU	Р	TWE	NTY-SIXTH	SUBSCRIBER GROU	JP	•		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
CALL SIGN	DOL		DOL		DOL		DOL	Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant Stations		
								Stations		
		-								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00			
TWENTY-	SEVENTH	SUBSCRIBER GROU	Р	TWEN	TY-EIGHTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						-				
				-		+	·····			
				-	···	+				
						•				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00			
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00			
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes at	oove.	s				
	J, III J, J	pase = (page /)				*				

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786										
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP				
TWEN	TY-NINTH	SUBSCRIBER GROU	Р		THIRTIETH	SUBSCRIBER GROU	JP	•		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
CALL SIGN	DSL	CALL SIGN	DSL	CALL SIGN	DSL	CALL SIGN	DSL	Base Rate Fee		
								and		
		-						Syndicated		
								Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant		
								Stations		
					•••••••••••••••••••••••••••••••••••••••					
										
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	auo	\$	0.00	Gross Receipts Secon	d Group	\$	0.00			
	oup	<u> </u>	0.00		d Group	•				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00			
	TY-FIRST	SUBSCRIBER GROU	Р	THIRT	Y-SECOND	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
					•••••••••••••••••••••••••••••••••••••••					
					•••					
		-								
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00			
]							
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee: Add the	e base rate	e fees for each subscri	ber aroup a	as shown in the boxes ab	ove.					
Enter here and in block			3,0490			\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786									
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
THIR	TY-THIRD	SUBSCRIBER GROU	IP	THIRT	THIRTY-FOURTH SUBSCRIBER GROUP			9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of	
ONLE CICIT	DOL	ONLE CICIL	DUL	ONLE CICIT	DOL	ONLE CICIT	DOL	Base Rate F	
								and	
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								Exclusivit	
								Surcharge for	
								Partially	
								Distant	
								Stations	
						+			
						**			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00		
	oup	<u>Ψ</u>	0.00			÷	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	id Group	\$	0.00		
THIR	TY-FIFTH	SUBSCRIBER GROU	IP	THI	IRTY-SIXTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						L			
						+			
						+			
]			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00		Gross Receipts Fourth	n Group	\$	0.00				
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	n Group	\$	0.00				
				11					
Base Rate Fee: Add the base rate fees for each subscriber group a Enter here and in block 3, line 1, space L (page 7)			as shown in the boxes at	oove.	\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786										
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP				
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	•		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant		
								Stations		
	<mark>.</mark>									
						•				
	•••••••••••••••••••••••••••••••••••••••									
Total DSEs	4		0.00	Total DSEs	_		0.00			
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secor	Gross Receipts Second Group \$ 0.00					
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00			
THIR	TY-NINTH	SUBSCRIBER GROU	Р		FORTIETH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	···									
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	<mark>.</mark>									
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	•••••••••••••••••••••••••••••••••••••••				••••					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00			
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth	n Group	\$	0.00			
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes al	bove.	\$				
	, <u> </u> , •	· · · · · · · · · · · · · · · · · · ·								

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786										
E	BLOCK A:	COMPUTATION OF	BASERA	ATE FEES FOR EACH	SUBSCR	BER GROUP				
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	-		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant		
								Stations		
Total DSEs			0.00	Total DSEs	_		0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00			
FOR	TY-THIRD	SUBSCRIBER GROU	Р	FOR	TY-FOURTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						•				
						•				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourt	h Group	\$	0.00				
Base Rate Fee: Add the			ber group a	as shown in the boxes a	bove.					
Enter here and in block	3, line 1, s	pace L (page 7)				\$				

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786								
-	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
						•		Stations
	•••							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-	SEVENTH	SUBSCRIBER GROU	IP	FOF	RTY-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 G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	bove.	¢		
	. J, IIIE I, S	pace L (page /)				φ		

