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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
8/26/21	\$
0, = 0, = .	ALLOCATION NUMBER

Return completed workbook by email to

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting Period	2021/1										
renou											
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID	ss of the cable system on the last day of the	em. he accounting period should sui		2021/1						
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	SANTA ROSA TELEPHONE COOPERATIVE, INC.										
	GANTA ROOM TEELI HONE GOOT ERATIVE, INC.										
				2021/	162467						
				2021/	102407						
				2021/1	2021/1						
	PO BOX 2128										
	VERNON, TX 766385										
	INSTRUCTIONS: In line 1, give any business or trade names used to i	dentify the busine	ss and operation of the syst	em unless	these						
С	names 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	Instructions: For complete space D instructions, see page 1b. Identify	only the first con	nmunity served below and re	list on page	e 1b						
Area	with all communities.										
Served	CITY OR TOWN	STATE									
First	ASPERMONT	TX									
Community	Below is a sample for reporting communities if you report multiple cha	annel line-ups in S	Space G.								
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP		GRP#						
Sample	Alda	MD	A -		1						
•	Alliance	MD	В		2						
	Gering	MD	В		3						

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

CORM CASE DAGE 4			ACCOUNT	ING PERIOD: 2021/1							
FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#								
SANTA ROSA TELEPHONE COOPERATIVE, INC.			2021/1								
SANTA ROSA TELEFHONE COOFERATIVE, INC.			2021/1								
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 first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future fillings.											
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.											
If all communities receive the same complement of television broadcast stations (i.e., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9).	e column blank. It levant community	you report any significant your report and your report any significant your report and your re	tations r group,								
When reporting the carriage of television broadcast stations on a community-by-community channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns by	a subscriber grou										
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#								
ASPERMONT	TX	ABILENE	AB	First							
BENJAMIN	TX	WICHITA F	AA	Community							
CHILDRESS	TX	AMARILLO	AD								
CROWELL	TX	WICHITA F	AA								
HASKELL	TX	ABILENE	AB								
HOLLIDAY	TX	WICHITA F	AA	See instructions for							
KNOX CITY	TX	ABILENE	AB	additional information							
MUNDAY	TX	MUNDAY	AC	on alphabetization.							
ODELL	TX	WICHITA F	AA								
ROCHESTER	TX	ABILENE	AB								
RULE	TX	ABILENE	AB	Add rows as necessary.							
SEYMOUR	TX	WICHITA F	AA	naa rows as necessary.							
WEINERT	TX	ABILENE	AB								
RANDLETT	OK	WICHITA F	AA								

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

SANTA ROSA TELEPHONE COOPERATIVE, INC.

2021/1

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1	BLOCK 2			
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE		CATEGORY OF SERVICE SUBSCRIBERS RATE	
Residential:					
 Service to first set 	1,379	\$ 24.4	0		
 Service to additional set(s) 	1,161	\$ 59.3	8		
• FM radio (if separate rate)					
Motel, hotel					
Commercial	26	\$ 67.3	2		
Converter					
Residential					
Non-residential					
1	<u> </u>	†			

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1				BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CA	TEGORY OF SERVICE	RATE	
Continuing Services:		Installation: Non-residential					
• Pay cable		Motel, hotel					
 Pay cable—add'l channel 		Commercial	\$	85.00			
Fire protection		• Pay cable					
Burglar protection		 Pay cable-add'l channel 					
Installation: Residential		Fire protection					
First set	\$ 85.00	Burglar protection					
 Additional set(s) 		Other services:					
 FM radio (if separate rate) 		Reconnect	\$	10.00			
Converter		Disconnect					
		Outlet relocation	\$	15.00			
		 Move to new address 	\$	10.00			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 2021/1 SANTA ROSA TELEPHONE COOPERATIVE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on € Primary substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if th∉ station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 3. TYPE 2. B'CAST 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER STATION (If Distant) KFDX-NBC 3 Ν No WICHITA FALLS, TX **KAUZ-CBS** 6 Ν No WICHITA FALLS, TX See instructions for KSWO-ABC 7 Ν No additional information LAWTON, OK on alphabetization. KJTL-FOX 18 No WICHITA FALLS. TX ı **KJBO-MY TV** 35 No WICHITA FALLS, TX ı **KSWO-TELEM** 44 I No LAWTON, OK KAUZ-CW 50 No WICHITA FALLS, TX

1 OTTIM OF IOE: 1 7 IOE 0:					CVCTEMID	1
SANTA ROSA			RATIVE, INC		SYSTEM ID# 2021/1	Namo
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 76.59(d	G, identify every system during tions in effect of 6.61(e)(2) and sis, as explained stations: With CC rules, regular here in space of only on a substand also in spanformation conorm. In the station's call a associated with A-2". Simulcast we channel number see the case of entering the least, "E" (for rese terms, see tation is outside ition on a partition on a partition of a distant at entered into a primary transimulcasts, als here categories in least of each categories in least of each categories in	ry television s the accountin on June 24, 19 (4), or 76.63 (5) (6) He set to an ations, or autice General Set to an ations, or autice the station and attreams must be the FCC (e), WRC is Charles at the station whether the set the station whether the set the local set and general Set to an ation or before Justice at the station of the station or before Justice at the station or before Justice at the station or before Justice at the station of the station. Further the set the station of the station. Further the set the station of the station. Further the set the station of the station of the station of the station of the station.	g period except gently	(1) stations carriethe carriage of ceithe carriage of ceithe (2) and (4))]; as carried by your the Special Stater ed both on a subsons, see page (v) on program service ver-the-air design a column 1 (list ease the television state of the television state of the television state of the television of the television of (for network multion "E-M" (for noncuctions located in the televisions located in the television state of the television state of the television state of the television state of the televisions located in the television state of the television state of the televisions located in the television state of the telev	∕es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable syster	Primary Transmitters: Television
Note: If you are utilizing	ng manpie one	•	•		in Grammer line up.	-
		1	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)		
KRBC-NBC	9	N	No	,	ABILENE, TX	
KTXS-ABC	12	N	No		SWEETWATER, TX	
KXVA-FOX	15	I	No		ABILENE, TX	"
KTAB-CBS	32	N	No		ABILENE, TX	"
KTXS-CW	52	N	Yes	0	ABILENE, TX	
KTAB-TELEM	93	I	Yes	0	ABILENE, TX	
			•			

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SANTA ROSA TELEPHONE COOPERATIVE, INC.

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID#
Name

Name

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

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

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

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

KFDX-NBC KAUZ-CBS KSWO-ABC KRBC-NBC	B'CAST CHANNEL NUMBER 3 6 7	3. TYPE OF STATION N N N	(Yes or No) Yes Yes	5. BASIS OF CARRIAGE (If Distant) O	6. LOCATION OF STATION WICHITA FALLS, TX WICHITA FALLS, TX
KAUZ-CBS KSWO-ABC KRBC-NBC	6 7	N	Yes		
KSWO-ABC KRBC-NBC	7			0	WICHITA FALLS, TX
KRBC-NBC		N			
	9		Yes	0	LAWTON, OK
KTXS-ABC		N	No		ABILENE, TX
	12	N	No		SWEETWATER, TX
KXVA-FOX	15	l	No		ABILENE, TX
KJTL-FOX	18	l	Yes	0	WICHITA FALLS, TX
KTAB-CBS	32	N	No		ABILENE, TX
KJBO-MY TV	35	l	Yes	0	WICHITA FALLS, TX
KSWO-TELEM	44	l	Yes	0	LAWTON, OK
KAUZ-CW	50	l	Yes	0	WICHITA FALLS, TX
KTXS-CW	52	N	No		ABILENE, TX
KTAB-TELEM	93	l	No		ABILENE, TX

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2021/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 2021/1 SANTA ROSA TELEPHONE COOPERATIVE. INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on € **Primary** substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television

- basis under specific FCC rules, regulations, or authorizations; • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if th∉
- station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast).

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

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

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KACV-PBS	2	E	No		AMARILLO, TX
KAMR-NBC	4	N	No		AMARILLO, TX
KVII-ABC	5	N	No		AMARILLO, TX
KFDA-CBS	10	N	No		AMARILLO, TX
KCIT-FOX	14	I	No		AMARILLO, TX
KZBZ-NEWS	96	I	No		AMARILLO, TX
KFDA-TELEM	97	I	No		AMARILLO, TX
KACV-V-ME	102	E	No		AMARILLO, TX
KCPN-MY NET	104	I	No		AMARILLO, TX
KVII-COMET	105	I	No		AMARILLO, TX
KVII-CW	106	I	No		AMARILLO, TX

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
carried by your cable of FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during to tions in effect o 6.61(e)(2) and sis, as explaine	the accountin n June 24, 19 (4), or 76.63 ad in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carri the carriage of ce 61(e)(2) and (4))]	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections]; and (2) certain stations carried on a	G Primary Transmitters:
basis under specifc F0	CC rules, regula	ations, or aut	horizations:		cable system on a substitute progran	Television
 Do not list the station station was carried 	•		st it in space I (t	the Special Stater	ment and Program Log)—if the	
• List the station here,	and also in spanformation cond	ace I, if the st			titute basis and also on some othe of the general instructions located	
		-			ces such as HBO, ESPN, etc. Identify nation. For example, report multi	
WETA-simulcast).			·	`	ch stream separately; for example ation for broadcasting over-the-air ir	
its community of licens on which your cable s Column 3: Indicate	se. For examply ystem carried to in each case	e, WRC is Ch he station whether the s	nannel 4 in Was	shington, D.C. Thi vork station, an inc	s may be different from the channe dependent station, or a noncommercia	
(for independent multi For the meaning of the Column 4: If the st	cast), "E" (for nese terms, see tation is outside	oncommercia page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for none uctions located in "distant"), enter "Y	Yes". If not, enter "No". For an ex	
planation of local serv Column 5: If you h					ne paper SA3 form , stating the basis on which you	
cable system carried t					ntering "LAC" if your cable syster	
For the retransmiss	sion of a distan	t multicast str	eam that is not	subject to a royal	Ity payment because it is the subjec	
_					ystem or an association representin ary transmitter, enter the designa	
tion "E" (exempt). For	simulcasts, als	o enter "E". It	f you carried the	e channel on any	other basis, enter "O." For a furthe	
					ted in the paper SA3 form ity to which the station is licensed by the	
				•	th which the station is identifed	
Note: If you are utilizing	ng multiple cha		•	•	n 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 NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NOMBER	OTATION		(II Distant)		

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID:	
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC	•	2021/1	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during	the accountin	g period except	t (1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and sis, as explaine	(4), or 76.63 ed in the next	(referring to 76. paragraph	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0 • Do not list the station	CC rules, regul n here in space	ations, or aut G—but do lis	horizations		nent and Program Log)—if the	
basis. For further in	and also in sp nformation con	ace I, if the st			titute basis and also on some othe of the general instructions located	
each multicast stream	ch station's call associated wit	th a station ac	ccording to its o	ver-the-air design	es such as HBO, ESPN, etc. Identify ation. For example, report multi	
WETA-simulcast).			•	`	ch stream separately; for example	
on which your cable s	ystem carried t	he station			s may be different from the channe dependent station, or a noncommercia	
(for independent multi For the meaning of the	cast), "E" (for r ese terms, see	oncommercia page (v) of th	al educational), ne general instr	or "E-M" (for none uctions located in		
planation of local serv	ice area, see p	age (v) of the	general instruc	ctions located in th	es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you	
carried the distant stat	tion on a part-ti	me basis bed	cause of lack of	activated channe	ntering "LAC" if your cable syster I capacity ty payment because it is the subjec	
of a written agreemen the cable system and	t entered into c a primary trans	on or before J smitter or an a	une 30, 2009, b association repr	petween a cable s resenting the prim	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe	
explanation of these the Column 6: Give the	nree categories e location of ea	s, see page (\ ach station. F	v) of the genera or U.S. stations	I instructions local, list the communi	ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifed	
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AF		
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	IER OF CABLE SY	STEM:			SYSTEM ID#	
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
carried by your cable FCC rules and regular 76.59(d)(2) and (4), 70 substitute program ba	system during to tions in effect o 6.61(e)(2) and sis, as explaine	the accountin n June 24, 19 (4), or 76.63 ad in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carri the carriage of ce 61(e)(2) and (4))]	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections; ; and (2) certain stations carried on a	G Primary Transmitters:
basis under specifc F	CC rules, regula	ations, or aut	horizations:		cable system on a substitute program	Television
station was carried	•		st it in space i (i	tne Special Stater	ment and Program Log)—if the	
• List the station here,	and also in spa nformation cond	ace I, if the st			titute basis and also on some othe of the general instructions located	
		-			es such as HBO, ESPN, etc. Identify ation. For example, report multi	
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams mus	st be reported in	n column 1 (list ea	ch stream separately; for example	
			-		ation for broadcasting over-the-air ir smay be different from the channe	
on which your cable s	ystem carried t	he station			dependent station, or a noncommercia	
educational station, by (for independent multi For the meaning of the	y entering the le icast), "E" (for n ese terms, see tation is outside	etter "N" (for r noncommercia page (v) of the the local ser	network), "N-M" al educational), ne general instr vice area, (i.e.	(for network mult or "E-M" (for non- uctions located in "distant"), enter "Y	icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form ⁄es". If not, enter "No". For an ex	
Column 5: If you h	ave entered "Y	'es" in columr	n 4, you must co	omplete column 5	, stating the basis on which you	
carried the distant sta					ntering "LAC" if your cable syster I capacity	
					ty payment because it is the subject	
					ystem or an association representin ary transmitter, enter the designa	
					other basis, enter "O." For a furthe ted in the paper SA3 form	
Column 6: Give th	e location of ea	ach station. F	or U.S. stations	, list the commun	ity to which the station is licensed by the	
FCC. For Mexican or Note: If you are utilizing				•	th which the station is identifed	
Trotor in you are dained			EL LINE-UP	•	in Gridinio inio dp.	
	a BIOLOT					
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
0.0.1	NUMBER	STATION	,	(If Distant)		

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM	
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		202	1/1 Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable of FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during tions in effect of 6.61(e)(2) and sis, as explaine	the accountin n June 24, 19 (4), or 76.63 (ed in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carri the carriage of ce 61(e)(2) and (4))]	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters:
basis under specifc F0	CC rules, regul	ations, or aut	horizations:		nent and Program Log)—if the	Television
station was carried • List the station here,	only on a subs and also in spa oformation cond	stitute basis ace I, if the st	ation was carrie	ed both on a subs	titute basis and also on some othe of the general instructions located	
each multicast stream	associated wit	th a station ac	cording to its o	ver-the-air design	es such as HBO, ESPN, etc. Identifj ation. For example, report multi ch stream separately; for example	
Column 2: Give th			-		ation for broadcasting over-the-air ir s may be different from the channe	
on which your cable s	ystem carried t	he station			dependent station, or a noncommercia	
(for independent multi For the meaning of the Column 4: If the st	cast), "E" (for r ese terms, see tation is outside	oncommercia page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for non- uctions located in "distant"), enter "Y	es". If not, enter "No". For an ex	
	ave entered "Y he distant stati	es" in columr on during the	accounting pe	omplete column 5 riod. Indicate by e	, stating the basis on which you ntering "LAC" if your cable syster	
of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	t entered into of a primary trans simulcasts, als need categories to location of each	on or before J smitter or an a so enter "E". It s, see page (v ach station. Fo ons, if any, giv	une 30, 2009, bassociation reprint you carried the young carried the young for the generator U.S. stations we the name of	petween a cable seesenting the prime channel on any linstructions locate, list the community with the commun	ty payment because it is the subject ystem or an association representing ary transmitter, enter the designatother basis, enter "O." For a furthe ted in the paper SA3 form the toward to which the station is licensed by the theorem that the station is identified the channel line-up.	
		CHANN	EL LINE-UP	AH	<u> </u>	
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	IER OF CABLE SY	STEM:			SYSTEM ID#	
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
carried by your cable of FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during to tions in effect o 6.61(e)(2) and sis, as explaine	the accountin n June 24, 19 (4), or 76.63 ad in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carri the carriage of ce 61(e)(2) and (4))]	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections; rand (2) certain stations carried on a	G Primary Transmitters:
basis under specifc F0	CC rules, regula	ations, or aut	horizations:		cable system on a substitute progran	Television
 Do not list the station station was carried 	•		st it in space I (t	the Special Stater	ment and Program Log)—if the	
• List the station here,	and also in spanformation cond	ace I, if the st			titute basis and also on some othe of the general instructions located	
		-			es such as HBO, ESPN, etc. Identify ation. For example, report multi	
WETA-simulcast).			·	`	ch stream separately; for example	
its community of licens on which your cable s Column 3: Indicate	se. For examply ystem carried to in each case	e, WRC is Ch he station whether the s	nannel 4 in Was	shington, D.C. Thi vork station, an inc	s may be different from the channe dependent station, or a noncommercia	
(for independent multi For the meaning of the Column 4: If the st	cast), "E" (for n ese terms, see tation is outside	oncommercia page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for none uctions located in "distant"), enter "Y	es". If not, enter "No". For an ex	
planation of local serv Column 5: If you h					ne paper SA3 form , stating the basis on which you	
	he distant stati	on during the	accounting per	riod. Indicate by e	ntering "LAC" if your cable syster	
	•				ty payment because it is the subjec	
_					ystem or an association representin ary transmitter, enter the designa	
tion "E" (exempt). For	simulcasts, als	o enter "E". It	f you carried the	e channel on any	other basis, enter "O." For a furthe	
					ted in the paper SA3 form ity to which the station is licensed by the	
FCC. For Mexican or	Canadian statio	ons, if any, gi	ve the name of	the community wi	th which the station is identifed	
Note: If you are utilizing	ng multiple cha	nnel line-ups	, use a separate	e space G for eac	h channel line-up.	
	1	CHANN	EL LINE-UP	Al		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID:		
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/	Name	
PRIMARY TRANSMITT	ERS: TELEVISI	ON					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during to ions in effect of 3.61(e)(2) and sis, as explaine	the accountin n June 24, 19 (4), or 76.63 ad in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carri the carriage of ce 61(e)(2) and (4))]	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections; ; and (2) certain stations carried on a cable system on a substitute progran	Primary Transmitters: Television	
basis under specifc F0	CC rules, regul	ations, or aut	horizations:		ment and Program Log)—if the	relevision	
station was carried	•		st it in space i (i	irie Speciai Statei	nent and Program Log)—II the		
	nformation con				titute basis and also on some othe of the general instructions located		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi							
			-	_	ch stream separately; for example		
Column 2: Give the			-		ation for broadcasting over-the-air ir		
on which your cable s	ystem carried t	he station		5	s may be different from the channe		
					dependent station, or a noncommercia icast), "I" (for independent), "I-M		
(for independent multi For the meaning of the	,,		,,	`	commercial educational multicast) the paper SA3 form		
Column 4: If the st	ation is outside	the local ser	vice area, (i.e.	"distant"), enter "\	Yes". If not, enter "No". For an ex		
	ave entered "Y	'es" in columr	n 4, you must co	omplete column 5	, stating the basis on which you		
cable system carried t carried the distant stat					ntering "LAC" if your cable syster I capacity		
					Ity payment because it is the subject ystem or an association representin		
the cable system and	a primary trans	smitter or an a	association repr	esenting the prim	pary transmitter, enter the designa other basis, enter "O." For a furthe		
explanation of these th	ree categories	s, see page (\	v) of the genera	l instructions loca	ted in the paper SA3 form		
					ity to which the station is licensed by the ith which the station is identifed		
Note: If you are utilizing	ng multiple cha	nnel line-ups	, use a separate	e space G for eac	h channel line-up.		
		CHANN	EL LINE-UP	AJ			
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)			
		0.7		(ii Dietain)		1	
					·	,	
						""	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#		
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC	•	2021/1	Name	
PRIMARY TRANSMITTI	ERS: TELEVISI	ON					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during ions in effect of 3.61(e)(2) and sis, as explaine	the accountin n June 24, 19 (4), or 76.63 ed in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carrie the carriage of cer 61(e)(2) and (4))];	as and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television	
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute progran basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I' (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you c							
Note: If you are utilizing					th which the station is identifed h channel line-up.	-	
	1	CHANN	EL LINE-UP	AK		 -	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	
SANTA ROSA			RATIVE. INC	_	2021/1	Name
PRIMARY TRANSMITT				<u> </u>		
In General: In space	G. identify ever	v television s	tation (including	translator station	ns and low power television stations)	
·		•	, ,	•	ed only on a part-time basis under	G
•				•	rtain network programs [sections	
76.59(d)(2) and (4), 70 substitute program ba	` '` '	· /·	` •	61(e)(2) and (4))];	and (2) certain stations carried on a	Primary Transmitters:
				ns carried by your	cable system on a substitute progran	Television
basis under specifc Fo	CC rules, regul	ations, or aut	horizations			
	•		st it in space I (the Special Staten	nent and Program Log)—if the	
station was carried	•		tation was carri	ed hoth on a subs	titute basis and also on some othe	
					of the general instructions located	
in the paper SA3 fo						
					es such as HBO, ESPN, etc. Identify	
			•	•	ation. For example, report multi ch stream separately; for example	
WETA-simulcast).	v Z . Omiaioao	ou our no muc	or no roportou ii	r colamii i (not ca	on out of an object to one of the object to	
			-		ation for broadcasting over-the-air ir	
,	•		nannel 4 in Was	shington, D.C. This	s may be different from the channe	
on which your cable s Column 3: Indicate			station is a netw	ork station, an inc	dependent station, or a noncommercia	
					icast), "I" (for independent), "I-M	
					commercial educational multicast)	
For the meaning of the					the paper SA3 form ⁄es". If not, enter "No". For an ex	
planation of local serv			, (,,	•	
					, stating the basis on which you	
		-		•	ntering "LAC" if your cable syster	
carried the distant sta	•				I capacity ty payment because it is the subjec	
					ystem or an association representin	
					ary transmitter, enter the designa	
					other basis, enter "O." For a furthe	
					ted in the paper SA3 form Ity to which the station is licensed by the	
					th which the station is identifed	
Note: If you are utilizi	ng multiple cha	nnel line-ups	, use a separat	e space G for eac	h channel line-up.	
		CHANN	EL LINE-UP	AL		
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
						1
						ļ
						ĺ
						1
						ļ
			•			
						1
						ļ
		1				

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC	•	2021/1	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable	system during	the accountin	g period except	t (1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections	G
76.59(d)(2) and (4), 76 substitute program ba	6.61(e)(2) and sis, as explaine	(4), or 76.63 ed in the next	(referring to 76. paragraph	61(e)(2) and (4))];	and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
basis under specifc F0 • Do not list the station	CC rules, regul n here in space	ations, or aut G—but do lis	horizations		nent and Program Log)—if the	
basis. For further in	and also in sp nformation con	ace I, if the st			titute basis and also on some othe of the general instructions located	
	ch station's call	•		. •	es such as HBO, ESPN, etc. Identify ation. For example, report multi	
WETA-simulcast).			•	`	ch stream separately; for example	
on which your cable s	ystem carried t	he station			s may be different from the channe	
educational station, by (for independent multi For the meaning of the	y entering the lecast), "E" (for rese terms, see	etter "N" (for r noncommercia page (v) of th	network), "N-M" al educational), ne general instr	(for network multi or "E-M" (for nonductions located in	icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form	
planation of local serv	ice area, see p	age (v) of the	general instruc	ctions located in th	es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you	
carried the distant star	tion on a part-ti	me basis bed	cause of lack of	activated channe	ntering "LAC" if your cable syster I capacity ty payment because it is the subjec	
of a written agreemen the cable system and	t entered into o a primary trans	on or before J smitter or an a	une 30, 2009, b association repr	petween a cable s resenting the prim	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe	
explanation of these the Column 6: Give the	hree categories e location of ea	s, see page (\ ach station. F	v) of the genera or U.S. stations	I instructions local , list the communi	ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifed	
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AM		
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	IER OF CABLE SY	/STEM:			SYSTEM ID#	
SANTA ROSA			RATIVE. INC	_	2021/1	Name
PRIMARY TRANSMITT				<u> </u>		
In General: In space	G, identify ever	ry television s	tation (including	translator station	ns and low power television stations)	
		•	, ,	•	ed only on a part-time basis under	G
				•	rtain network programs [sections	
76.59(d)(2) and (4), 70 substitute program ba	` '` '	· /·	` •	61(e)(2) and (4))];	and (2) certain stations carried on a	Primary Transmitters:
				ns carried by your	cable system on a substitute progran	Television
basis under specifc Fo		-	-		, ,	
	•		st it in space I (the Special Staten	nent and Program Log)—if the	
station was carried	•		tation was carri	ed hoth on a subs	titute basis and also on some othe	
					of the general instructions located	
in the paper SA3 fo						
					es such as HBO, ESPN, etc. Identify	
			•	•	ation. For example, report multi ch stream separately; for example	
WETA-simulcast).	v Z . Omiaioao	ou our no muc	or no roportou ii	r colamii i (not ca	on out of an object to one of the object to	
			-		ation for broadcasting over-the-air ir	
its community of licens on which your cable s	•		nannel 4 in Was	shington, D.C. This	s may be different from the channe	
			station is a netw	ork station, an inc	dependent station, or a noncommercia	
					icast), "I" (for independent), "I-M	
					commercial educational multicast)	
For the meaning of the Column 4: If the st					tne paper SA3 form ∕es". If not, enter "No". For an ex	
planation of local serv			, (,,	•	
			•	•	, stating the basis on which you	
cable system carried t		-		•	ntering "LAC" if your cable syster	
	•				ty payment because it is the subjec	
					ystem or an association representin	
			-		ary transmitter, enter the designa	
					other basis, enter "O." For a furthe ted in the paper SA3 form	
					ty to which the station is licensed by the	
FCC. For Mexican or	Canadian stati	ons, if any, gi	ve the name of	the community wi	th which the station is identifed	
Note: If you are utilizing	ng multiple cha	nnel line-ups	, use a separat	e space G for eac	h channel line-up.	
		CHANN	EL LINE-UP	AN		
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
						1
						ļ
						1
			•			ļ
						J
			•			1
						1
						ļ
						1
						}
						ŀ
		1		İ	1	1

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable of FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during tions in effect of 6.61(e)(2) and sis, as explaine	the accountin n June 24, 19 (4), or 76.63 ad in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carri the carriage of ce 61(e)(2) and (4))]	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections; rand (2) certain stations carried on a	G Primary Transmitters:
basis under specifc F0	CC rules, regul	ations, or aut	horizations:		cable system on a substitute progran	Television
Do not list the station station was carried	•		st it in space I (1	the Special Stater	ment and Program Log)—if the	
• List the station here,	and also in spanformation cond	ace I, if the st			titute basis and also on some othe of the general instructions located	
		-			es such as HBO, ESPN, etc. Identify ation. For example, report multi	
WETA-simulcast).			·	`	ch stream separately; for example	
its community of licens on which your cable s	se. For exampl ystem carried t	e, WRC is Ch he station	nannel 4 in Was	shington, D.C. Thi	s may be different from the channe dependent station, or a noncommercia	
(for independent multi For the meaning of the Column 4: If the st	cast), "E" (for r ese terms, see tation is outside	oncommercia page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for none uctions located in "distant"), enter "Y	es". If not, enter "No". For an ex	
planation of local serv Column 5: If you h					, stating the basis on which you	
cable system carried to					ntering "LAC" if your cable syster I capacity	
					ty payment because it is the subjec ystem or an association representin	
_					ary transmitter, enter the designa	
					other basis, enter "O." For a furthe	
					ted in the paper SA3 form ity to which the station is licensed by the	
				•	th which the station is identifed	
Note: If you are utilizing	ng multiple cha		•	•	n cnannei 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)		
	TTOMBER	017111011		(II Biotaint)		
	I	I		i e		

LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#				
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name			
PRIMARY TRANSMITT	ERS: TELEVISI	ON							
carried by your cable : FCC rules and regulat	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a								
substitute program ba Substitute Basis \$				ns carried by your	cable system on a substitute progran	Transmitters: Television			
Do not list the station	basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis								
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.									
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example									
			-		ation for broadcasting over-the-air ir				
on which your cable s	ystem carried t	he station		0	s may be different from the channe dependent station, or a noncommercia				
(for independent multi For the meaning of the Column 4: If the st	cast), "E" (for r ese terms, see tation is outside	noncommercia page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for noncuctions located in "distant"), enter "Y	es". If not, enter "No". For an ex				
	ave entered "Y he distant stati	es" in columr on during the	n 4, you must co accounting per	omplete column 5 riod. Indicate by e	, stating the basis on which you ntering "LAC" if your cable syster				
For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the	sion of a distan t entered into o a primary trans simulcasts, als nree categories	t multicast str on or before J smitter or an a so enter "E". If s, see page (v	eam that is not une 30, 2009, b association repr f you carried the v) of the genera	subject to a royal petween a cable sees ting the prime channel on any of instructions located.	ty payment because it is the subjec ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form				
FCC. For Mexican or	Canadian statio	ons, if any, giv	ve the name of	the community wi	ty to which the station is licensed by the				
Note: If you are utilizing	ng multiple cha		•		n cnannei line-up.				
			EL LINE-UP	AP	I				
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
	NUMBER	STATION		(If Distant)					
						,			

SANTA ROSA TELEPHONE COOPERATIVE, INC. PRIMARY TRANSMITTES: "TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under 76.556((2)) and (4), 76.56((2)) and (4), 67.65((2)) and (4), 67.65((2)	LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs jeseution: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Substitute program basis, as explained in the next paragraph basis under specific FCC rules, regulations, or authorizations: - Do not list the station here, and also in space I, if the station was carried by your cable system on a substitute program basis. For further information concerning substitute basis stations and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, well-air its community of license, For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station. Column 5: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 5: If the station is outside the local service area, see page (v) of the general instructions located in t	SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name
Garried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.58(d)(2) and (4), 76.61(e)(2) and (4), 76.61(PRIMARY TRANSMITT	ERS: TELEVISION	ON				
basis under specifc FCC rules, regulations, or authorizations * Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis * List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1:* List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream asociated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2:* Give the channel number the FCC has assigned to the television station for broadcasting over-the-air it its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station. **Column 3:* Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form **Column 4:* If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form **Column 5:* If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period, Indicate by entering "AC" if you	carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba	system during to ions in effect of 3.61(e)(2) and of sis, as explaine	the accountin n June 24, 19 (4), or 76.63 ad in the next	g period except 981, permitting (referring to 76. paragraph	t (1) stations carri the carriage of ce 61(e)(2) and (4))]	ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	Primary Transmitters:
*List the station was carried only on a substitute basis *List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-S". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air it its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational multicast), "E" (for noncommercial educational noncommercial educational multicast), "E" (for noncommercial educational noncommercial educational multicast), "E" (for noncommercial ed	basis under specifc F0	CC rules, regula	ations, or aut	horizations:		,	Television
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (V) of the general instructions located in the pager SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir lits community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station or a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a writt		•		st it in space I (1	the Special Stater	ment and Program Log)—If the	
each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categorie	 List the station here, basis. For further in 	and also in spanformation cond	ace I, if the st				
WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, (i.e. volumn 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identifed Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL SIGN CH			-			•	
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is identifed Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL SIGN 2. B'CAST 3. TYPE 4. DISTANT?	WETA-simulcast).			·	`		
(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION	its community of licens on which your cable s	se. For exampl ystem carried t	e, WRC is Ch he station	nannel 4 in Was	shington, D.C. Thi	s may be different from the channe	
Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CARRIAGE	(for independent multi For the meaning of the Column 4: If the st	cast), "E" (for n ese terms, see ation is outside	oncommercian page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for none uctions located in "distant"), enter "\	commercial educational multicast) the paper SA3 form Yes". If not, enter "No". For an ex	
cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL SIGN 2. B'CAST CHANNEL 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CARRIAGE							
of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE	cable system carried to carried the distant state	he distant stati tion on a part-ti	on during the me basis bed	accounting per cause of lack of	riod. Indicate by e activated channe	ntering "LAC" if your cable syster I capacity	
the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE							
explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE	the cable system and	a primary trans	smitter or an a	association repr	esenting the prim	ary transmitter, enter the designa	
Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CHANNEL OF CYES OF NO) CARRIAGE							
Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AQ 1. CALL 2. B'CAST SIGN 2. B'CAST CHANNEL 3. TYPE 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE							
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION CARRIAGE					•		
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION	Note: II you are utilizir	ng mulupie cha		•	•	n channel line-up.	
SIGN CHANNEL OF (Yes or No) CARRIAGE							
						6. LOCATION OF STATION	
	SIGN		-	,			
		HOMBER	017111011		(II Biotaint)		
							,
							,

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#				
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC	•	2021/1	Name			
PRIMARY TRANSMITT	ERS: TELEVISION	ON							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program									
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis: • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air ir its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of unum 4; our must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC"									
Note: If you are utilizing		nnel line-ups	, use a separate	e space G for eac	th which the station is identifed h channel line-up.	_			
	T	CHANN	EL LINE-UP	AR		_			
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	ER OF CABLE SY	STEM:			SYSTEM ID#		
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name	
PRIMARY TRANSMITT	ERS: TELEVISI	ON					
carried by your cable s FCC rules and regulat	system during ions in effect o	the accountin n June 24, 19	g period except 981, permitting	t (1) stations carrie the carriage of ce	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections g and (2) certain stations carried on a	G Primary	
substitute program bas Substitute Basis S				ns carried by your	cable system on a substitute progran	Transmitters: Television	
	here in space	G—but do lis		the Special Stater	nent and Program Log)—if thເ		
station was carried only on a substitute basis • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.							
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example							
WETA-simulcast). Column 2: Give the	e channel num	ber the FCC	has assigned to	o the television sta	ation for broadcasting over-the-air ir		
on which your cable sy	ystem carried t	he station		5	s may be different from the channe dependent station, or a noncommercia		
(for independent multi- For the meaning of the Column 4: If the st	cast), "E" (for r ese terms, see ation is outside	noncommercia page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for none uctions located in "distant"), enter "\	es". If not, enter "No". For an ex		
	ave entered "Y	'es" in columr	n 4, you must co	omplete column 5	ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable syster		
	sion of a distan	t multicast str	eam that is not	subject to a royal	I capacity ty payment because it is the subjec ystem or an association representin		
the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	a primary trans simulcasts, als nree categories e location of ea	smitter or an a so enter "E". It s, see page (v ach station. F	association repr f you carried the r) of the genera or U.S. stations	resenting the prime channel on any of the channel on any of the channel on any of the community of the commu	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the		
Note: If you are utilizing				•	th which the station is identifed h channel line-up.		
		CHANN	EL LINE-UP	AS			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION		(If Distant)			
					·		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#				
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC		2021/1	Name			
PRIMARY TRANSMITT	ERS: TELEVISI	ON							
carried by your cable s FCC rules and regulat	system during ions in effect o	the accountin n June 24, 19	g period except 981, permitting	t (1) stations carrie the carriage of ce	as and low power television stations) ed only on a part-time basis under rtain network programs [sections and (2) certain stations carried on a	G Primary			
	bstitute program basis, as explained in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute progran								
 basis under specifc F0 Do not list the station station was carried 	here in space	G—but do lis		the Special Stater	nent and Program Log)—if the				
• List the station here,	and also in sp formation con	ace I, if the st			titute basis and also on some othe of the general instructions located				
Column 1: List each multicast stream	ch station's call associated wit	th a station ac	cording to its o	ver-the-air design	es such as HBO, ESPN, etc. Identify ation. For example, report multi ch stream separately; for example				
			-		ation for broadcasting over-the-air ir				
on which your cable s	ystem carried t	he station		0	s may be different from the channe dependent station, or a noncommercia				
(for independent multi For the meaning of the Column 4: If the st	cast), "E" (for r ese terms, see ation is outside	noncommercia page (v) of the the local ser	al educational), ne general instr vice area, (i.e.	or "E-M" (for noncuctions located in "distant"), enter "\	es". If not, enter "No". For an ex				
	ave entered "Y he distant stati	es" in columr on during the	n 4, you must co accounting per	omplete column 5 riod. Indicate by e	, stating the basis on which you ntering "LAC" if your cable syster				
For the retransmiss of a written agreementhe cable system and tion "E" (exempt). For	sion of a distan t entered into o a primary trans simulcasts, als	t multicast str on or before J smitter or an a so enter "E". It	ream that is not une 30, 2009, b association repr f you carried the	subject to a royal petween a cable sees the prime channel on any e	ty payment because it is the subjec ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form				
Column 6: Give the	e location of ea Canadian statio	ach station. Fo	or U.S. stations we the name of	, list the communi the community wi	ty to which the station is licensed by the th which the station is identifed				
		CHANN	EL LINE-UP	AT					
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				
	NOWBER	STATION		(II Distant)					
					·				