LEGAL NAME OF OWNER HOOD CANAL TEL						S	6YSTEM ID# 1786	Name
E	BLOCK A:		BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
FOR	TY-NINTH	SUBSCRIBER GROU	Р		FIFTIETH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
ONLE OIGH	DOL		DOL		DOL	ONLE OIGH	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
					••			Distant
								Stations
						•		
					•••••••••••••••••••••••••••••••••••••••			
Total DSEs	44		0.00	Total DSEs	ļ	<u> </u>	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FIF	TY-FIRST	SUBSCRIBER GROU	Р	FIFT	Y-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•••			
					<mark></mark>			
				•		•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes ab	oove.	s		
	o, into 1, o	coor (page 1)				•		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786								
В	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
FIF	TY-THIRD	SUBSCRIBER GROU	Р	FIFTY	Y-FOURTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated
				•				Exclusivity
								Surcharge
								for
						-		Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FIF	TY-FIFTH	SUBSCRIBER GROU	Р	FI	TY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
					+			
	1				-			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	ase Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee : Add the Enter here and in block			ber group a	as shown in the boxes abo	ove.	\$		
	, ., .							

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786								
B	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
FIFTY-S	SEVENTH	SUBSCRIBER GROU	Р	FIFT	Y-EIGHTH	SUBSCRIBER GROU	JP	•
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
					ļ			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FIF	TY-NINTH	SUBSCRIBER GROU	Р		SIXTIETH	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	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rate 3. line 1. si	e fees for each subscri	ber group a	as shown in the boxes abo	ove.	s		
	, ., .							

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786								
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
SIX	TY-FIRST	SUBSCRIBER GROU	Р	SIXTY	-SECOND	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSL	CALL SIGN	DGL	CALL SIGN	DGL	CALL SIGN	DSL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs	ļļ		0.00	Total DSEs	ļ	<u> </u>	0.00	
Gross Receipts First Gro	oup	<u>\$</u>	0.00	Gross Receipts Second	Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
SIXT	Y-THIRD	SUBSCRIBER GROU	Р	SIXTY	/-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					+			
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the	base rate	fees for each subscri	ber group a	as shown in the boxes abo	ove.			
Enter here and in block 3	3, line 1, sp	bace L (page 7)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 1786								
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
SIX	TY-FIFTH	SUBSCRIBER GROU	Р	SIX	XTY-SIXTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
							DOF	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated
		-						Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			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	
SIXTY-S	SEVENTH	SUBSCRIBER GROU	Р	SIXT	Y-EIGHTH	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	se Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00		
			ber group a	as shown in the boxes abo	ove.			
Enter here and in block	ວ, iine 1, s	pace ∟ (page 7)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 1786								
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
SIX	TY-NINTH	SUBSCRIBER GROU		SE	VENTIETH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
	DOL		DOL		DOL		DOL	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
		_						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Second	d Group	\$	0.00	
	·							
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SEVEN	TY-FIRST	SUBSCRIBER GROU	Р	SEVENT	Y-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
				•		•		
					•	•	·····	
						+		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the	e base rate	e fees for each subscri	ber group a	as shown in the boxes ab	ove.			
Enter here and in block			5 ·	40		\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HOOD CANAL TELEPHONE CO. INC. 1786								
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
SEVENT	Y-THIRD	SUBSCRIBER GROU	P	SEVEN	TY-FOURTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
ONLE CICIT	DOL		DUL		DOL	ON LEE CIGIT	DOL	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
						-		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro		\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
	Jup	4	0.00	Gloss Receipts Secol	la Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
SEVEN	TY-FIFTH	SUBSCRIBER GROU	P	SEVE	ENTY-SIXTH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
	-							
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block 3			iber group a	as shown in the boxes al	bove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786								
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	BER GROUP		
SEVENTY-	SEVENTH	SUBSCRIBER GROU	Р	SEVEN	TY-EIGHTH	I SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE		DSE	CALL SIGN	DSE		DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GROU	P		EIGHTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•••••••••••••••••••••••••••••••••••••••							
				•				
	•						·····	
	•••							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	n Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes at	oove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786								
B	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
EIGH	TY-FIRST	SUBSCRIBER GROU	Р	EIGHT	Y-SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						-		Base Rate Fe
						-		and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
						-		
Total DSEs	Į	ļ	0.00	Total DSEs			0.00	
Gross Receipts First Gro			0.00	Gross Receipts Second	d Croup	¢	0.00	
	oup	<u>\$</u>	0.00	Gross Receipts Second	u Group	<u>\$</u>	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
EIGH	TY-THIRD	SUBSCRIBER GROU	Р	EIGHT	Y-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·			
						-		
						-		
				-	•		·····	
					+			
	 				1			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				и				
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes ab	ove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#HOOD CANAL TELEPHONE CO. INC.1786									
BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	BER GROUP				
EIGHTY-FIFTH	SUBSCRIBER GROU	Р	EIG	HTY-SIXTH	SUBSCRIBER GROU	IP	•		
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9		
				1			Computation		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee		
	+								
	+						and		
	+				+		Syndicated Exclusivity		
					+		Surcharge		
	+			•	+		for		
	+			•			Partially		
							Distant		
							Stations		
Total DSEs		0.00	Total DSEs			0.00			
Gross Receipts First Group	\$	0.00	Gross Receipts Secon	d Group	\$	0.00			
Base Rate Fee First Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00			
EIGHTY-SEVENTH	SUBSCRIBER GROU	P	EIGH	TY-EIGHTH	SUBSCRIBER GROU	P			
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	+								
				·					
	+				+				
					-				
Total DSEs		0.00	Total DSEs			0.00			
Gross Receipts Third Group	¢.	0.00	Gross Receipts Fourth	Group	\$	0.00			
	<u> </u>			Croup	•				
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 1786								
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
EIGH ⁻ COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GROU	P 0	COMMUNITY/ AREA	NINTIETH	SUBSCRIBER GROU	JP 0	9
	1							Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated
								Exclusivity
						-		Surcharge
								for
								Partially Distant
								Stations
Total DSEs	ļ	11	0.00	Total DSEs	<u> </u>	11	0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Second	Group	\$	0.00	
	oup				loloup	÷		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GROU	Р	NINETY	-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
						-		
					.			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth	Group	\$	0.00			
Base Rate Fee : Add the Enter here and in block			ber group a	as shown in the boxes abo	ove.	\$		
		,						