R OF CABLE SY	STEM:			SYSTEM ID#			
		RATIVE, INC	<u>-</u>	2021/1	Name		
RS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph							
C rules, regular here in space only on a substand also in spatformation concern. In station's call associated with 2". Simulcast sechannel number of the case we entering the least), "E" (for no se terms, see particular staticular on on a part-tiron of a distant entered into a primary transistimulcasts, also ree categories e location of ea anadian statio	ations, or aut G—but do listitute basis ace I, if the st perning subst sign. Do not h a station ac streams mus ber the FCC e, WRC is Ch ne station whether the se page (v) of the the local set age (v) of the ses" in column on during the me basis bec i multicast str n or before J mitter or an a o enter "E". It i, see page (v och station. F ons, if any, gir	horizations: st it in space I (I tation was carried itute basis station report origination coording to its of st be reported in that assigned to the annel 4 in Was station is a network), "N-M" all educational), the general instruction at the accounting per cause of lack of ream that is not tune 30, 2009, but association report you carried the yof the general or U.S. stations we the name of	the Special Statened both on a substons, see page (v) on program service ver-the-air designation of the television states as thington, D.C. This vork station, an independent of the television states of the television states as thington, D.C. This vork station, an independent of the television states of the television st	nent and Program Log)—if the citute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify ation. For example, report multi ch stream separately; for example tion for broadcasting over-the-air ir is may be different from the channe dependent station, or a noncommercia cast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form es". If not, enter "No". For an ex the paper SA3 form stating the basis on which you ntering "LAC" if your cable syster capacity ty payment because it is the subject ystem or an association representin any transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form ty to which the station is identified	Television		
	•	•	•	'			
2. B'CAST CHANNEL NUMBER	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	RS: TELEVISION, identify every yetem during to consin effect on 61(e)(2) and (is, as explained tations: With C rules, regular here in space only on a substand also in space only on a substand also in space on the consideration of the consideration of the consideration of a distant entered into on a part-tion of a distant entered into on a primary transimulcasts, also ree categories location of each anadian static growth and the consideration of the consideration of a distant entered into on a primary transimulcasts, also ree categories location of each anadian static growth and the consideration of the consideratio	RS: TELEVISION i, identify every television is system during the accounting one in effect on June 24, 19, 61(e)(2) and (4), or 76.63 is, as explained in the next tations: With respect to an C rules, regulations, or authere in space G—but do liberal of the inspace I, if the stromation concerning substime in station's call sign. Do not associated with a station and also in space I, if the stromation concerning substime. In station's call sign. Do not associated with a station and acceptance in each case whether the stem carried the station in each case whether the stem carried the station in each case whether the stem terring the letter "N" (for last), "E" (for noncommerciate terms, see page (v) of the late acceptance in a country transmitter or an approximate distant station during the long on a part-time basis become of a distant multicast strentered into on or before Juprimary transmitter or an approximate in the location of each station. Financian stations, if any, ging multiple channel line-ups CHANN RS: TELEVISION i, identify every television station (including yetem during the accounting period exceptions in effect on June 24, 1981, permitting 161(e)(2) and (4), or 76.63 (referring to 76. is, as explained in the next paragraph tations: With respect to any distant station C rules, regulations, or authorizations: here in space G—but do list it in space I (ionly on a substitute basis and also in space I, if the station was carried formation concerning substitute basis station. In station's call sign. Do not report origination associated with a station according to its or 2". Simulcast streams must be reported in channel number the FCC has assigned to e. For example, WRC is Channel 4 in Was stem carried the station in each case whether the station is a netwentering the letter "N" (for network), "N-M" ast), "E" (for noncommercial educational), set erms, see page (v) of the general instruction is outside the local service area, (i.e. area, see page (v) of the general instruction is outside the local service area, (i.e. area, see page (v) of the general instruction on a part-time basis because of lack of on of a distant multicast stream that is not entered into on or before June 30, 2009, to primary transmitter or an association reprimulcasts, also enter "E". If you carried the rec categories, see page (v) of the general location of each station. For U.S. stations anadian stations, if any, give the name of genultiple channel line-ups, use a separate CHANNEL LINE-UP	RS: TELEVISION In identify every television station (including translator station system during the accounting period except (1) stations carried ons in effect on June 24, 1981, permitting the carriage of cer .61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; is, as explained in the next paragraph tations: With respect to any distant stations carried by your C rules, regulations, or authorizations: here in space G—but do list it in space I (the Special Statentonly on a substitute basis and also in space I, if the station was carried both on a substiture of the station's call sign. Do not report origination program service associated with a station according to its over-the-air design. 2". Simulcast streams must be reported in column 1 (list each channel number the FCC has assigned to the television state. For example, WRC is Channel 4 in Washington, D.C. This stem carried the station in each case whether the station is a network station, an incentering the letter "N" (for network), "N-M" (for network multi ast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educational) in each case whether the station is a network station, an incentering the letter "N" (for network), "N-M" (for network multi ast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educational) in each case whether the station is a network station located in the one on a part-time basis because of lack of activated channel on on of a distant multicast stream that is not subject to a royal entered "Yes" in column 4, you must complete column 5, are distant station during the accounting period. Indicate by elementer of the distant multicast stream that is not subject to a royal entered into on or before June 30, 2009, between a cable syle primary transmitter or an association representing the primary transmitter or an association representing the primary transmitter or an association representing the primary transmitt	RS: TELEVISION In identify every television station (including translator stations and low power television stations) ystem during the accounting period except (1) stations carried only on a part-time basis under the stations in effect on June 24, 1981, permitting the carriage of certain network programs [sections of 1(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sexplained in the next paragraph tations: With respect to any distant stations carried by your cable system on a substitute program to rules, regulations, or authorizations. Here in space 6—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis and also in space I, if the station was carried both on a substitute basis and also on some othe formation concerning substitute basis stations, see page (v) of the general instructions located m. In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multical carried the station according to its over-the-air designation. For example, report multical carried the station in each case whether the station is a network station, an independent station, or a noncommercial energing the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M ast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) see terms, see page (v) of the general instructions located in the paper SA3 form to enter the station of the general instructions located in the paper SA3 form to enter "Yes". If not, enter "No". For an exist earns, see page (v) of the general instructions located in the paper SA3 form to a part-time basis because of lack of activated channel capacity on on a part-time basis because of lack of activated channel capacity on on a part-time basis because of lack of activated channel capacity on on a part-time basis because of lack of			

LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	
SANTA ROSA	TELEPHON	E COOPER	RATIVE. INC	_	2021/1	Name
PRIMARY TRANSMITT				<u> </u>		
In General: In space	G, identify ever	ry television s	tation (including	translator station	ns and low power television stations)	
		•	, ,	•	ed only on a part-time basis under	G
				•	rtain network programs [sections	
76.59(d)(2) and (4), 7 substitute program ba	` '\ '	· /·	,	61(e)(2) and (4))];	; and (2) certain stations carried on ε	Primary Transmitters:
				ns carried by your	cable system on a substitute progran	Television
basis under specifc F		-	-	, ,	, , , , , , , , , , , , , , , , , , , ,	
	•		st it in space I (t	the Special Staten	nent and Program Log)—if thલ	
station was carried			tation was carrie	ad both on a subs	titute basis and also on some othe	
					of the general instructions located	
in the paper SA3 fo	orm.	· ·		,		
					es such as HBO, ESPN, etc. Identify	
			•	•	ation. For example, report multi ch stream separately; for example	
WETA-simulcast).	1-2 . Simulcasi	Sucams mus	st be reported if	i coluitiii i (iist ea	chi stream separatery, for example	
	e channel num	ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
	•		nannel 4 in Was	shington, D.C. This	s may be different from the channe	
on which your cable s			station is a netw	ork station an inc	dependent station, or a noncommercia	
					icast), "I" (for independent), "I-M	
(for independent multi	cast), "E" (for r	noncommercia	al educational),	or "E-M" (for none	commercial educational multicast)	
For the meaning of the						
planation of local serv			, ,	,,	es". If not, enter "No". For an ex	
					, stating the basis on which you	
•			•	•	ntering "LAC" if your cable syster	
carried the distant sta	•				•	
					ty payment because it is the subjec ystem or an association representin	
					ary transmitter, enter the designa	
T			-		other basis, enter "O." For a furthe	
					ted in the paper SA3 form	
					ty to which the station is licensed by the the which the station is identifed	
Note: If you are utilizi				•		
,	-		EL LINE-UP	<u> </u>	·	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION	
CION	NUMBER	STATION	` ,	(If Distant)		
				(
			•			
	***************************************	***************************************				
		ļ				

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM I				
SANTA ROSA	TELEPHON	E COOPER	RATIVE, INC	-	2021	1/1 Name			
PRIMARY TRANSMITT	ERS: TELEVISI	ON							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program									
basis under specifc F0	asis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the								
basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA" WETA-simulcast). Column 2: Give the its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multifor the meaning of the Column 4: If the stiplanation of local serve Column 5: If you heable system carried the distant state For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	and also in sp nformation con- orm. ch station's call associated with A-2". Simulcast e channel num se. For exampl ystem carried to e in each case y entering the li- cast), "E" (for rese terms, see lation is outside ice area, see plave entered "Ye he distant station of a distant tion on a part-tission of a distant tentered into coaprimary trans- simulcasts, also ree categories e location of ea Canadian station	ace I, if the stocerning substocerning substocerning substocerning substocerning substocerning. Do not the a station accommendation whether the station whether the station whether the station accommendation of the concommendation of the station of the station of the station or before Justices station or before Justices station. Figure 1 and	report origination report origination coording to its of the reported in that assigned to the that assigned to the that as assigned to the that as assigned to the that as a return the that as a counting per that as of the that as a counting per that as of the that as a counting per that as of the that as of the that as a counting per that as of the that as a counting per that as of the that as of the that as a counting per that as of the that as of the that as of the that as a counting per that as of the that as of the that as a counting per that as of the that as a counting per that as of the that as a counting that a co	ons, see page (v) on program service over-the-air design of column 1 (list ear of the television state shington, D.C. This over station, an ince (for network multion "E-M" (for none cuctions located in the ordicate of the television state in "distant"), enter "N ordicate olumn 5 riod. Indicate by e activated channe subject to a royal overween a cable so resenting the prime of channel on any of instructions locate in the community wi ordicate ordicat	Yes". If not, enter "No". For an ex the paper SA3 form a stating the basis on which you netering "LAC" if your cable system acapacity the payment because it is the subject system or an association representing any transmitter, enter the designation of the basis, enter "O." For a furthe seed in the paper SA3 form the towhich the station is licensed by the the which the station is identified.				
,			EL LINE-UP	•	<u> </u>	-			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

ACCOUNTING PERIOD: 2021/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

LEGAL NAME OF OWNER OF CA			, INC.		S	YSTEM ID# 2021/1	Name
SUBSTITUTE CARRIAGE: In General: In space I, identify substitute basis during the acccexplanation of the programming form.	every non ounting pe	nnetwork televis	sion program broadcast by a cific present and former FC	a distant statio C rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMENT (CONCER	MINC CLIDS	TITLITE CARRIACE				Carriage:
During the accounting perior				sis anv noni	network television progr	am	Special
broadcast by a distant statio		ii cabic system	ir carry, or a substitute ba	oio, arry riorii		XNo	Statement and Program Log
Note: If your answer is "No,"	leave the	rest of this pa	ge blank. If your answer is	s "Yes," you ı			og.a <u>Log</u>
log in block 2.				. ,	, , ,		
In General: List each substitute clear. If you need more space Column 1: Give the title of period, was broadcast by a distribution of the certain FCC rules, regularly safety. SA3 form for futher information titles, for example, "I Love Luc Column 2: If the program Column 3: Give the call sig Column 4: Give the broad the case of Mexican or Canana Column 5: Give the month first. Example: for May 7 give Column 6: State the times to the nearest five minutes. Estated as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules and gram was substituted for progeffect on October 19, 1976.	e, please of every notistant statulations, con. Do not con. Statulation and day "5/7." swhen the example: a "R" if the diregulati	attach addition innetwork televion and that your authorization to use general BA Basketball: dcast live, entrestation broadcon's location (fons, if any, the when your sy the substitute program carrollisted program carrons in effect d	nal pages. vision program (substitute our cable system substitute our cable system substitut ns. See page (vi) of the ge categories like "movies", 76ers vs. Bulls." er "Yes." Otherwise enter asting the substitute program the community to which the community with which the stem carried the substitute ogram was carried by you ried by a system from 6:01 n was substituted for prog uring the accounting perio	program) thated for the presental instructor "basketbal" "No." ram. e station is lide program. U r cable systed::15 p.m. to 6 ramming thated; enter the	at, during the accounting ogramming of another stions located in the pap ". List specific program censed by the FCC or, identified). se numerals, with the mm. List the times accurate 2:28:30 p.m. should be to your system was required the time of the program in the listed programming the system was required.	g etation er in nonth ately	
				WHE	EN SUBSTITUTE	<u> </u>	
SUE	STITUT	E PROGRAM			IAGE OCCURRED	7. REASON FOR	
I I. IIILE OF PROGRAM I	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
					_		

ACCOUNTING PERIOD: 2021/1 FORM SA3E, PAGE 6.

ACCOUNTING	LINIOD. 2021/1							TORK	TOAGE. TAGE 0.
Name		OWNER OF CABL	E SYSTEM: DNE COOPERA	TIVE, INC.					**************************************
J Part-Time Carriage Log	In General: The time carriage de hours your system of Column 1 (Column 5 of space Column 2 (Edured during the Give the month "4/10." • State the start television static "app." Example	ue to lack of act tem carried that Call sign): Give ace G. Dates and hour he accounting pth and day when ting and ending on's broadcast de: "12:30 a.m.—3	with column 5 of spa ivated channel capa station. If you need the call sign of ever s of carriage): For eriod. In the carriage occur times of carriage to lay, you may give ar	acity, you are recommore space, ple y distant station each station, list red. Use numerathe nearest quant approximate er	the als, v	ed to complete the attach additional ose basis of carridates and hours with the month fill hour. In any casing hour, followed	is log giving the all pages. age you identiful the swhen part-time arst. Example: for e where carriage by the abbrevial all pages.	e total dates and lied by "LAC" in e carriage oc- or April 10 give ge ran to the end of the	he
			DATES	S AND HOURS (OF F	PART-TIME CAF	RRIAGE		
		\\/\LEN	I CARRIAGE OCCI	IDDED			١٨/١١	L CARRIAGE OCCI	IDDED
	CALL SIGN	VVIIEI	N CARRIAGE OCCU HOU			CALL SIGN	VVNCI	N CARRIAGE OCCU HOUF	
		DATE	FROM	ТО			DATE	FROM	ТО
			<u> </u>						
								<u> </u>	
								<u> </u>	
			<u> </u>						
			_					_	
			_					_	
			_					_	
			_					_	
			_					_	
			_					_	
			_					_	
			_					_	
			_						

LEGA	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
SA	NTA ROSA TELEPHONE COOPERATIVE, INC.		2021/1	Nume
Inst all a (as	OSS RECEIPTS ructions: The figure you give in this space determines the form you file and the amount imounts (gross receipts) paid to your cable system by subscribers for the system's secon identified in space E) during the accounting period. For a further explanation of how to coe (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	dary transmission s	service	K Gross Receipts
IMP	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amount of gro	655,679.01 ess receipts)	
• Con • Con • If you fee • If you acco	CRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: Inplete block 1, showing your minimum fee. Inplete block 2, showing whether your system carried any distant television stations. In system did not carry any distant television stations, leave block 3 blank. Enter the amount of block 1 on line 1 of block 4, and calculate the total royalty fee. Four system did carry any distant television stations, you must complete the applicable part of paralying this form and attach the schedule to your statement of account. Fart 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be sk 3 below.	ts of the DSE Scheo	dule	L Copyright Royalty Fee
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be er elow.	ntered on line 2 in b	lock	
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be entered on line	e	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	is 1.064 percent of	the	
	Line 1. Enter the amount of gross receipts from space K. Line 2. Multiply the amount in line 1 by 0.01064. Enter the result here.	\$	655,679.01	
	This is your minimum fee.	\$	6,976.42	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the i space G. If, in space G, you identified 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. No—Leave block 3 below blank and column the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television stations during the accounting period in the column television station station television stations during the accounting period in the column television station television station television station television station television station television station television television station television tele	n 4, you must check	(
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero.	\$	5,544.67	
	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.	\$	5,544.67	
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.	_\$	6,976.42	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter		0.00	submitting additional
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$	725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	7,701.42	appropriate form for submitting the additional fees.
	EFT Trace # or TRANSACTION ID #			addidollal lees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions ta		ion.)	

ACCOUNTING PERIOD: 2021/1 FORM SA3E, PAGE 8

					FORIVI SASE, FAGE 6.						
Name	SANTA ROSA		EM: COOPERATIVE, INC.		SYSTEM ID# 2021/1						
M Channels	to its subscribe	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									
	on which the	cable system c	vated channels ried television broadcast stations		222						
N Individual to											
Be Contacted for Further Information											
	VE	ber, street, rural r	ie, apartment, or suite number)								
	(City,	town, state, zip)	le@santarosafiber.com	Fax (optional)							
0	CERTIFICATION	√ (This stateme	of account must be certified and signed in	accordance with Copyright Office regula	ations.)						
Certification		-	on or partnership) I am the owner of the cab		or						
			orporation or partnership) I am the duly au at the owner is not a corporation or partnersh		stem as identified						
	in line 1	of space B.	fficer (if a corporation) or a partner (if a partn								
		ete, and correct	f account and hereby declare under penalty the best of my knowledge, information, and I		herein						
	F	X	/s/ Jason Tole								
		(e.g., /s/	ectronic signature on the line above using an " hn Smith). Before entering the first forward sla n type /s/ and your name. Pressing the "F2" bu	sh of the /s/ signature, place your cursor in the							
		Typed o	printed name: /s/ Jason Tole								
		Title:	ASSISTANT GM / CCFO	ship)							
		Date:	ugust 26, 2021								

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the 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 telephonumbers. 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 search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law

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

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the 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 filing, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that the second of the se	

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

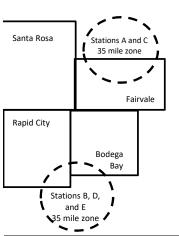
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



Distant Stations Carr	ied	Identification	Identification of Subscriber Groups					
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS				
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS				
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00				
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00				
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00				
E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00				
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00				

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6,384.00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

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

ACCOUNTING PERIOD: 2021/1

DSE SCHEDULE. PAGE	11. (CONTINUED)					
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. SYSTEM ID# 2021/1					
I I						
	SUM OF DSEs OF CATEGORY "O" STATIONS:					
	 Add the DSEs of each station 					
	Enter the sum here and in line 1 of part 5 of this schedule.				6.00	
	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).	for each indens	andent station, give the DSE	as "1 0": for e	ach network or noncom.	
of DSEs for	mercial educational station, give the DSE as ".25."					
Category "O"						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	KFDX-NBC	0.250	KAUZ-CBS	0.250	KSWO-ABC	0.250
	KJTL-FOX	1.000	KJBO-MY TV	1.000	KSWO-TELEM	1.000
	KAUZ-CW	1.000	KTXS-CW	0.250	KTAB-TELEM	1.000
Add rows as						
necessary. Remember to copy all						
formula into new						
rows.						
ı	I	l		I	lul	k

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1 Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). 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. Computation of DSEs for 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 Stations be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. **Carried Part** Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, Time Due to 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 Lack of Activated third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper Channel SA3 form. Capacity CATEGORY LAC STATIONS: COMPUTATION OF DSEs 3. NUMBER 2. NUMBER 4. BASIS OF 5. TYPE 6. DSE 1. CALL SIGN OF HOURS OF HOURS **CARRIAGE** VALUE **CARRIED BY VALUE** STATION SYSTEM ON AIR SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. 0.00 Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: 4 Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Computation • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of of DSEs for Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted Substituteat your option. This figure should correspond with the information in space I. **Basis Stations** Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 3. NUMBER 4. DSE 1. CALL 2. NUMBER 3. NUMBER 4. DSE SIGN OF OF DAYS OF DAYS SIGN OF **PROGRAMS** IN YEAR **PROGRAMS** IN YEAR SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. 0.00 Enter the sum here and in line 3 of part 5 of this schedule, TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total 5 number of DSEs applicable to your system. 1. Number of DSEs from part 2 ● 6.00 **Total Number** 0.00 of DSFs Number of DSEs from part 3 ● 0.00 3. Number of DSEs from part 4 ● 6.00 TOTAL NUMBER OF DSEs

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2021/1

SANTA ROSA	OWNER OF CABLE		ATIVE, INC.				S	YSTEM ID# 2021/1	Name
In block A: • If your answer if schedule.	ck A must be com "Yes," leave the re	emainder of p	below.			nd complete pa	art 8, (page 16) of	the	6
			BLOCK A: T	ELEVISION M	ARKETS				Computation of 3.75 Fee
effect on June 24, Yes—Com	plete part 8 of the plete blocks B and List the call signs under FCC rules instructions for the	schedule—[C below. BLOC s of distant st and regulation DSE Schedule—[C below.]	CK B: CARR ations listed in ons prior to Jui	PLETE THE REMANDED IN THE REMA	AINDER OF F MITTED DS f this schedule urther explana	PART 6 AND 7 SEs e that your systion of permitt	tem was permitted ed stations, see the	d to carry	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rt. A Stations carrivation of the first state of the fir	oriate letter in ules and regued pursuant on as defined all educations of station (76. or DSE schedant to individuously carried).	dicating the ba lations cited be to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag lule). ual waiver of F ed on a part-tin vithin grade-B o	sis on which you on elow pertain to tho rket quota rules [7 (6.59(d)(1), 76.61(d), 76. (9(c), 76.61(d), 76. (raph regarding su CC rules (76.7) (ne or substitute ba contour, [76.59(d)(ose in effect or (6.57, 76.59(b e)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 198), 76.61(b)(c), 1) referring to 7 g to 76.61(d)] randfathered s	76.63(a) referring 6.61(e)(1) stations in the		
Column 3:	List the DSE for those this schedule to the control of the control	e stations ide	ntified by the le	n parts 2, 3, and 4 etter "F" in column	of the schedu 2, you must o	ile. complete the v	vorksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
								0.00	
		В	LOCK C: CO	MPUTATION O	F 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule					
Line 2: Enter the	sum of permitte	ed DSEs from	m block B abo	ove			11-		
	line 2 from line 1 leave lines 4–7 b			•		rate.	11		
Line 4: Enter gro	oss receipts from	space K (p	age 7)				× 0.03	375	Do any of the DSEs represent
Line 5: Multiply I	ine 4 by 0.0375	and enter s	um here						partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3				X		carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (nage 7)			0.00	

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

Name	2021/1					ATIVE, INC.	COUPERA	TELEPHONE	ANTA KUSA
			UED)	(CONTIN	ION MARKETS	A: TELEVIS	BLOCK		
6	3. DSE	2. PERMITTED BASIS		3. DSE	2. PERMITTED BASIS		3. DSE	2. PERMITTED BASIS	1. CALL SIGN
Computation 3.75 Fee									

ACCOUNTING PERIOD: 2021/1

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1 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 Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Computating 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. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE PERIOD CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	655,679.01	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is any	// portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.	_	
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE .	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name			YSTEM ID# 2021/1
		DARTA RODA TELEFITORE GOOF ERATIVE, INC.	_V_ 1/ 1
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$	
Surcharge		C. Multiply line B by 3.000 and enter here.	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here▶	
		F. Multiply line D by line E and enter here	<u> </u>
		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	
	Instru	ctions:	
8	You m	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of par	t
		checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation	• If you	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	If you blank	ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo	W
Dase Nate i ee		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		X Yes—Complete part 9 of this schedule.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section	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,"	
	0 "	use the total number of DSEs from part 5.)	_
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank.	
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	<u> </u>
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	_
		E. Add lines A and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	0.00

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

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2021/1

	AME OF OWNER OF CABLE SYSTEM: A ROSA TELEPHONE COOPERATIVE, INC. 2021/1	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 (the amount in section 1) ▶ \$	
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$	Computation of
	C. Multiply line B by 3.000 and enter here	Base Rate Fee
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) ▶ \$	
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here▶	
	F. Multiply line D by line E and enter here \$	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7)	
	Base Rate Fee	
shall in	ETANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-Space G.	9
•	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	of
		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. : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Exclusivity Surcharge
•	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
must a	Is any portion of your cable system is located within the top 100 television market and the station is not example in part 7, you liso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. er, if your cable system is wholly located outside all major television markets, complete block A only.	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 to that community.	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by	
	ne token, the station is distant to the subscriber.) Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
subscri	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.	
subscri	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
	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.	
	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 4 o	of this schedule; or, portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B,	
•	6 of this schedule.	
	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions paper SA3 form.	
page.	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show	

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

your actual calculations on the form.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 2021/1 SANTA ROSA TELEPHONE COOPERATIVE, INC. Guidance for Computing the Royalty Fee for Partially Permitted/Partially Nonpermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

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

LEGAL NAME OF OWNE SANTA ROSA TEL			, INC.			S	YSTEM ID# 2021/1	Name
Bl	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA	WICHIT	ΓA FALLS, TX		COMMUNITY/ ARE	A ABILEN	IE, TX		9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE		of
CALL SIGN	DOL	CALL SIGN	DOL	KTXS-CW		KTAB-TELEI	1.00	Base Rate Fe
								and
		-						Syndicated
								Exclusivity
								Surcharge
		-						for
								Partially
								Distant
		-						Stations
			···					
	<u> </u>							
		-						
								
Total DSEs			0.00	Total DSEs			1.25	
Gross Receipts First Gr	oup	\$ 230	,568.06	Gross Receipts Sec	ond Group	\$ 2	21,818.04	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	2,748.88	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	MUND			COMMUNITY/ ARE				
CALL SIGN	Dec	CALL SIGN	Dec	CALLSION	Dec	II CALL SICAL	Dec	
CALL SIGN KFDX-NBC	DSE	CALL SIGN KAUZ-CBS	0.25	CALL SIGN	DSE	CALL SIGN	DSE	
	.	H						
KSWO-ABC		KJBO-MY T	1.00					
KJTL-FOX		KAUZ-CW	1.00					
KSWO-TELEM	1.00							
		-						
	•	-						
	†			***************************************				
	•	-						
Total DSEs	1	Ш	4.75	Total DSEs		П	0.00	
Gross Receipts Third G	iroup	s 81	,880.06	Gross Receipts Fou	rth Group	s 1	21,412.85	
C. 355 T. Goodpia Tillid G		, 01	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Signal Recorpts Fou	Стоир	- 1.		
Base Rate Fee Third G	roup	\$ 2	,795.79	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th			riber group	as shown in the boxe	s above.		5 544 07	
Enter here and in block	3, line 1,	space L (page 7)				\$	5,544.67	

Name	2021/1							
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
0	Р	SUBSCRIBER GROU	SIXTH		JP	SUBSCRIBER GRO	FIFTH	
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	562	CALLE GIGIT	DOL	CALL STORY	562	CALL SIGH	DOL	Of ILL SIGIT
and						-		
Syndicate								
Exclusivi								
Surcharg								
for								
Partially								
Distant								
Stations						-		
						-		
						-		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	¢.	Croun	Cross Possints Sasans	ስ ስስ	¢.	oun	Proce Descripto First Cr.
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	Bross Receipts First Gr
	0.00	\$		Gross Receipts Second Base Rate Fee Second	0.00	\$		
	0.00		Group		0.00		oup	Base Rate Fee First Gro
	0.00	\$	Group		0.00	\$	oup	3ase Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro S COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Sase Rate Fee First Green Sommunity/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Sase Rate Fee First Green Sommunity/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Sase Rate Fee First Green Sommunity/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro S COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Base Rate Fee First Gro S COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Sase Rate Fee First Green Sommunity/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup EVENTH	Sase Rate Fee First Gro
	0.00 P DSE	\$ SUBSCRIBER GROU	Group EIGHTH DSE	Base Rate Fee Second COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROI	DSE	Sase Rate Fee First Gro
	0.00 P	SUBSCRIBER GROU CALL SIGN	Group EIGHTH DSE	CALL SIGN CALL SIGN Total DSEs	0.00 JP OSE	SUBSCRIBER GROU	DSE	Base Rate Fee First Green Science Scie

LEGAL NAME OF OWNE SANTA ROSA TEL			E, INC.			S	2021/1	Name
Bl	OCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	NINTH	SUBSCRIBER GRO	DUP		TENTH	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computed
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	Base Rate
								and
						·		Syndicate
		-				·		Exclusivi
		-						Surcharg
								for
								Partially
								Distant
								Stations
							2.00	
otal DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First G	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
El	EVENTH	SUBSCRIBER GRO	DUP		TWELVTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
		-						
							•	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add th	e base rat	e fees for each subs	scriber group	as shown in the boxes	s above.			
nter here and in block						\$		

Name	STEM ID# 2021/1	0.			-,	E COOPERATIVE		SANTA ROSA TEL
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
^	Р	SUBSCRIBER GROU	RTEENTH	FOU	JP	SUBSCRIBER GRO	RTEENTH	THIR
9 Commutati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicate						-	-	
Exclusivit						-	-	
Surcharge						-	-	
for								
Partially						= 1111111111111111111111111111111111111		
Distant						-		
Stations								
	0.00			Total DSEs	0.00			Γotal DSEs
					0.00	•		D
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Fross Receipts First Gr
	0.00	\$		Gross Receipts Secon	0.00	\$		
	0.00		l Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second SI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	oup	FIF COMMUNITY/ AREA CALL SIGN
	0.00 P DSE	\$ SUBSCRIBER GROU	d Group XTEENTH DSE	Base Rate Fee Second SI COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	\$ SUBSCRIBER GRO	DSE	Base Rate Fee First Gr FIF COMMUNITY/ AREA

Name	STEM ID# 2021/1	31			.,			SANTA ROSA TEL
				TE FEES FOR EACH				
9	P 0	SUBSCRIBER GROU	HIEENTH	EIG COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	ILENTH	SEVEN COMMUNITY/ AREA
Computati								
of Base Rate I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicate								
Exclusivit								
Surcharg								
for								
Partially								
Distant								
Stations								
						H		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00		•	•				•
	0.00		·	·				·
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second		\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr
	0.00		l Group	Base Rate Fee Second			oup	Base Rate Fee First Gr
	0.00		l Group	Base Rate Fee Second	JP		oup	3ase Rate Fee First Gr
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	d Group	Base Rate Fee Second TW COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup	NIN COMMUNITY/ AREA CALL SIGN
	0.00 P DSE	SUBSCRIBER GROU	d Group /ENTIETH DSE	Base Rate Fee Second TW COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	OUP ITEENTH DSE	Base Rate Fee First Gr NIN COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU CALL SIGN	d Group /ENTIETH DSE	TW COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE	CALL SIGN	OUP ITEENTH DSE	NIN COMMUNITY/ AREA CALL SIGN Total DSEs

Name	STEM ID# 2021/1	31			i, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
Ω	Р	SUBSCRIBER GROU	SECOND	TI .		SUBSCRIBER GRO	Y-FIRST	
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I	562	O/ ILLE OIOIT	DOL	CALLE GIGIT	562	O/ ILL SIGN	562	O'ALL GIGIT
and						-		
Syndicate						= 1111111111111111111111111111111111111		
Exclusivit								
Surcharg								
for								
Partially							-	
Distant						-		
Stations						-	-	
						-		
						-		
	<u> </u>							
	0.00		<u> </u>	Total DSEs	0.00			Total DSEs
	0.00	-			0.00	¢.		
	0.00	¢ .	Croun	Cross Dossinta Cosona				
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	BIOSS Receipts Filst Gi
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Green TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Gre TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	Base Rate Fee First Green TWENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second TWENTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup Y-THIRD	TWENT COMMUNITY/ AREA CALL SIGN
	0.00 P DSE	\$ SUBSCRIBER GROU	FOURTH	Base Rate Fee Second TWENTY COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GRO	OUP Y-THIRD DSE	TWENT COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 P	SUBSCRIBER GROU CALL SIGN	FOURTH	Total DSEs	0.00	SUBSCRIBER GRO	OUP Y-THIRD DSE	Base Rate Fee First Green TWENT

9 Computation	IP	BER GROUP						
Computation	<u> </u>	SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GRO		
<u> </u>	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivit								
Surcharg for								
Partially								
Distant Stations								
Stations								
_								
-	0.00			Total DSEs	0.00			Γotal DSEs
<u>-</u>	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	3ase Rate Fee First G
		SUBSCRIBER GROL	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
<u></u>	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
\dashv	0.00			T.A.I DOS	0.00			T. 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
-	0.00	•	Cro	Total DSEs	0.00	•	`ro.u-	Total DSEs
-	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	ioup	Gross Receipts Third G
T	0.00		Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

Name	YSTEM ID# 2021/1	31			i, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
	ID	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
9	0	SUBSCRIBER GROU	IKIEIN	COMMUNITY/ AREA	0	SUBSCRIBER GROU	T-INIIN I I	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate								
Exclusivit								
Surcharg for								
Partially		-					-	
Distant								
Stations						-		
							-	
							-	
	0.00			Total DSEs	0.00			Total DSEs
					0.00			B
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	Fross Receipts First Gr
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		Group	Base Rate Fee Second	0.00		oup	Base Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00 JP 0	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	THIRT COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROU	Group	THIRTY COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee First Gre THIRT

EGAL NAME OF OWNE			E, INC.			S	YSTEM ID# 2021/1	Name
		COMPUTATION OF SUBSCRIBER GRO		THIR		RIBER GROUP SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		- 1111111111111111111111111111111111111						Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge for
								Partially
		-				,		Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	RTY-FIFTH	SUBSCRIBER GRO		†		SUBSCRIBER GROU	_	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				,		
						-		
		-						
						,		
Fotal DSFo			0.00	Total DCFs			0.00	
Total DSEs Gross Receipts Third (Group	•			rth Group	e		
oross neceibis milla (σισαρ	Ψ	J.00	Oross Receipts Fou	ι ι ι Οιυαρ	Ψ	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
\$ 0.00 G	\$ 0.00 \$ 0.00 B e fees for each subscriber group as	0.00 G	B		rth Group	\$ \$	0.00	

Name	STEM ID# 2021/1	31			i, INC.		LFIION	SANTA ROSA TEL
	P	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and Syndicate								
Exclusivit						-	-	
Surcharg								
for								
Partially Distant								
Stations						-		
		•						
	0.00			Total DSEs	0.00			Γotal DSEs
		\$		Gross Receipts Second	0.00	\$	0110	Gross Receipts First Gr
	0.00	<u>*</u>	Group	Gross Receipts Second		<u> </u>	oup	orosa receipta i irat Or
					0.00			
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00		l Group	Base Rate Fee Second	JP		oup	3ase Rate Fee First Gro
	0.00	\$	l Group	Base Rate Fee Second		\$	oup	Base Rate Fee First Gro
	0.00	\$	l Group	Base Rate Fee Second	JP	\$	oup	3ase Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gre THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group ORTIETH	Base Rate Fee Second F COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	THIRT COMMUNITY/ AREA CALL SIGN
	0.00 P DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Second F COMMUNITY/ AREA CALL SIGN	JP 0	\$ SUBSCRIBER GROU	DSE	Base Rate Fee First Gre THIRT

9					., 1140.	E COOPERATIVE	LFIION	DAILIA KOOA IEE
_	IP	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROUND		
	0	OODOO! (IDE!) OROO	- OLOGIND	COMMUNITY/ AREA	0	- COBCONIBLIN CINCO	11-11101	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and Syndicate								
Exclusivit								
Surcharg for								
Partially								
Distant Stations								
- Otations								
						-		
-								
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First G
<u> </u>		SUBSCRIBER GROL	-FOURTH			SUBSCRIBER GRO	TY-THIRD	
	COMMUNITY/ AREA0			0		COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		-						
		-						
_	0.00				2.22			
	0.00		0	Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	<u>\$</u>	roup	Gross Receipts Third G
	ı			i i	1	i .		

	YSTEM ID# 2021/1	S'			, INC.			LEGAL NAME OF OWNE SANTA ROSA TEL
_	IP .	BER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GRO		
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F			-					
and Syndicate								
Exclusivit								
Surcharge for								
Partially							···	
Distant Stations								
Otations								
		-						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	_	SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GRO	SEVENTH	
	COMMUNITY/ AREA			0		OMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		-						
	0.00			Total DSEs	0.00			
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWNE SANTA ROSA TE			E, INC.			S	YSTEM ID# 2021/1	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	A		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fo
								and Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant Stations
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	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	
	TY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO	_	
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 Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	· 	,			·	1.		
Base Rate Fee: Add the Inter here and in block			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OW SANTA ROSA T		LE SYSTEM: E COOPERATIV	E, INC.			S	YSTEM ID# 2021/1	Name
F		COMPUTATION C		TE FEES FOR EAC		RIBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ ARE.			0	COMMUNITY/ ARE			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fo
								and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant Stations
								Stations
Γotal DSEs		-	0.00	Total DSEs	Total DSEs 0.00			
Gross Receipts Firs	t 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						
COMMUNITY/ ARE.		0	COMMUNITY/ AREA0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
Fotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
•	•				•			
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
e. Add	the hase ra t	te fees for each sub	scriber group	as shown in the boxe	es above			
nter here and in blo			sonoei group	as shown in the boxe	o abuve.	\$		

OF CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate and Syndicate Exclusivi Surcharg for Partially Distant Stations	SANTA ROSA TELEPHO	BLE SYSTEM: NE COOPERATIV	E, INC.			•	2021/1	Name
O COMMUNITY/ AREA O O OF SE CALL SIGN DSE CALL SIGN DSE DSE SECOND GROUP O COMMUNITY/ AREA O				П				
Computation of Bases CALL SIGN DSE CALL SIGN		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO		۵
CALL SIGN DSE CALL SIGN	COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	_
Base Rate and Syndicate Exclusivi Surchare for Partially Distant Stations 1 0.00 \$ 0.00 \$ 0.00 \$ 0.00 Base Rate Fee Second Group \$ 0.00 S 0.00 Base Rate Fee Second Group SIXTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA COM	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Syndicate Exclusivity Surcharg for Partially Distant Stations								Base Rate
Partially Distant Stations								and
Surcharg for Partially Distant Stations O.00								
Total DSEs O.00 S O.00 Base Rate Fee Second Group SIXTIETH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE DSE CAL								
Partially Distant Stations O.00								_
Stations Statio		-				=		
O.00 S O.00 Gross Receipts Second Group S O.00 S O.00 Base Rate Fee Second Group S O.00 SIXTIETH SUBSCRIBER GROUP COMMUNITY/AREA O O.00 O.00 O.00 O.00 O.00 O.00 O.00 O								Distant
\$ 0.00 Second Group Second Gro						_		Stations
\$ 0.00 Second Group Second Gro								
\$ 0.00 S 0.00								
\$ 0.00 Second Group Second Gro								
\$ 0.00 Second Group Second Gro								
\$ 0.00 Second Group Second Gro								
\$ 0.00 Base Rate Fee Second Group \$ 0.00 NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O OSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	otal DSEs		0.00	Total DSEs			0.00	
NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA	Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA								
O COMMUNITY/ AREA O SE CALL SIGN DSE CALL SI	Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE		SUBSCRIBER GRO				SUBSCRIBER GRO	_	
	MMUNITY/ AREA		0	COMMUNITY/ AREA 0				
	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
0.00 Total DSEs 0.00						_		
0.00 Total DSEs 0.00								
	otal DSEs		0.00	Total DSEs			0.00	
n 6 000 Cross Bossints Fourth Court		•			rth Cro	•		
p \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third Group	>	0.00	Gross Receipts Fou	ıın Group	*	0.00	
Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

LEGAL NAME OF OWNI SANTA ROSA TE			Æ, INC.			S	2021/1	Name
В	LOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCE	RIBER GROUP		
	TY-FIRST	SUBSCRIBER GRO		ii e		SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DOL	Base Rate
		-				-		and
		-						Syndicate
								Exclusivit
								Surcharg
		_						for
								Partially
		-						Distant
		-						Stations
						.		
otal DSEs			0.00	Total DSEs		I	0.00	
Gross Receipts First G	croup	<u> </u>	0.00	Gross Receipts Sec	and Group	¢	0.00	
iloss Receipts Filst C	iroup	\$	0.00	Gloss Receipts Sect	ona Group	\$	0.00	
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GRO	OUP	SIX	TY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	_							
Base Rate Fee Third (∍roup	\$	0.00	Base Rate Fee Four	πn Group	\$	0.00	
ase Rate Fee: Add to inter here and in bloc			scriber group	as shown in the boxe	s above.	\$		
	-,	' (L~20)				-		

Name	2021/1				E, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
	10			TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	TY-SIXTH	COMMUNITY/ AREA	<u>UP</u> 0	SUBSCRIBER GRO	TY-FIFTH	SIX COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DOL	OALL GIGIN	DOL	OALE GION	DOL	CALL GIGIT	DOL	OALL GIGIT
and Syndicate								
Exclusivit								
Surcharg								
for Partially								
Distant								
Stations								
							-	
		•						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
								SIXTY-S
	JP			SIXT	UP			SIXTY-S
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-C
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-C
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-C
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-C
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-C
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-C
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-C
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROI	SEVENTH	SIXTY-SCOMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROU	Y-EIGHTH DSE	SIXT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROI	DSE	SIXTY-C