LEGAL NAME OF OWNER HOOD CANAL TEL						S	6YSTEM ID# 1786	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
NINE ⁻ COMMUNITY/ AREA	TY-THIRD	SUBSCRIBER GROU	P 0	NINETY-FOURTH SUBSCRIBER GROUP			JP 0	9
COMMUNITY AREA				COMMONT Y AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GROU	Р	NIN	ETY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•			
					•			
Total DSEs	1		0.00	Total DSEs	1	· · · · · · · · · · · · · · · · · · ·	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the	e base rate	e fees for each subscri	ber aroup a	II as shown in the boxes ab	ove.			
Enter here and in block			С С			\$		

LEGAL NAME OF OWNER HOOD CANAL TEL						S	3YSTEM ID# 1786	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0/122 0:011					502		501	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
					··•			
					··			
	•••••••••••••••••••••••••••••••••••••••				•			
Total DSEs	4		0.00	Total DSEs	_!		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GROU	Р	ONE HU	JNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•		
	<mark>.</mark>							
	···				•	•		
	•••••••••••••••••••••••••••••••••••••••				•			
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	I Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes ab	oove.	\$		
	e, inte 1, 5					T		

LEGAL NAME OF OWNEF						S	YSTEM ID# 1786	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		IBER GROUP	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee and
								Syndicated
								Exclusivity
				•				Surcharge for
								Partially
								Distant Stations
		-						
Total DSEs			0.00	Total DSEs	ļ	11	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
	ED THIRD	SUBSCRIBER GROU	P 0	11	ED FOURTH	I SUBSCRIBER GROU	IP 0	
COMMUNITY/ AREA			v	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
						•		
Total DSEs			0.00	Total DSEs	_		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Raco Data Eas Third O	roup		0.00	Baso Poto Fee Fermi	Group	•	0.00	
Base Rate Fee Third G	ioup	۹	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Poon Pote Fact Add	- hee	food for each	ibor arc	a about in the barrant	hove			
Enter here and in block			ibei group a	as shown in the boxes al	DUVE.	\$		