Name	YSTEM ID# 2021/1	3			E, INC.	E COOPERATIVE		LEGAL NAME OF OWNE SANTA ROSA TEL
	ID.			TE FEES FOR EACH				
9	<u>JP</u>	SUBSCRIBER GROU	/ENTIETH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	I Y-NIN I H	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivit								
Surcharge for								
Partially								
Distant								
Stations								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROL		SEVENT	JP	\$ SUBSCRIBER GROU		SEVEN'
								SEVEN'
	JP			SEVENT	JP			SEVEN COMMUNITY/ AREA CALL SIGN
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN'
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	SEVEN COMMUNITY/ AREA CALL SIGN
	DSE	SUBSCRIBER GROU	-SECOND DSE	SEVENTY COMMUNITY/ AREA CALL SIGN	JP O DSE	SUBSCRIBER GROU	DSE	SEVEN'

O Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 O.00 O.00	BER GROUP SUBSCRIBER GROU			, INC.			LEGAL NAME OF OWNE SANTA ROSA TEL
Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 ROUP 0	CALL SICN		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ROUP 0	CALLSION		COMMUNITY/ AREA	0			COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ROUP	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ROUP 0							
Surcharge for Partially Distant Stations 0.00 0.00 0.00 ROUP							
O.00 O.00 ROUP O							
Partially Distant Stations 0.00 0.00 0.00 ROUP 0							
0.00 0.00 0.00							
0.00 0.00 0.00 ROUP							
0.00 0.00 ROUP							
0.00 0.00 ROUP							
0.00 0.00 ROUP							
0.00 0.00 ROUP							
0.00 0.00 ROUP							
0.00 ROUP			Total DSEs	0.00			otal DSEs
ROUP 0	\$	d Group	Gross Receipts Secon	0.00	\$	roup	iross Receipts First G
0	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First G
	SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
DSE			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
0.00			Total DSFs	0.00			atal DSEs
0.00			Total DSEs	0.00			otal DSEs
0.00		Group	Gross Receipts Fourth	0.00	¢	roun	Proce Receipte Third C
0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

LEGAL NAME OF OWN			E, INC.			S	2021/1	Name
SEVENTY	-SEVENTH	COMPUTATION OF SUBSCRIBER GRO	UP	†i	NTY-EIGHTH	RIBER GROUP SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
						,		Surcharge for
		-				-		Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	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						
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
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 bloo			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1								
		COMPUTATION OF SUBSCRIBER GRC		TE FEES FOR EACH		RIBER GROUP SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	
σ						<u> </u>		
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
EIG COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	EIGH COMMUNITY/ ARE				
COMMONT I/ AREA				COMMONT I/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						·		
		-						
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1									
		COMPUTATION OF		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	OMMUNITY/ AREA 0			COMMUNITY/ AREA				9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of	
								Base Rate Fe	
								and Syndicated	
		-						Exclusivity	
								Surcharge for	
								Partially	
								Distant Stations	
						,,		Stations	
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
3ase Rate Fee First G	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	SEVENTH	SUBSCRIBER GRO		T .		SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	OMMUNITY/ 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	iroun	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Cross receipts Tilliu C	oup	*	3.00	S1000 Receipts 1 0u	.a. Gloup	<u>*</u>			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
		te fees for each subs	criber group	as shown in the boxe	es above.	\$			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1								
	JP	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF			
9	0			COMMUNITY/ AREA	0	OMMUNITY/ AREA 0			
Computation of	DSE	CALL SIGN	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rate F			-						
and Syndicate									
Exclusivit									
Surcharge for						- 1111111111111111111111111111111111111			
Partially		-				-			
Distant Stations									
Otations			-			-			
						-			
			_						
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First G	
	IP	SUBSCRIBER GROU	-SECOND		UP	SUBSCRIBER GRO	TY-FIRST		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
						-			
					1		···		
	••••		-						
						-			
	0.00			Total DSEs	0.00			Fotal DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1								
		COMPUTATION O		TE FEES FOR EAC		RIBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	OMMUNITY/ AREA 0			COMMUNITY/ ARE	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of		
								Base Rate F
								and Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant Stations
		-				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	- 1					·		
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00	
NIN COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	NINETY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
COMMUNITY AREA			U	COMMUNITY ARE				
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	
ase Rate Fee Third	Group the base rat	\$	0.00		rth Group	\$		

CALL SIGN DSE SALL SIGN DSE CALL SIGN DSE CA		00:1	201401171717171	- DAGE - :	TE FEED = 6 = - : :		NDED 656:		
CALL SIGN DSE CA					П				
CALL SIGN DSE		<u>,∟v⊆NIH</u>	SUBSURIDER GRU						
Base Rate Fee Third Group CALL SIGN DSE SUBSTANCE SUBS	CWINIONIT I/ AREA			U	COMMONT I/ AREA				Compu
Sase Rate Fee Third 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 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CAL	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	0
otal DSEs otal DSEs otal DSEs OLOO Total DSEs OLOO Gross Receipts First Group Some Rate Fee First Group NINETY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DS									Base Ra
Solution DSEs Outside DSEs O									an
Substance of the state of the s									Syndic
Atal DSEs			 						Exclus
Alal DSEs O.00 Oross Receipts First Group S O.00 Oross Receipts Second Group S O.00 Oross Receipts Second Group S O.00 Oross Receipts Second Group S O.00 OR HUNDREDTH SUBSCRIBER GROUP OMMUNITY/ AREA O OCMMUNITY/ AREA O OCMUNITY/ AREA O OCMUNITY/ AREA O OCMUNITY/ A			H						Surch
Alal DSEs O.00 Order DSE Second Group SO.00 ININETY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE			H						fo
tal DSEs									Partia
tal DSEs			 						Dista Statio
See Rate Fee First Group See Rate Fee Fourth Group			H						Static
See Rate Fee First Group S 0.00 ININETY-NINTH SUBSCRIBER GROUP DIMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DS			H						
Asse Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Base Rat									
Asse Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 Base Rat		1							
Asse Rate Fee First Group South Discourse Receipts Fourth Group									
Assert Receipts First Group sould be asserted fees for each subscriber group as shown in the boxes above.									
Asse Rate Fee First Group South Discourse Receipts First Group South Discourse Receipts First Group South Discourse Receipts Second Group South Discourse Receipts First Group South Discourse Receipts First Group South Discourse Receipts Fourth Gr	otal DSEs	_		0.00	Total DSEs		_	0.00	
Asse Rate Fee First Group NINETY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE C	roog Possints First C	roup	•	0.00	Cross Bossints Soc	and Croup	¢	0.00	
NINETY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	loss Receipts Filst Gi	oup	3	0.00	Gloss Receipts Sec	ond Group	3	0.00	
NINETY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE CALL SIGN D									
OMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN D SE CALL	ase Rate Fee First G	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
OMMUNITY/ AREA O COMMUNITY/ ARE	NINE	TY-NINTH	SUBSCRIBER GRO	UP	ONE H	IUNDREDTH	SUBSCRIBER GRO	UP	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN			0020011122110110		T .				
total DSEs O.00 Total DSEs O.00 Gross Receipts Third Group S O.00 Base Rate Fee Third Group S O.00 Base Rate Fee Fourth Group S O.00	· · · · · · · · · · · · · · · · · · ·								
otal DSEs O.00 Total DSEs O.00 Gross Receipts Third Group S O.00 Base Rate Fee Third Group S O.00 Base Rate Fee Fourth Group S O.00 O.00 S O.00 O.00 S O.00 S O.00 S O.00 O.00 S O.00 O.	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00			H						
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00			 						
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00			<u> </u>						
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00			H						
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		1	H						
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	ntal DSFs			0.00	Total DSEs			0.00	
ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	otal DOLO		•		Gross Pacainta Faur	rth Group	•		
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.		roun	Ψ	0.00	O1033 Medelpts FOU	iai Gioup	Ψ	0.00	
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.		Group					1		
	Gross Receipts Third G	·							
	ross Receipts Third G	·	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
	oss Receipts Third G	·	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
ter here and in block 3, line 1, space L (page 7)	oss Receipts Third G	Group					\$	0.00	

Name	EGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1								
				TE FEES FOR EACH					
9	ONE HUNDRED SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0					SUBSCRIBER GRO	D FIRST	ONE HUNDRE COMMUNITY/ AREA	
Computati	0		COMMUNITY/ AREA	0	WUNITY AREA				
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate									
and									
Syndicate						=			
Exclusivi						-			
Surcharg for						-			
Partially									
Distant						-			
Stations						-	-		
							ļ		
	0.00			Total DSEs	0.00			Total DSEs	
	0.00				0.00	\$	oup	Gross Receipts First Gr	
	0.00	\$	Groun	Usings Receipts Second					
	0.00	\$	Group	Gross Receipts Second		<u>·</u>	oup		
	0.00	\$		Base Rate Fee Second	0.00	\$			
	0.00		Group	Base Rate Fee Second			oup	Base Rate Fee First Gro	
	0.00	\$	Group	Base Rate Fee Second		\$	oup	3ase Rate Fee First Gro	
	0.00	\$	Group	Base Rate Fee Second	JP	\$	oup	3ase Rate Fee First Gro	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	Base Rate Fee First Green ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE	
	0.00 P	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE COMMUNITY/ AREA CALL SIGN	
	0.00 P Ose	\$ SUBSCRIBER GROU	Group FOURTH DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP 0	\$ SUBSCRIBER GRO	D THIRD DSE	ONE HUNDRE	

Computatio	UP	BER GROUP	OLIDOOD		LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1								
Computatio	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP												
of	COMMUNITY/ AREA 0				0	OMMUNITY/ AREA 0							
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
Base Rate F													
Syndicated													
Exclusivity													
Surcharge for													
Partially													
Distant Stations													
	0.00			Total DSEs	0.00			Total DSEs					
-	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G					
- 		•	а отоар	Greec receipts codes			Гоцр	orodo ridodipio rilide d					
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G					
		SUBSCRIBER GROL	D EIGHTH			SUBSCRIBER GRO	SEVENTH						
, 	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA					
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
		-											
						-							
						-							
		-											
						-							
_	0.00			Total DSEs	0.00			Total DSEs					
_	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G					
-,	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G					

LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1									
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		SUBSCRIBER GRO	UP	9	
COMMUNITY/ AREA	OMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
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	
						,,		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		Ħ		SUBSCRIBER GRO	UP		
COMMUNITY/ AREA	<i>A</i>		0	COMMUNITY/ ARE					
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		
	_ - up	·		3.555 (Goolpto) Ou	Сточр	*			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
. 6.4.1	the barrer	to food for an ile or t	aribe = = :::	an above in the t	o obc::-				
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	s above.	\$			

LEGAL NAME OF OWN SANTA ROSA TE			E, INC.			S	2021/1	Name
		COMPUTATION OF SUBSCRIBER GRO		ONE HUNDRED FO		SUBSCRIBER GRO	UP	•
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
								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	
Cross rescapto r not	огоар	<u>*</u>		Cross rescripts ess	ona Oroap	•		
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED F		SUBSCRIBER GRO	UP 0	ONE HUNDRED COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	
COMMONT I/ AREA				COMMONTT/ ARE	~			
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 bloo			criber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWN SANTA ROSA TE			E, INC.			S	2021/1	Name
E ONE HUNDRED SEVI				ONE HUNDRED E		RIBER GROUP SUBSCRIBER GRO	UP	
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				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
							2.55	
Total DSEs	Croun	•	0.00	Total DSEs	rth Craun	•	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ıııı Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add to Enter here and in blood			criber group	as shown in the boxe	s above.	\$		

E								
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		ii .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicat
								Exclusiv
						 		Surcharg
								for
								Partially
		-						Distant Stations
		-						Stations
		H				·		
		H						
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First	Group	\$	0.00	Gross Receipts Sec	and Group	\$	0.00	
roos resolpto i mot	эгоир	<u> </u>		Cross rescipts ess	ona Oroup	*		
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROU	IP	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP)	
OMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	Dec	
							DSE	
		l I					DSE	
							DSE	
							DSE	
							DSE	
							DSE	
							Doe	
							Doe	
							DSE	
							DSE	
							Doe	
							Doe	
							DSE	
							Doe	
							DSE	
otal DSEs			0.00	Total DSEs			0.00	
	Group	\$	0.00	Total DSEs Gross Receipts Fou	th Group	\$		
otal DSEs Gross Receipts Third	Group	\$			th Group	\$	0.00	
Gross Receipts Third	·		0.00	Gross Receipts Fou			0.00	
	·	\$				\$	0.00	
ross Receipts Third	·		0.00	Gross Receipts Fou			0.00	
ross Receipts Third ase Rate Fee Third	Group	\$	0.00	Gross Receipts Fou	th Group		0.00	

Name	YSTEM ID# 2021/1	S			E, INC.			LEGAL NAME OF OWNER SANTA ROSA TEL
		IBER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH				BLONE HUNDRED TWEN
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
Syndicate								
Exclusivit Surcharg								
for						-		
Partially							-	
Distant Stations								
						-	-	
	0.00			Total DSEs	0.00			Total DSEs
				Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	l Group	Gross Neceipts Secon				
	0.00	\$		Base Rate Fee Second	0.00	\$		Base Rate Fee First Gro
	0.00	\$	I Group	Base Rate Fee Second)		oup	NE HUNDRED TWENTY-
		\$	I Group	Base Rate Fee Second			oup	NE HUNDRED TWENTY-
	0.00	\$	I Group	Base Rate Fee Second)		oup	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	Base Rate Fee First Gro NE HUNDRED TWENTY- COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	NE HUNDRED TWENTY-
	0.00	\$ SUBSCRIBER GROUP	l Group Y-EIGHTH	DASE RATE FEE SECONO ONE HUNDRED TWENT COMMUNITY/ AREA	0	SUBSCRIBER GROUP	SEVENTH	CALL SIGN
	0.00	\$ SUBSCRIBER GROUP	Teleghth DSE	Dase Rate Fee Second ONE HUNDRED TWENT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP	DSE DSE	NE HUNDRED TWENTY-

B								
				TE FEES FOR EAC				
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROU		Ti .		SUBSCRIBER GROUP		ç
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Comp
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Oompt
								Base R
								ar
								Syndi
								Exclu
								Surch
		-						fo
								Parti Dist
								Stati
		-				-		
						Ш		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROU					_	
		CODOCINDER CITOC		T .		SUBSCRIBER GROUP		
OMMUNITY/ AREA			0	COMMUNITY/ AREA		SUBSCRIBER GROUP	0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE	CALL SIGN		T .		SUBSCRIBER GROUF CALL SIGN		
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
	DSE		0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE		0	COMMUNITY/ AREA	Α		0	
CALL SIGN			DSE	CALL SIGN	DSE		DSE	
		CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE 0.00	
CALL SIGN CALL SIGN otal DSEs iross Receipts Third	Group	CALL SIGN	0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Foul	DSE	CALL SIGN	0 DSE 0.00 0.00	
CALL SIGN	Group	CALL SIGN	0 DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE 0.00	
tal DSEs	Group	CALL SIGN	0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Foul	DSE	CALL SIGN	0 DSE 0.00 0.00	
otal DSEs ross Receipts Third	Group	CALL SIGN	0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Foul	DSE The Group	CALL SIGN	0 DSE 0.00 0.00	

LEGAL NAME OF OWI			E, INC.			S	2021/1	Name
				ATE FEES FOR EAG				
		SUBSCRIBER GROU	1P 0			SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA			U	COMMUNITY/ ARE	Α		U	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	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GROU		i i		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
							<u> </u>	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Paga Pata Fran Add	tho bee :	to food for an in a site	oribor e	on about in the barre	a abeva			
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE			, INC.			S	2021/1	Name
Bl	_OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
ONE HUNDRED THIRTY				III		SUBSCRIBER GROUP)	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
		-				,		for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED THIS	RTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						 		
		-						
			<u> </u>			П		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	•				•			
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		
		-Face E (page 1)				T		

Name	YSTEM ID# 2021/1	3			E, INC.		R OF CABL EPHONI	SANTA ROSA TEL
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
9	0	SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED FORT	0	SUBSCRIBER GROUP	RTY-FIRST	ONE HUNDRED FOR COMMUNITY/ AREA
Computation				COMMONITY AREA				COMMUNITY AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivity						-		
Surcharge								
for Partially								
Distant						-		
Stations								
						-		
		-						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	3ase Rate Fee First Gr
		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED FOR)	SUBSCRIBER GROUP	TY-THIRD	ONE HUNDRED FOR
		COMMUNITY/ AREA 0		1				
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	O DSE	CALL SIGN	DSE	COMMUNITY/ AREA
		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
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN		CALL SIGN	DSE	CALL SIGN		

Name	YSTEM ID# 2021/1	S			E, INC.			LEGAL NAME OF OWNE SANTA ROSA TEL
		BER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH		COMPUTATION O		
9	0	SUBSCRIBER GROUP	KIT-SIXIT	COMMUNITY/ AREA	0	SUBSCRIBER GROU	KIT-FIFIT	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivit								
Surcharge for								
Partially						-		
Distant Stations								
Stations								
						-		

	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	_	SUBSCRIBER GROUP	TY-EIGHTH			SUBSCRIBER GROU	-SEVENTH	ONE HUNDRED FORTY
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

SANTA ROSA TE			E, INC.			S	2021/1	Name
B ONE HUNDRED FOR				TE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		Syndicated
								Exclusivity Surcharge
						-		for
								Partially Distant
						-		Stations
						,		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 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	
	TY-FIRST	SUBSCRIBER GRO		T		SUBSCRIBER GROU		
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 the Enter here and in block			criber group	as shown in the boxe	s above.	¢		

LEGAL NAME OF OWNER SANTA ROSA TEL			, INC.			S	YSTEM ID# 2021/1	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP	-	
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-FOURTH	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 Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	Y-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FI	FTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						 -		
		=						
		-				-		
		-						
							·····	
		-						
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	oun.	•	0.00	Gross Receipts Fourth	n Group	•	0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourti	i Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

Name	2021/1	S			E, INC.	E SYSTEM: E COOPERATIVI		SANTA ROSA TEI
				TE FEES FOR EACH				
9	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FIF	0	SUBSCRIBER GROUI	-SEVENTH	ONE HUNDRED FIFTY COMMUNITY/ AREA
Computation								
of Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicate						-		
Exclusivity Surcharge								
for								
Partially						-		
Distant Stations								
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROUP	SIXTIETH	ONE HUNDRE)	SUBSCRIBER GROU	TY-NINTH	ONE HUNDRED FI
	COMMUNITY/ AREA 0		0			COMMUNITY/ AREA		
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE		DOL					
	DSE		DOL					
	DSE		DOL					
	DSE		<i>DOL</i>					
	DSE		BOL					
	DSE		DOC					
	DSE		DOC					
	DSE							
	DSE							
	DSE							
	DSE							
	DSE							
	0.00_			Total DSEs	0.00			Total DSEs
		\$		Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWNE			2021/1	Name				
BI				TE FEES FOR EACH				
		SUBSCRIBER GRO)UP			SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA	WICHI	ΓA FALLS, TX		COMMUNITY/ AREA	ABILEN	IE, TX		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
		H						Syndicated
		H						Exclusivity
		 						Surcharge
		-						for
		-						Partially
		-						Distant
		-						Stations
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 230),568.06	Gross Receipts Secon	nd Group	s 2	21,818.04	
·	·	_			·			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	MUND	AY, TX		COMMUNITY/ AREA	AMARI	LLO, TX		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
		-						
		-						
						.		
	<mark></mark>	-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$ 81	,880.06	Gross Receipts Fourth	n Group	\$ 1	21,412.85	
Pena Deta For This I C	Seatter.		0.00	Bose Bets For For W	Organi		0.00	
Base Rate Fee Third C	ooup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
			criber group	as shown in the boxes	above.	\$	0.00	
Enter here and in block			3· - «P			\$	0.00	

		ABLE SYSTEM: SYSTEM ID# ONE COOPERATIVE, INC. 2021/1						
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DSL	CALL SIGN	DSL	Base Rate
					····			and
						··		Syndicate
			···			"		Exclusivi
								Surcharg
								for
								Partially
						 		Distant
								Stations
			ļ					
otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
S	EVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	h							
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
,								
·				II				
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	

	AL NAME OF OWNER OF CABLE SYSTEM: NTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1							
		COMPUTATION O		TE FEES FOR EAG		RIBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant Stations
								Otations
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO	_	
COMMUNITY/ ARE.	Α		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 Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
·	·							
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
d the	base ra	te fees for each subs	scriber group	as shown in the boxe	es above.			
inter here and in blo			J 1			\$		

Name	SYSTEM ID# SA TELEPHONE COOPERATIVE, INC. SYSTEM ID# 2021/1							
	IP	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GRO		
9	0	SOBSCITIBLIN GROC	IXILLINIII	COMMUNITY/ AREA	0	30B3CNBER GRO	XILLINIII	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
Syndicate								
Exclusivit								
Surcharge for								
Partially								
Distant Stations								
		-						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP 0	SUBSCRIBER GROU	XTEENTH			SUBSCRIBER GRO	FTEENTH	FII COMMUNITY/ AREA
	U			COMMUNITY/ AREA	0			JUMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
						-		
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G

	VINER OF CABLE SYSTEM: SYSTEM ID# FELEPHONE COOPERATIVE, INC. 2021/1							Name
				TE FEES FOR EAC				
	NTEENTH	SUBSCRIBER GRO		H		SUBSCRIBER GRO	_	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate F
								and
	<u>"</u>	+				T		Syndicate
	<u>"</u>	-				·		Exclusivit
						"		Surcharge
		+						for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NII	NTEENTH	SUBSCRIBER GRO	OUP	1	TWENTIETH 1	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
	<u> </u>							
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Dogo Data Fan Think C	`rau-		0.00	Base Bets Fra 5	th C		0.00	
Base Rate Fee Third G	поир	\$	0.00	Base Rate Fee Four	uı Group	\$	0.00	
		-	11.					
Base Rate Fee: Add the inter here and in block			scriber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE SANTA ROSA TEL		OF CABLE SYSTEM: SYSTEM: SYSTEM: 24 PHONE COOPERATIVE, INC. 2						Name
Bl	OCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
TWEN	TY-FIRST	SUBSCRIBER GRO	OUP	TWENT	Y-SECOND	SUBSCRIBER GRO	UP	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	9 Commutati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computati of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	Base Rate I
								and
		-				+		Syndicate
		-				+		Exclusivit
	<u> </u>							Surcharge
		+						for
		+						Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
TWEN	TY-THIRD	SUBSCRIBER GRO	OUP	TWEN	ΓY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	•		0.00	Total DSEs	1		0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	¢	0.00	Base Rate Fee Four	th Group	¢	0.00	
Suse Nate i ee miid d	πουμ	\$	0.00	Dase Nate Fee Four	ar Group	\$	0.00	
Base Rate Fee: Add the Inter here and in block			scriber group	as shown in the boxes	s above.	\$		
Hore and in bioch	. J, III J I, S	pado L (page 1)				*		

Name	R OF CABLE SYSTEM: SYSTEM ID# EPHONE COOPERATIVE, INC. 2021/1							SANTA KUSA TEL
				TE FEES FOR EACH				
9	IP 0	SUBSCRIBER GROU	TY-SIXTH	TWEN COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	TY-FIFTH	TWENT
Computati	T DOE	L CALL CICAL	DCE	CALL CICAL	T per	CALL CICAL	I DOE I	CALL CION
of Base Rate	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicate								
Exclusivi						-	-	
Surcharg						-		
for							-	
Partially							-	
Distant							-	
Stations							-	
							-	
							-	
							-	
	***				†	-		
		•						
	0.00	1		Total DSEs	0.00			Γotal DSEs
					0.00	_		Proce Becaints First Cr
	0.00	\$	d Group	Gross Receipts Second	0.00	ss Receipts First Group \$ 0.00		sioss Receipts First Gr
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Jioss Receipts First Gr
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		l Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second TWENT	0.00 JP 0	\$ SUBSCRIBER GRO	oup	TWENTY-S COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROU	d Group	TWENT' COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GRO	DSE	Base Rate Fee First Gr TWENTY-S COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU CALL SIGN	d Group	TWENTY COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GRO CALL SIGN	DSE	TWENTY-S COMMUNITY/ AREA CALL SIGN

Name	BLE SYSTEM: SYSTEM ID# NE COOPERATIVE, INC. 2021/1						EPHONE	SANTA ROSA TEL
				TE FEES FOR EACH				
9	0	SUBSCRIBER GROU	HIRTIETH	COMMUNITY/ AREA	0	SUBSCRIBER GRO	Y-NIN I H	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and						-		
Syndicate							-	
Exclusivit						-	-	
Surcharg								
for								
Partially								
Distant								
Stations								
						=		
	0.00	_		Total DSEs	0.00			Total DSEs
					0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	l Group	Gross Receipts Second	0.00	· -	oup	
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		l Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRI COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00	\$ SUBSCRIBER GROU	I Group SECOND	Base Rate Fee Second THIRTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	THIRT COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROU	SECOND	THIRTY COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	\$ SUBSCRIBER GRO	DSE	Base Rate Fee First Gr THIRT

Name	2021/1	ABLE SYSTEM: SYSTE ONE COOPERATIVE, INC. 20						SANTA ROSA TEL
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-FOURTH	TI .		SUBSCRIBER GRO	Y-THIRD	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate							-	
Exclusivi								
Surcharg for							-	
Partially								
Distant		-					-	
Stations								
						-		
	0.00		1	Total DSEs	0.00			Total DSEs
	0.00	\$	l Group	Gross Receipts Second	0.00	ss Receipts First Group \$ 0.00		Bross Receipts First Gr
	0.00	\$	l Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$		Gross Receipts Second Base Rate Fee Second	0.00	\$		
	0.00		l Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	0.00 P	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr THIRT
	O.00 P Ose	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second THIR COMMUNITY/ AREA	0.00 JP O DSE	\$ SUBSCRIBER GRO	oup	THIRT COMMUNITY/ AREA CALL SIGN
	0.00 P	SUBSCRIBER GROU CALL SIGN	I Group TY-SIXTH DSE	THIR COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GRO	OUP TY-FIFTH DSE	THIRT COMMUNITY/ AREA CALL SIGN
	O.00 P Ose	\$ SUBSCRIBER GROU	I Group TY-SIXTH DSE	THIR COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	\$ SUBSCRIBER GRO	OUP TY-FIFTH DSE	Base Rate Fee First Gr THIRT

Name	R OF CABLE SYSTEM: EPHONE COOPERATIVE, INC. 2021/1							
	IP	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and Syndicate								
Exclusivit							-	
Surcharg								
for								
Partially Distant								
Stations							-	
						-		
	0.00			Total DSEs	0.00			Γotal DSEs
		¢	_	0	0.00	•		Cross Bossints Eirst Cr
	0.00	\$	Group	Gross Receipts Second		ss Receipts First Group \$ 0.00		31088 Necelpla Filal Gi
	0.00	•	Group	Gross Receipts Second		<u>*</u>	oup	Bross Neceipis Filst Gi
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00		Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gre THIRT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second F COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	oup	THIRT COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROU	DRTIETH DSE	Base Rate Fee Second F COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROU	OUP Y-NINTH DSE	Base Rate Fee First Gre THIRT

Name	WNER OF CABLE SYSTEM: TELEPHONE COOPERATIVE, INC. 2021/1							OANTA NOOM TEE
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	SECOND			SUBSCRIBER GROU	Y-FIRST	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	BOL	CALL GIGIT	DOL	CALL GIGIT	DOL	O/ LEE GIGIT	DOL	O/ILL GIGIT
and							-	
Syndicate								
Exclusivi								
Surcharg								
for								
Partially								
Distant								
Stations								
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oun	Gross Receipts First Gr
	0.00	-	Gloup			ss Receipts First Group \$ 0.00		
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second		\$ SUBSCRIBER GROU	oup	3ase Rate Fee First Gro
	0.00		Group	Base Rate Fee Second			oup	3ase Rate Fee First Gro
	0.00		Group	Base Rate Fee Second	JP		oup	3ase Rate Fee First Gro
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gro FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gro FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gre FORT
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gro FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gro FORT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU	Group	Base Rate Fee Second FORTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	oup Y-THIRD	FORT COMMUNITY/ AREA CALL SIGN
	O.00 P Ose	SUBSCRIBER GROU	FOURTH	FORTY COMMUNITY/ AREA CALL SIGN	DSE DSE O.000	SUBSCRIBER GROU	DSE	FORT COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 P	SUBSCRIBER GROU CALL SIGN	FOURTH	FORTY COMMUNITY/ AREA CALL SIGN Total DSEs	JP O DSE	CALL SIGN	DSE	Base Rate Fee First Gre FORT

	L NAME OF OWNER OF CABLE SYSTEM: TA ROSA TELEPHONE COOPERATIVE, INC. 2021/1							
		COMPUTATION O		TE FEES FOR EAC		RIBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fo
								and Syndicated
								Exclusivity
								Surcharge for
		-						Partially
								Distant Stations
								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		T .		SUBSCRIBER GRO	_	
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	
Total DSES Gross Receipts Third	Group	<u> </u>	0.00		rth Group	<u> </u>	0.00	
organization de la compresión de la comp	Огоар	*	0.00	S1000 Receipts 1.00	.a. Gloup	<u>*</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	\$ 0.00	0.00	ıp		rth Group	\$		

Name	YSTEM ID# 2021/1				-,	L COOI LIVATIVE		SANTA ROSA TEL
				TE FEES FOR EACH				
9	1P 0	SUBSCRIBER GROU	FIFTIETH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	Y-NINTH	FORT
Computati								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and						-		
Syndicate Exclusivit							-	
Surcharg for Partiall						-		
							-	
Distant						-		
Stations						-	-	
							-	
						=	-	
	0.00			Total DSEs	0.00			Γotal DSEs
		\$	Croun	Gross Receipts Second	0.00	\$	oun	Gross Receipts First Gr
	0.00	<u>*</u>	Group	Gross receipts decond			oup	
	0.00	<u>*</u>	Group	Oross Neceipts Second			oup	, ,
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		Group	Base Rate Fee Second		\$ SUBSCRIBER GROI	oup	3ase Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second		l	oup	3ase Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	JP	l	oup	3ase Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIF1 COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIF1 COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIF1 COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIF1
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIF1 COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIFT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIF1 COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second FIFTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green FIF1
	0.00 P	SUBSCRIBER GROU CALL SIGN	SECOND	FIFTY COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE O.000	SUBSCRIBER GROI	DSE	FIFT COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00	\$ SUBSCRIBER GROU	SECOND	Base Rate Fee Second FIFTY COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROI	DSE	FIFT COMMUNITY/ AREA CALL SIGN

Name	STEM ID# 2021/1	SY			, INC.	E COOPERATIVE	EPHONE	LEGAL NAME OF OWNER SANTA ROSA TEL
		BER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
0	Р	SUBSCRIBER GROU	FOURTH	FIFTY	JP	SUBSCRIBER GRO	Y-THIRD	FIFT
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN
and						-		
Syndicate						-	-	
Exclusivit						-	-	
Surcharg						-		
for						= 1111111111111111111111111111111111111	-	
Partially								
Distant								
Stations								
		•						
	0.00			Total DSEs	0.00			Total DSEs
				O D	0.00	\$		Gross Receipts First Gr
	0.00	\$	Group	Gross Receipts Second		*	oup	orogo recocipio i ilot Or
		\$						
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gr
	0.00		Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gr
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	\$ SUBSCRIBER GROU	Group TY-SIXTH	Base Rate Fee Second FIF COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	FIFT COMMUNITY/ AREA CALL SIGN
	O.00 P Ose	\$ SUBSCRIBER GROU	Group TY-SIXTH DSE	Base Rate Fee Second FIF COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GROI	OUP TY-FIFTH DSE	Base Rate Fee First Gr FIFT COMMUNITY/ AREA
	0.00 P	SUBSCRIBER GROU CALL SIGN	Group TY-SIXTH DSE	FIF COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROU	OUP TY-FIFTH DSE	FIFT COMMUNITY/ AREA CALL SIGN Fotal DSEs

EGAL NAME OF OWI SANTA ROSA TI			E, INC.			S	2021/1	Name
				TE FEES FOR EAC				
FIFTY COMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	FI COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	9
SOMMONTI I/ AREA				COMMONT 17 ARE	Α			Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and Syndicate
		-						Exclusivit
								Surcharge
								for
								Partially Distant
								Stations
		H						
		-						
						.		
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	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO	OUP			SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H						
		-						
		-				··		
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
,	•				·r			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
ase Rate Fee: Add			scriber group	as shown in the boxe	es above.			

Name	STEM ID# 2021/1	51			i, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9	P	SUBSCRIBER GROU	SECOND			SUBSCRIBER GRO	TY-FIRST	
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	O/ ILL GIGIT	DOL	CALL GIGIT	DOL	O/LE CICIV	DOL	CALL CIGIT
and							-	
Syndicate						-		
Exclusivi								
Surcharg						=		
for								
Partially								
Distant								
Stations								
	0.00			Total DSEs	0.00			otal DSEs
					0.00			B
	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	Fross Receipts First Gr
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		Group	Base Rate Fee Second	0.00		oup	Base Rate Fee First Gr
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$	Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	Sase Rate Fee First Gr SIXT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second SIXTY COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROI	oup	SIXT SOMMUNITY/ AREA
	0.00 P Ose	\$ SUBSCRIBER GROU	FOURTH	Base Rate Fee Second SIXTY COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GROI	OUP TY-THIRD DSE	Base Rate Fee First Gr SIXT COMMUNITY/ AREA

Name	YSTEM ID# 2021/1	3			E, INC.			LEGAL NAME OF OWNE SANTA ROSA TEL
	ID.			TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	TY-SIXTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIFTH	SIX COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I	DOL	OALL GIGIN	DOL	OALE GIGIN	DOL	CALL GIGIN	DOL	GALL GION
and Syndicate								
Exclusivit								
Surcharg								
for Partially								
Distant								
Stations								
							-	
		•						
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROL	Y-EIGHTH	SIXT	JP	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	JP 0	SUBSCRIBER GROU	Y-EIGHTH	SIXT COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	SEVENTH	
	_	SUBSCRIBER GROU	Y-EIGHTH DSE			SUBSCRIBER GROU	DSE	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE		DSE	COMMUNITY/ AREA CALL SIGN	DSE		DSE	CALL SIGN

Name							EPHONI	
				TE FEES FOR EACH				
9	_	SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GROU	ry-NINTH	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicat						-		
Exclusiv Surchar								
for						-		
Partiall								
Distan								
Station								
"								
]								
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	oup	Gross Receipts First Gr
						i e		
					l l			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	lase Rate Fee First Gr
	<u>'</u>	SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
	<u>'</u>							SEVEN
	JP			SEVENT	UP			SEVEN
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0	SUBSCRIBER GROU	-SECOND	SEVENT COMMUNITY/ AREA	DSE	SUBSCRIBER GROU	TY-FIRST	SEVENT
	JP 0 DSE 0 O.000	CALL SIGN	DSE	SEVENT COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE D.00	CALL SIGN	DSE	SEVENT COMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROU	DSE	SEVENT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	SEVENT COMMUNITY/ AREA CALL SIGN

Computation of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ER GROUP 0	BER GROUP UBSCRIBER GROU			, INC.		R OF CABL . EPHONI	SANTA ROSA TEL
Computatio of Base Rate Form and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ER GROUP 0			TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
Base Rate Formand Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ER GROUP 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ER GROUP	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 ER GROUP							
Surcharge for Partially Distant Stations 0.00 0.00 0.00 ER GROUP							
0.00 0.00 0.00 ER GROUP		-					
Distant Stations 0.00 0.00 0.00 ER GROUP							
0.00 0.00 0.00 ER GROUP		-					
0.00 0.00 0.00 ER GROUP		-					
0.00 0.00 ER GROUP							
0.00 0.00 ER GROUP		-					
0.00 0.00 ER GROUP		-					
0.00 0.00 ER GROUP							
0.00 0.00 ER GROUP							
0.00 ER GROUP			Total DSEs	0.00			Total DSEs
ER GROUP 0	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
0	\$	d Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First G
	UBSCRIBER GROU	TY-SIXTH		JP	SUBSCRIBER GROU	TY-FIFTH	
GN DSE			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		-					
		-					
0.00			Total DSTs	0.00			Fotal DSFo
0.00		Group	Total DSEs	0.00	¢	roup	Total DSEs
0.00	•	Group	Gross Receipts Fourth	0.00	\$	iioup	Gross Receipts Third G
0.00	\$		ll .	0.00	\$	roun	Base Rate Fee Third G

Name	STEM ID# 2021/1	Si			.,			SANTA ROSA TEL
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
Ω	Р	SUBSCRIBER GROU	'-EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN
and	<u></u>					-		
Syndicate						-		
Exclusivi								
Surcharg								
for								
Partially								
Distant								
Stations	.							
Otations								
	<u></u>							
	<u></u>							
						-		
	0.00			Total DSEs	0.00			Γotal DSEs
		\$	Croup	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	<u>*</u>	Gloup	0.000.1000.pto 0000.11			•	
	0.00	\$		Base Rate Fee Second	0.00	\$		3ase Rate Fee First Gr
	0.00	\$	Group	Base Rate Fee Second		l	oup	
	0.00		Group	Base Rate Fee Second		\$ SUBSCRIBER GRO	oup	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$	Group	Base Rate Fee Second	JP	l	oup	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT
	0.00	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second El COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	oup 'Y-NINTH	SEVENT COMMUNITY/ AREA CALL SIGN
	0.00 P	SUBSCRIBER GROU CALL SIGN	GROUP GHTIETH DSE	EI COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE O.000	SUBSCRIBER GRO CALL SIGN	OUP Y-NINTH DSE	SEVENT COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 P Ose	\$ SUBSCRIBER GROU	GROUP GHTIETH DSE	Base Rate Fee Second El COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GRO	OUP Y-NINTH DSE	SEVENT

Name	YSTEM ID# 2021/1	0.			i, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-SECOND	ll .		SUBSCRIBER GRO	TY-FIRST	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate							-	
Exclusivi								
Surcharg for							-	
Partially							-	
Distant							-	
Stations								
						-		
		_						
	0.00			Total DSEs	0.00			Fotal DSEs
		-				¢		D D
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Fross Receipts First Gr
	0.00	\$	d Group	Gross Receipts Second	0.00	*	oup	oross Receipts First Gr
	0.00	\$		Gross Receipts Second Base Rate Fee Second	0.00	\$		
	0.00		l Group	Base Rate Fee Second	0.00		oup	3ase Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	oup 'Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	l Group -FOURTH	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP OSE	\$ SUBSCRIBER GRO	oup 'Y-THIRD	EIGHT COMMUNITY/ AREA CALL SIGN
	0.00 P	SUBSCRIBER GROU CALL SIGN	d Group -FOURTH DSE	EIGHTY COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GRO	OUP Y-THIRD DSE	EIGHT COMMUNITY/ AREA CALL SIGN
	0.00	\$ SUBSCRIBER GROU	d Group -FOURTH DSE	EIGHTY COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GRO	OUP Y-THIRD DSE	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA

	2021/1				E, INC.	E COOPERATIVE	EPHONE	LEGAL NAME OF OWNER SANTA ROSA TEL
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GROU	ΓY-FIFTH	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate						-		
Exclusivi Surcharg								
for								
Partially							-	
Distant								
Stations						-		
		_						
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	<u></u>	SUBSCRIBER GROU			UP	\$ SUBSCRIBER GROU		
	<u></u>	L'						EIGHTY-S
	P	L'		EIGHT	UP			EIGHTY-S
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/-EIGHTH	EIGHT'	UP 0	SUBSCRIBER GROU	EVENTH	EIGHTY-S
	DSE	SUBSCRIBER GROU	/-EIGHTH	EIGHT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	EIGHTY-S COMMUNITY/ AREA CALL SIGN