LEGAL NAME OF OWNEF			-			S	YSTEM ID# 1786	Name
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
						-		Base Rate Fee
					•••			and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED S	SEVENTH	SUBSCRIBER GROU		ONE HUNDRE	ed eighth	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs	1		0.00	Total DSEs		L.I.	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
					_			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes ab	ove.	\$		
						L		

							ELEPHON	
				TE FEES FOR EACH				
0	١٢	SUBSCRIBER GRO	KED TENTH	ONE HUND COMMUNITY/ AREA	UP 0	SUBSCRIBER GRO		ONE HUND MMUNITY/ AREA
				COMMUNIT I/ AREA	U		· · · · · · · · · · · · · · · · · · ·	
 E	D	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ALL SIGN
					<mark></mark>			
		_						
					<mark></mark>			
					<mark></mark>			
		_						
					<mark></mark>			
0	0.			Total DSEs	0.00			DSEs
0	0.	\$	nd Group	Gross Receipts Seco	0.00			
0	0.							
_	•	\$	id Group	Base Rate Fee Second	0.00	\$	Group	Rate Fee First (
		SUBSCRIBER GRO			•	\$	-	
0					•		DELEVENTH	NE HUNDRED
0				ONE HUNDREI	UP		DELEVENTH	NE HUNDRED UNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		NE HUNDRED UNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		NE HUNDRED UNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		NE HUNDRED UNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		NE HUNDRED
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		NE HUNDRED /UNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		DNE HUNDRED MUNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		NE HUNDRED //UNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		NE HUNDRED
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		DNE HUNDRED MUNITY/ AREA
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		ONE HUNDRED
0	JP	SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0	I SUBSCRIBER GRO		DNE HUNDRED MUNITY/ AREA
		SUBSCRIBER GRO) TWELVTH	ONE HUNDREI		I SUBSCRIBER GRO		DNE HUNDRED MUNITY/ AREA
		SUBSCRIBER GRO) TWELVTH	ONE HUNDREI COMMUNITY/ AREA	UP 0 DSE	I SUBSCRIBER GRO		NE HUNDRED //UNITY/ AREA L SIGN
		SUBSCRIBER GRO		ONE HUNDREI		I SUBSCRIBER GRO	DELEVENTH DSE	DNE HUNDRED MUNITY/ AREA LL SIGN
		SUBSCRIBER GRO		CALL SIGN CALL SIGN	UP 0 DSE	I SUBSCRIBER GRO	DELEVENTH DSE	Parte Fee First (ONE HUNDRED IMUNITY/ AREA LL SIGN LL SIGN DSEs s Receipts Third

LEGAL NAME OF OWNEF						S	YSTEM ID# 1786	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
							···	Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
	FTEENTH	SUBSCRIBER GROU			SIXTEENTH	I SUBSCRIBER GROUN		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•		
							•••	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	II as shown in the boxes al	bove.	\$		

LEGAL NAME OF OWN			Ē			S	SYSTEM ID# 1786	Name
ONE HUNDRED SE		COMPUTATION C				BER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
								Base Rate Fe and
		+						Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
						•		
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED I	NINTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	<u>\$</u>	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloc			riber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNEF						S	SYSTEM ID# 1786	Name
		COMPUTATION OF SUBSCRIBER GROUP	BASE RA	TE FEES FOR EACI				
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant Stations
Total DSEs	Į		0.00	Total DSEs		11	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TWEN	NTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-FOURTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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	
				н				
Base Rate Fee: Add the Enter here and in block			per group a	as snown in the boxes a	idove.	\$		

LEGAL NAME OF OWN						S	SYSTEM ID# 1786	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCR			
ONE HUNDRED TW	ENTY-FIFTH	SUBSCRIBER GROUP)	ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP				•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	9 Computatio		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
								Base Rate F
								and
			<mark></mark>					Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
		•						otationo
			<mark></mark>					
			•••					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Second Group			0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWENT	TY-SEVENTH	SUBSCRIBER GROUP				H SUBSCRIBER 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	inn Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
			riber group a	as shown in the boxes	above.	Ø		
Enter here and in bloc	ж 3, IIne 1, s	pace L (page /)				پ		