Name	STEM ID# 2021/1	SY			, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
	D			TE FEES FOR EACH				
9	<u>0</u>	SUBSCRIBER GROU	NINTIETH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	Y-NINTH	EIGHT COMMUNITY/ AREA
Computati	Dec	CALL SIGN	DOE	CALL SIGN	l per	CALLSION	Der	CALL SIGN
of Base Rate	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and						-		
Syndicate							-	
Exclusivi								
Surcharg								
for						-		
Partially								
Distant						-		
Stations							-	
						-	-	
	0.00			Total DSEs	0.00			otal DSEs
				Constants Constants	0.00	\$	OUD	Gross Receipts First Gr
	0.00	\$	Group	Gross Receipts Second			- up	•
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		Group	Base Rate Fee Second		\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second		l	oup	Base Rate Fee First Gro
	0.00	\$	Group	Base Rate Fee Second	JP	l	oup	Base Rate Fee First Gro
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Green NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	Base Rate Fee First Gro NINET
	0.00 P	\$ SUBSCRIBER GROU	Group	Base Rate Fee Second NINETY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROI	oup	NINET COMMUNITY/ AREA CALL SIGN
	0.00 P DSE	\$ SUBSCRIBER GROU	SECOND DSE	Base Rate Fee Second NINETY COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROI	DSE	Base Rate Fee First Green NINET

Name	YSTEM ID# 2021/1	SY			, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
Ω	IP	SUBSCRIBER GROU	-FOURTH	ll .		SUBSCRIBER GRO	Y-THIRD	
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I	DOL	CALL SIGN	DSL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN
and						-		
Syndicate						-	-	
Exclusivit								
Surcharg								
for								
Partially								
Distant								
Stations						-		
Otations								
						-	 	
	0.00			Total DSEs	0.00			Total DSEs
					0.00	\$		Gross Receipts First Gr
	0.00	\$	l Group	Gross Receipts Second		•	oup	oroso recocipio i iist or
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gro
	0.00		l Group	Base Rate Fee Second	0.00		oup	Base Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Gro NINET COMMUNITY/ AREA
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Green NINET
	0.00	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup TY-FIFTH	Base Rate Fee First Gro NINET COMMUNITY/ AREA
	0.00 P DSE	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second NINE COMMUNITY/ AREA	0.00 JP O DSE	\$ SUBSCRIBER GROI	oup TY-FIFTH	NINET COMMUNITY/ AREA CALL SIGN
	0.00 IP	SUBSCRIBER GROU CALL SIGN	I Group TY-SIXTH DSE	NINE COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROU	OUP TY-FIFTH DSE	NINET COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 P DSE	\$ SUBSCRIBER GROU	I Group TY-SIXTH DSE	Base Rate Fee Second NINE COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	\$ SUBSCRIBER GROI	OUP TY-FIFTH DSE	Base Rate Fee First Green NINET

Name	2021/1						EPHONE	SANTA ROSA TEL
	JP	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivit						-		
Surcharg								
for Partially								
Partially Distant Stations								
	0.00			Total DSEs	0.00			Total DSEs
		\$	Croup	Gross Receipts Second	0.00	\$	oun	Gross Receipts First Gr
	0.00		Gloup	Gross recorpts occorn		*	очр	,
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00		l Group	Base Rate Fee Second			oup	Base Rate Fee First Gro
	0.00	\$	l Group	Base Rate Fee Second		\$	oup	3ase Rate Fee First Gro
	0.00	\$	l Group	Base Rate Fee Second	JP	\$	oup	Base Rate Fee First Gro
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Green NINET
	0.00 JP 0	\$ SUBSCRIBER GROU	l Group	Base Rate Fee Second ONE HUN COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	NINET COMMUNITY/ AREA CALL SIGN
	0.00 JP OSE	\$ SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	\$ SUBSCRIBER GROU	OUP Y-NINTH DSE	Base Rate Fee First Green NINET

Name	YSTEM ID# 2021/1	SY			, INC.			LEGAL NAME OF OWNER SANTA ROSA TEL
				TE FEES FOR EACH				
9	IP 0	SUBSCRIBER GROU	SECOND	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GRO	D FIRST	ONE HUNDRE COMMUNITY/ AREA
Computati	U			COMMUNITY/ AREA	U			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate						=		
Exclusivi						-		
Surcharg for						-		
Partially								
Distant Stations						-		
						-	-	
							ļ	
	0.00			Total DSEs	0.00			Total DSEs
	0.00		0	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00	8	Carollo		0.00	<u>*</u>	oup	sided i toddipto i iidt di
	0.00	\$	Group	·				
	0.00	\$		Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00		Group	Base Rate Fee Second		\$ SUBSCRIBER GROU		
	0.00	\$	Group	Base Rate Fee Second		l		ONE HUNDRE
	0.00	\$	Group	Base Rate Fee Second	JP	l		ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00	\$ SUBSCRIBER GROU	Group	ONE HUNDRED	JP 0	SUBSCRIBER GROI	D THIRD	ONE HUNDRE
	0.00 P OSE	\$ SUBSCRIBER GROU	Group FOURTH DSE	Dase Rate Fee Second ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROI	DSE	ONE HUNDRE COMMUNITY/ AREA CALL SIGN

	ONE COOPERATIN	VE, INC.				2021/1	Name
	A: COMPUTATION C		III			N.I.D.	
ONE HUNDRED FIF	TH SUBSCRIBER GR	OUP 0	ONE HUN COMMUNITY/ ARE		SUBSCRIBER GRO	0 0	9
OMMONITY AREA			COMMONITY ARE	H			Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
					-		and
							Syndicate Exclusivi
							Surcharg
					-		for
							Partially Distant Stations
							Distant
							"
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
			Į.				
ONE HUNDRED SEVEN	TH SUBSCRIBER GR	OUP	ONE HUNDI	RED EIGHTH	SUBSCRIBER GRO	UP	<u> </u>
ONE HUNDRED SEVEN	TH SUBSCRIBER GR	OUP 0	ONE HUNDI COMMUNITY/ ARE		SUBSCRIBER GRO	0 0	
			Ħ		SUBSCRIBER GRO	_	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		DSE	COMMUNITY/ ARE	Α		DSE	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		DSE	COMMUNITY/ ARE	DSE		DSE	

Name	YSTEM ID# 2021/1	Si			i, INC.	LCOOPLINATIVE	EPHONE	SANTA ROSA TEL
				TE FEES FOR EACH				
9	1P 0	SUBSCRIBER GROU	D TENTH	ONE HUNDRE	JP 0	SUBSCRIBER GROU	D NINTH	ONE HUNDRE COMMUNITY/ AREA
Computati								
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and						-		
Syndicate						-		
Exclusivit								
Surcharg for								
Partially								
Distant Stations						-	-	
							-	
							-	
	0.00			Total DSEs	0.00			Total DSEs
		•		Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	Group	Gross Necelpts Second			•	
	0.00	•	i Group	Gross Receipts Gecom			·	
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	
	0.00		l Group	Base Rate Fee Second	JP	\$ SUBSCRIBER GROU	oup	ONE HUNDRED EL
	0.00	\$	l Group	Base Rate Fee Second			oup	ONE HUNDRED EL
	0.00	\$	l Group	Base Rate Fee Second	JP		oup	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00	\$ SUBSCRIBER GROU	I Group WELVTH	ONE HUNDRED COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	eventh	ONE HUNDRED EL
	0.00 P	SUBSCRIBER GROU CALL SIGN	DSE	Dase Rate Fee Second ONE HUNDRED COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE DSE	CALL SIGN	DSE	ONE HUNDRED EL COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00	\$ SUBSCRIBER GROU	DSE	Dase Rate Fee Second ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	ONE HUNDRED EL

Name	STEM ID# 2021/1	Sì			, INC.	E COOPERATIVE		LEGAL NAME OF OWNER SANTA ROSA TEL
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	RTEENTH	ONE HUNDRED FOU		SUBSCRIBER GROU	TEENTH	ONE HUNDRED THIR
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate								
Exclusivit							-	
Surcharg for								
Partially						-		
Distant Stations								
	0.00			Total DSEs	0.00			Total DSEs
					0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Gross Receipts Secon		<u>*</u>	•	
	0.00	\$	d Group	Gross Receipts Secon		<u>*</u>	•	
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	
	0.00		l Group	Base Rate Fee Second	0.00		oup	ONE HUNDRED FIF
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	ONE HUNDRED FIF
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TEENTH	ONE HUNDRED FIF
	0.00 P DSE	\$ SUBSCRIBER GROU	d Group XTEENTH DSE	Dase Rate Fee Second ONE HUNDRED SI COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GROU	DSE	ONE HUNDRED FIF

		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
Ω		SUBSCRIBER GROUP	SHTEENTH	ll .		SUBSCRIBER GROUP	NTEENTH	
9 Computed	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computat	Dec	CALLSION	Der	CALLSION	Dec	CALLSION	DOE	CALLEICN
of Base Rate	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and								
Syndicate		-						
Exclusivi		-						
Surcharg								
for								
Partially Distant Stations						+		
		-				-		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
			•				•	·
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	, , , , , , , , , , , , , , , , , , ,	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU		
	, , , , , , , , , , , , , , , , , , ,					\$ SUBSCRIBER GROU		ONE HUNDRED NIN
	P			ONE HUNDRED TW	JP	\$ SUBSCRIBER GROU		ONE HUNDRED NIN
	P			ONE HUNDRED TW	JP	SUBSCRIBER GROU		ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	P 0	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW	JP 0		ITEENTH	ONE HUNDRED NIN
	DSE	SUBSCRIBER GROU	/ENTIETH	ONE HUNDRED TW COMMUNITY/ AREA CALL SIGN	JP O DSE		ITEENTH	ONE HUNDRED NIN
	DSE 0.000	CALL SIGN	/ENTIETH DSE	ONE HUNDRED TW COMMUNITY/ AREA CALL SIGN Total DSEs	DSE DSE O.000	CALL SIGN	DSE	ONE HUNDRED NIN
	DSE	SUBSCRIBER GROU	/ENTIETH DSE	ONE HUNDRED TW COMMUNITY/ AREA CALL SIGN	JP O DSE		DSE	ONE HUNDRED NIN

	2021/1				, INC.	L OOOI LIVATIVE	LFIION	SANTA ROSA TEL
				TE FEES FOR EACH				
9	0	SUBSURIBER GROUP	-SECOND	ONE HUNDRED TWENT	0	SUBSCRIBER GROUP	NIY-FIRST	ONE HUNDRED TWEN
Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate								
Exclusivi								
Surcharg						=		
for Partially Distant Stations						-		
						-		
						-		
					•		<u> </u>	
	0.00			Total DSEs	0.00		1	otal DSEs
	_			Gross Receipts Secon	0.00	\$	roun	Gross Receipts First Gr
	0.00	\$	l Group	Gloss Receipts Secon	_	<u>-</u>	oup	·
	0.00	\$		Base Rate Fee Secon	0.00	\$		
	0.00	\$	l Group			\$	roup	Base Rate Fee First G
	0.00	\$	l Group	Base Rate Fee Secon	,	\$	roup	Base Rate Fee First Gr
	0.00	\$	l Group	Base Rate Fee Secon	,	\$	roup	Base Rate Fee First G
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	Group 7-FOURTH	Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	roup	Base Rate Fee First Gr ONE HUNDRED TWEN COMMUNITY/ AREA
	0.00	SUBSCRIBER GROUP	J Group /-FOURTH	DASE RATE FEE SECON ONE HUNDRED TWENT COMMUNITY/ AREA CALL SIGN	DSE	\$ SUBSCRIBER GROUP	DSE	ONE HUNDRED TWEN COMMUNITY/ AREA CALL SIGN

A TELEPHONE COOPERATIVE, INC.	2021/1	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP		
D TWENTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP REA COMMUNITY/ AREA	JP 0	9
REA COMMUNITY/ AREA	U	Computa
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE	of
		Base Rate
		and Syndicat
		Exclusiv
		Surchar
		for Partially Distant Stations
	0.00	
First Group \$ 0.00 Gross Receipts Second Group \$	0.00	
First Group \$ 0.00 Base Rate Fee Second Group \$	0.00	
VENTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP	JP	
	<u>,</u>	
VENTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP	JP	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA	JP 0	
VENTY-SEVENTH SUBSCRIBER GROUP REA O COMMUNITY/ AREA DSE CALL SIGN DSE Total DSES	DSE DSE O.000	
VENTY-SEVENTH SUBSCRIBER GROUP REA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	JP 0 DSE	

0 9 Computati	IBER GROUP SUBSCRIBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPLITATION OF		
Computati	SUBSCRIBER GROUP						
Computati		THIRTIETH			SUBSCRIBER GROUP	ITY-NINTH	ONE HUNDRED TWEN
			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate					-		
and							
Syndicate Exclusivit							
Surcharg					_		
for					-		
Partially					-		
Distant							
Stations							
	+				-		
0.00	-		Total DSEs	0.00			otal DSEs
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	SUBSCRIBER GROUP	Y-SECOND)	SUBSCRIBER GROUP	RTY-FIRST	
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	_				-		
	-				-		
					-		
				.			
0.00		<u> </u>	Total DSEs	0.00			otal DSEs
0.00	\$	Group	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G
		•				•	·
J 1	\$	Groun	Base Rate Fee Fourth	0.00	 	iroup	Base Rate Fee Third G

1 Name	2021/1						EPHONE	
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	Y-FOURTH			SUBSCRIBER GROUP	RTY-THIRD	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndica						-		
Exclusiv Surchar								
for							···	
Partially Distant Stations								
Distant								
··								
Distant								
						-		
	0.00			Total DSEs	0.00			otal DSEs
		¢	-1 0	Gross Receipts Seco	0.00	\$	roup	Fross Receipts First Gr
	0.00	\$	a Group	Gross Receipts Secon		<u>*</u>	oup	iloss Receipts Filst Gi
[0.00	•	a Group	Gross Neceipts Secon			Toup	iloss Receipts Filst Gi
	0.00	\$		Base Rate Fee Secon	0.00	\$		
[0.00		d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First Gr
 	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	iase Rate Fee First Gr
=	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First Gr
- - - - - - -	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	DNE HUNDRED THIR
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	ase Rate Fee First Gr DNE HUNDRED THIR' OMMUNITY/ AREA
- - - - - - - - - - - -	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	DNE HUNDRED THIR
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	DIASE RATE FEE FIRST GROWN HUNDRED THIRESTORM OF THE COMMUNITY AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr DNE HUNDRED THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr DNE HUNDRED THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr DNE HUNDRED THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	DIASE RATE FEE FIRST GROWN HUNDRED THIRESTORM OF THE COMMUNITY AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr DNE HUNDRED THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr DNE HUNDRED THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr DNE HUNDRED THIR COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	DNE HUNDRED THIR
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED THI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr DNE HUNDRED THIR COMMUNITY/ AREA
	0.00 JP O DSE 0.00	SUBSCRIBER GROU	d Group	ONE HUNDRED THI COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROU	TY-FIFTH DSE	DNE HUNDRED THIRE COMMUNITY/ AREA
	JP O DSE	\$ SUBSCRIBER GROU	d Group	DASE RATE FEE SECON ONE HUNDRED THI COMMUNITY/ AREA CALL SIGN	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH DSE	DNE HUNDRED THIR

Name	YSTEM ID# 2021/1	S			, INC.			LEGAL NAME OF OWNER SANTA ROSA TEL
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9		SUBSCRIBER GROUP	Y-EIGHTH	ll .		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED THIRTY-
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate						-		
Exclusivit								
Surcharg								
for						-		
Partially Distant Stations						-		
						-		
						-	-	
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00			Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Cross recorpts occorn				
		\$		Base Rate Fee Secon	0.00	\$	oup	3ase Rate Fee First Gro
	0.00		l Group	Base Rate Fee Secon		l		
	0.00	\$	l Group	Base Rate Fee Secon		l		ONE HUNDRED THIRT
	0.00 0.00	\$	l Group	Base Rate Fee Secon	JP	l		ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	DNE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	DNE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	DNE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	DNE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	DNE HUNDRED THIRT COMMUNITY/ AREA CALL SIGN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	Y-NINTH	CALL SIGN
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon ONE HUNDRED I COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	Y-NINTH DSE	ONE HUNDRED THIRT

Name	2021/1							
				TE FEES FOR EACH				
9	_	SUBSCRIBER GROUP	Y-SECOND			SUBSCRIBER GROUP	RTY-FIRST	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicat								
Exclusiv Surchar								
for							<u>"</u>	
Partially Distant Stations								
							···	
	0.00			Total DSEs	0.00			otal DSEs
		_			0.00			
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	oup	ross Receipts First Gr
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	oup	ross Receipts First Gr
	0.00	\$		Base Rate Fee Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon	0.00		oup	ase Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	one hundred for
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	one hundred for
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	Base Rate Fee First Gr ONE HUNDRED FOR COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	Base Rate Fee First Gr ONE HUNDRED FOR COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH	Base Rate Fee Secor ONE HUNDRED FOR COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROUP	oup	ONE HUNDRED FOR COMMUNITY/ AREA
	0.00 DSE 0.00	SUBSCRIBER GROUP CALL SIGN	d Group Y-FOURTH DSE	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROUP CALL SIGN	DSE	ONE HUNDRED FOR COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00	\$ SUBSCRIBER GROUP	d Group Y-FOURTH DSE	Base Rate Fee Secor ONE HUNDRED FOR COMMUNITY/ AREA CALL SIGN	0.00	\$ SUBSCRIBER GROUP	DSE	ONE HUNDRED FOR

Name	YSTEM ID# 2021/1	5			Ξ, INC.			LEGAL NAME OF OWNE SANTA ROSA TEL
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	RTY-SIXTH	ii e		SUBSCRIBER GROUP	RTY-FIFTH	
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicat Exclusiv								
Surchar								
for								
Partiall								
Distan		,						
Station								
					···			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	oup	Fross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secor	0.00	\$	oup	ase Rate Fee First Gr
		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR)	SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED FORTY
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	CALL SIGN
	0.00			Total DSEs	0.00			otal DSEs
		CALL SIGN				CALL SIGN		

Name	YSTEM ID# 2021/1				., 1140.			SANTA ROSA TEL
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
^	IP	SUBSCRIBER GROU		П				ONE HUNDRED FORT
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
Syndicate						-		
Exclusivit						=		
Surcharge								
for								
						-		
Partially						-		
Distant						-		
Stations								
					.			
	0.00			Total DSEs	0.00			Γotal DSEs
					Gross Receipts First Group \$ 0.00			
	0.00	\$	d Group	Gross Receipts Second		<u>-</u>	oup	order recorpto i met on
	0.00	\$		Base Rate Fee Second	0.00	\$		
	0.00	\$	d Group		0.00	\$	oup	
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gro ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gro ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gro ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gro ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gro ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROI	oup	Base Rate Fee First Gro ONE HUNDRED FIFT COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GROI	oup	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN
	0.00	SUBSCRIBER GROU	d Group SECOND DSE	Dase Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROU	DSE	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00	\$ SUBSCRIBER GROU	d Group SECOND DSE	Base Rate Fee Second ONE HUNDRED FIFTY COMMUNITY/ AREA CALL SIGN	0.00 JP OSE	\$ SUBSCRIBER GROI	DSE	Base Rate Fee First Green ONE HUNDRED FIFT COMMUNITY/ AREA

LEGAL NAME OF OWNE SANTA ROSA TEI			E, INC.			<u></u>	2021/1	Name
				ATE FEES FOR EAC				
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GRO				SUBSCRIBER GRO	_	9
COMMUNITY/ AREA	REA 0 COMMUNITY/ AREA 0			Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
		 						Syndicate
		_						Exclusivit
		-						Surcharge for
								Partially
	<u></u>	-						Distant
		-						Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
	roun	•	0.00		and Croup	•	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO)UP	ONE HUNDRED F	IFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	Pr	'	0.00		p	T	0.00	
Base Rate Fee: Add the Inter here and in block			criber group	as shown in the boxes	s above.	\$		
	, 1, 6	(bago 1)				*		

Name	STEM ID# 2021/1	51			, INC.	E COOPERATIVE	EPHONE	SANTA ROSA TEL
		IBER GROUP	SUBSCRI	TE FEES FOR EACH				
9		SUBSCRIBER GROUP	Y-EIGHTH	l		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED FIFTY-
Computat	REA 0 COMMUNITY/ AREA 0			COMMUNITY/ AREA				
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicate								
Exclusivi						-		
Surcharg								
for						-		
Partially Distant								
Stations								
	<u> </u>					-		
							-	
	0.00			Total DSEs	0.00			otal DSEs
				0	0.00			
	0.00	\$	d Group	Gross Receipts Secon		·	•	
	0.00	\$	d Group	Gross Receipts Secon			·	
	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	oup	
	0.00		l Group	Base Rate Fee Secon		\$	oup	Base Rate Fee First Gro
	0.00	\$	l Group	Base Rate Fee Secon		\$	oup	ONE HUNDRED FIFT
	0.00	\$	l Group	Base Rate Fee Secon ONE HUNDRED	JP	\$	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	oup	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN
	0.00 P	SUBSCRIBER GROU CALL SIGN	d Group SIXTIETH DSE	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA CALL SIGN	DSE DSE DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN Fotal DSEs
	0.00 P Ose	\$ SUBSCRIBER GROU	d Group SIXTIETH DSE	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA CALL SIGN	JP 0	\$ SUBSCRIBER GROU	DSE	ONE HUNDRED FIFT

FORM SA3E. PAGE 20.

SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1 39		LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge, Indicate which major television market any portion of your cable system is located in as defined by section 78.5 of FCC rules in effect on June 24, 1981 etc. Partially Surcharge	Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	
Syndicated Exclusivity Surcharge, Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television this schedule Second 50 major television television this schedule Second 50 major television this schedule Second 50 major television this schedule Second 50 major t		BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
A State Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations First 5 cm and Syndicated Exclusivity Surcharge for Partially Distant Stations First 5 cm and 5 cm		Syndicated Exclusivity Surcharge. Indicate which major television ma	
Base Rate Fe and Syndicated Exclusivity Surcharge for partially Distant Stations Step 2: In line 2, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1 his is the total number of DSEs used to compute the surcharge. Step 3: In line 3, subtract line 2 from line 1 his is the total number of DSEs used to compute the surcharge. Step 3: In line 3, subtract line 2 from line 1 and enter here. This is the total number of DSEs used to compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE THIRD SUBSCRIBER GROUP SYNDICATED EXCLUSIVITY URCHARGE: Add the surcharge for each subscriber group as shown	=	☐ First 50 major television market	Second 50 major television market
by addicated Exclusivity Surcharge for for Partially Distant Stations Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract lare 2 from line 1 his is the total number of DSEs used to compute the surcharge. Step 3: In line 3, subtract lare 2 from line 1 his is the total number of DSEs used to compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group. SYNDICATED EXCLUSIVITY SURCHARGE Third Group. SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown	- -		
Exclusivity Surcharge for Partially Distant Stations Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempl DSEs in block C, part 7 of this schedule. In none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula coultined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group, You do not need to show your actual calculations on this form. FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE Third Group \$YNDICATED EXCLUSIVITY SURCHARGE Third Group \$YNDICATED EXCLUSIVITY SURCHARGE Third Group \$YNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown	and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of
Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group. SYNDICATED EXCLUSIVITY SUBSCRIBER GROUP Line 1: Enter the VHF DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group. SYNDICATED EXCLUSIVITY SURCHARGE Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE Third Group. SYNDICATED EXCLUSIVITY SURCHARGE Third Group. SYNDICATED EXCLUSIVITY SURCHARGE Third Group. SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group as shown	•		for the VIJE Crade B contour stations, that were electified as
Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	•		
Stations Stations FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group SYNDICATED EXCLUSIVITY Line 1: Enter the VHF DSEs SYNDICATED EXCLUSIVITY SURCHARGE Third Group SYNDICATED EXCLUSIVITY SYNDICATED EXCLU	•	· · · · · · · · · · · · · · · · · · ·	
FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs	•		•
FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. Line 2: Enter the Exempt DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Third Group \$ SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group \$ SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown			gures applicable to the particular group. You do not need to show
Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Stations	your actual calculations on this form.	
Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group SYNDICATED EXCLUSIVITY SURCHARGE First Group Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group SYNDICATED EXCLUSIVITY SURCHARGE Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs . Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Third Group SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group \$ Line 2: Enter the Exempt DSEs . Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group \$ SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown		FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation. SYNDICATED EXCLUSIVITY SURCHARGE First Group		Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
total number of DSEs for this subscriber group subject to the surcharge computation			
this subscriber group subject to the surcharge computation			
subject to the surcharge computation			
computation		j .	.
SURCHARGE First Group\$ THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation			
SURCHARGE First Group\$ THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		SURCHARGE	SURCHARGE
Line 1: Enter the VHF DSEs		First Group	Second Group
Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
total number of DSEs for this subscriber group subject to the surcharge computation			
this subscriber group subject to the surcharge computation			
computation			
SYNDICATED EXCLUSIVITY SURCHARGE Third Group			
SURCHARGE Third Group		computation	computation
Third Group			
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown			
		I nira Group	Fourth Group

FORM SA3E. PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	If your cable system is located within a top 100 television market and t Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981:	he station is not exempt in Part 7, you mus also compute a
of	First 50 major television market	Second 50 major television market
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commer	rcial VHE Grade B contour stations listed in block Alipart 9 of
and Syndicated Exclusivity Surcharge for Partially Distant Stations	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group to Exempt DSEs in block C, part 7 of this schedule. If none entous Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the fi	for the VHF Grade B contour stations that were classified as er zero. of DSEs used to compute the surcharge.
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	Fourth Group\$

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule.	
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none er Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fit your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this gures applicable to the particular group. You do not need to show
	NINTH SUBSCRIBER GROUP	TENTH SUBSCRIBER GROUP
1		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	ELEVENTH SUBSCRIBER GROUP	TWELVTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	ercial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none en	
for Partially Distant	 Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig 	
Stations	your actual calculations on this form.	
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH SUBSCRIBER GROUP
	Line 1. Enter the VIJE DCE	Line 4. Enter the VIJE DCCs
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group\$
		······································
	FIFTEENTH SUBSCRIBER GROUP	SIXTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	· · · · · · · · · · · · · · · · · · ·
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	ercial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none en	
for Partially Distant Stations	 Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. 	
	SEVENTEENTH SUBSCRIBER GROUP	EIGHTEENTH SUBSCRIBER GROUP
1		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	NINEENTH SUBSCRIBER GROUP	TWENTYTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	· · · · · · · · · · · · · · · · · · ·
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none entities 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
	TWENTY-FIRST SUBSCRIBER GROUP	TWENTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	First Group	Second Group
	TWENTY-THIRD SUBSCRIBER GROUP	TWENTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation	computation SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group\$
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for a in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	· · · · · · · · · · · · · · · · · · ·
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	projet VIJE Crede B contagratations listed in block A part 0 of
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	ercial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations that were classified as
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the	·
Stations	your actual calculations on this form.	
	TWENTY-FIFTH SUBSCRIBER GROUP	TWENTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group
	T iist Glodp	Second Group
	TWENTY-SEVENTH SUBSCRIBER GROUP	TWENTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for on the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group.	for the VHF Grade B contour stations, that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	· · · · · · · · · · · · · · · · · · ·
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts file	gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	gares applicable to the particular group. For do not need to show
	TWENTY-NINTH SUBSCRIBER GROUP	THIRTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	000000000000000000000000000000000000000	000000000000000000000000000000000000000
	THIRTY-FIRST SUBSCRIBER GROUP	THIRTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for	each subscriber group as shown
	in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	•
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHE Crade B contour stations, that were classified as
Exclusivity Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially	Step 4: Compute the surcharge for each subscriber group using the	·
Distant Stations	schedule. In making this computation, use gross receipts fi your actual calculations on this form.	gures applicable to the particular group. You do not need to show
Glations	,	
l	THIRTY-THIRD SUBSCRIBER GROUP	THIRTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group\$
	THIRTY-FIFTH SUBSCRIBER GROUP	THIRTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag	
ı		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television maby section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none en	ter zero.
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	•
Distant		gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	
	THIRTY-SEVENTH SUBSCRIBER GROUP	THIRTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	THIRTY-NINTH SUBSCRIBER GROUP	FORTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for	
	in the boxes above. Enter here and in block 4, line 2 of space L (page	\$

FORM SA3F PAGE 20

	LEGAL NAME OF OURSED OF OARLE OVOTEN	FURIN SASE, PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule.	
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none en	
Partially Distant Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	FORTY-FIRST SUBSCRIBER GROUP	FORTY-SECOND SUBSCRIBER GROUP
	Live A. Federal VIII POS	Live 4 February MIF DOF
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	FORTY-THIRD SUBSCRIBER GROUP	FORTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television maby section 76.5 of FCC rules in effect on June 24, 1981:	· · · · · · · · · · · · · · · · · · ·
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VIJE Crade B contour stations, that were alongified as
Exclusivity Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none en	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially	Step 4: Compute the surcharge for each subscriber group using the	formula outlined in block D, section 3 or 4 of part 7 of this
Distant		gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	
İ	FORTY-FIFTH SUBSCRIBER GROUP	FORTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group
	FORTY-SEVENTH SUBSCRIBER GROUP	FORTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	
Ì		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	·
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations, that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	,
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fi	gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	ganos applicazio le ine paracalar gioapi, i ca ao notinoca le circii
	FORTY-NINTH SUBSCRIBER GROUP	FIFTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	FIFTY-FIRST SUBSCRIBER GROUP	FIFTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	Tille Gloup	Todrui Cioup
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag	
	in the besses above. Either here and in block 1, into 2 of space 2 (pag	

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	·
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for commutation schedule.	ercial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er	
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	· · · · · · · · · · · · · · · · · · ·
Distant	schedule. In making this computation, use gross receipts fig	gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	
	FIFTY-THIRD SUBSCRIBER GROUP	FIFTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	FIFTY-FIFTH SUBSCRIBER GROUP	FIFTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group \$	Fourth Group
	CVAIDICATED EVOLUCIVITY CUDCHARCE, Add the cureborge for	and authoriber group as about
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group.	o for the VHF Grade B contour stations, that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	· · · · · · · · · · · · · · · · · · ·
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fit	gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	galloo appiloazio to tilo particolari gioapi i ou ao notinoca to onom
	FIFTY-SEVENTH SUBSCRIBER GROUP	FIFTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	FIFTY-NINTH SUBSCRIBER GROUP	SIXTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	
	, , , , ,	,

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	o for the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	· · · · · · · · · · · · · · · · · · ·
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fi	gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	garee approal to the particular group. For an increase to enour
	SIXTY-FIRST SUBSCRIBER GROUP	SIXTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	SIXTY-THIRD SUBSCRIBER GROUP	SIXTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag	
	The series are the series and in second in the series of t	

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	o for the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	· · · · · · · · · · · · · · · · · · ·
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fi	gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	3
	SIXTY-FIFTH SUBSCRIBER GROUP	SIXTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group
	1 113t G10dp	Cocord Group
	SIXTY-SEVENTH SUBSCRIBER GROUP	SIXTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Course	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for	
	in the boxes above. Enter here and in block 4, line 2 of space L (pag	e /)

FORM SA3F PAGE 20

	LEGAL NAME OF OUNTED OF OARLE OVOTEN	FURIN SASE, PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	·
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity Surcharge	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en	
for Partially Distant Stations	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
1	SIXTY-NINTH SUBSCRIBER GROUP	SEVENTIETH SUBSCRIBER GROUP
İ	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group\$
	SEVENTY-FIRST SUBSCRIBER GROUP	SEVENTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1
Gomputation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none ent Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the	rket any portion of your cable system is located in as defined Second 50 major television market Procial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
	SEVENTY.THIRD SURSCRIRED GROUP	SEVENTY-FOLIRTH SLIRSCRIRER CROLID
	SEVENTY-THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs	SEVENTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SEVENTY-FIFTH SUBSCRIBER GROUP	SEVENTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for a in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	Second 30 major television market
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule.	for the MUE Country December of the Management of the Assessment o
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially	Step 4: Compute the surcharge for each subscriber group using the	·
Distant Stations	schedule. In making this computation, use gross receipts fig your actual calculations on this form.	gures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	
1	SEVENTY-SEVENTH SUBSCRIBER GROUP	SEVENTY-EIGHTH SUBSCRIBER GROUP
İ	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	SEVENTY-NINTH SUBSCRIBER GROUP	EIGHTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#		
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	☐ First 50 major television market ☐ Second 50 major television market			
Base Rate Fee	INSTRUCTIONS:			
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	rcial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VIII Crade December stations, that were elegatified as		
Exclusivity Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none ent			
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of			
Partially	Step 4: Compute the surcharge for each subscriber group using the	· · · · · · · · · · · · · · · · · · ·		
Distant Stations	schedule. In making this computation, use gross receipts figing your actual calculations on this form.	ures applicable to the particular group. You do not need to show		
Stations	your actual calculations of this form.			
l	EIGHTY-FIRST SUBSCRIBER GROUP	EIGHTY-SECOND SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the	and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group subject to the surcharge	this subscriber group		
	subject to the surcharge subject to the surcharge computation			
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE	SURCHARGE		
	First Group	Second Group		
	EIGHTY-THIRD SUBSCRIBER GROUP	EIGHTY-FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge computation	subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page			

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1				
Name					
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP				
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:				
Computation					
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market			
and	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of				
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations, that were classified as			
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none en				
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.				
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fic	gures applicable to the particular group. You do not need to show			
Stations	your actual calculations on this form.	,a. oo appiisaano to tilo particalar g. oapi i oa ao not nooa to onon			
	EIGHTY-FIFTH SUBSCRIBER GROUP EIGHTY-SIXTH SUBSCRIBER GROUP				
	Line 4. Enter the MUE DOE	Live A. Fotontio MUE DOF			
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs			
	Line 3: Subtract line 2 from line 1 and enter here. This is the Line 3: Subtract line 2 from line 1 and enter here. This is the				
	and enter nere. I his is the and enter nere. I his is the total number of DSEs for total number of DSEs for				
	this subscriber group	this subscriber group			
	subject to the surcharge subject to the surcharge				
	computation				
	SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE				
	First Group	Second Group			
	EIGHTY-SEVENTH SUBSCRIBER GROUP EIGHTY-EIGHTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs			
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs			
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1			
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for			
	this subscriber group	this subscriber group			
	subject to the surcharge subject to the surcharge				
	computation	computation			
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE			
	SURCHARGE Third Group\$ SURCHARGE Fourth Group\$				
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for	each subscriber group as shown			
	in the boxes above. Enter here and in block 4, line 2 of space L (page				
İ	1				

FORM SA3E. PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation of	☐ First 50 major television market	Second 50 major television market	
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, possible this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were class Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not necessity.		
	EIGHTY-NINTH SUBSCRIBER GROUP	NINETIETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
	NINETY-FIRST SUBSCRIBER GROUP	NINETY-SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group\$	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television maby section 76.5 of FCC rules in effect on June 24, 1981:		
Computation of	☐ First 50 major television market	Second 50 major television market	
Base Rate Fee	INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VILIC Crade B contains attained that were eleccified as	
Exclusivity Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none en		
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number		
Partially	Step 4: Compute the surcharge for each subscriber group using the	formula outlined in block D, section 3 or 4 of part 7 of this	
Distant		jures applicable to the particular group. You do not need to show	
Stations	your actual calculations on this form.		
I	NINETY-THIRD SUBSCRIBER GROUP	NINETY-FOURTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the	and enter here. This is the	
	total number of DSEs for	total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	NINETY-FIFTH SUBSCRIBER GROUP	NINETY-SIXTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the	and enter here. This is the	
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE	SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation of	☐ First 50 major television market	Second 50 major television market	
Base Rate Fee	INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	o for the VHF Grade B contour stations, that were classified as	
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er		
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	· •	
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fi	gures applicable to the particular group. You do not need to show	
Stations	your actual calculations on this form.	galloo applicable to the particular group. For an inclined to offer	
	NINETY-SEVENTH SUBSCRIBER GROUP	NINETY-EIGHTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	NINETY-NINTH SUBSCRIBER GROUP	ONE HUNDREDTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE Third Group	SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag		
		,	
1			

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY	SURCHARGE FOR EACH SUBSCRIBER GROUP	
9 Computation	If your cable system is located within a top 100 television market and the stat Syndicated Exclusivity Surcharge. Indicate which major television market any by section 76.5 of FCC rules in effect on June 24, 1981:	· · · · · · · · · · · · · · · · · · ·	
of		ond 50 major television market	
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VI	HE Grade B contour stations listed in block A part 9 of	
Syndicated Exclusivity Surcharge for Partially Distant Stations	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show		
Stations	your actual calculations on this form.		
	ONE HUNDERED FIRST SUBSCRIBER GROUP	ONE HUNDERED SECOND SUBSCRIBER GROUP	
		1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs Line	2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
		DICATED EXCLUSIVITY CHARGE Second Group	
	ONE HUNDERED THIRD SUBSCRIBER GROUP	ONE HUNDERED FOURTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	
	subject to the surcharge computation	subject to the surcharge computation	
	SURCHARGE	DICATED EXCLUSIVITY	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each su in the boxes above. Enter here and in block 4, line 2 of space L (page 7)		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#		
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC. 202			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	☐ First 50 major television market	Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:			
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule.	ercial VHF Grade B contour stations listed in block A, part 9 of		
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	o for the VHF Grade B contour stations that were classified as		
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er			
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total numberStep 4: Compute the surcharge for each subscriber group using the			
Distant Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show			
	ONE HUNDRED FIFTH SUBSCRIBER GROUP	ONE HUNDRED SIXTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
1	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge subject to the surcharge			
	computation			
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE First Group	SURCHARGE Second Group		
	ONE HUNDRED SEVENTH SUBSCRIBER GROUP	ONE HUNDRED EIGHTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge computation	subject to the surcharge computation		
		SYNDICATED EXCLUSIVITY		
	SYNDICATED EXCLUSIVITY SURCHARGE	SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag			

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation of	First 50 major television market	Second 50 major television market	
Base Rate Fee	INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	o for the VHF Grade B contour stations that were classified as	
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er		
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	· •	
Distant		gures applicable to the particular group. You do not need to show	
Stations	your actual calculations on this form.		
	ONE HUNDRED NINTH SUBSCRIBER GROUP	ONE HUNDRED TENTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the	and enter here. This is the	
	total number of DSEs for	total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge computation	subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	First Group	Second Group	
	ONE HUNDRED ELEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWELVTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag		
	,	,	
1			

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1			
Name				
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market			
Computation of				
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of			
Syndicated	this schedule.	Wild VIII Grade B contour chance letter III Block A, part o ci		
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group			
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.			
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show			
Stations	your actual calculations on this form.	jures applicable to the particular group. You do not need to show		
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP	ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1			
	Line 3: Subtract line 2 from line 1 and enter here. This is the			
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation			
	SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY			
	SURCHARGE	SURCHARGE		
	First Group	Second Group		
	ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP			
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge subject to the surcharge computation			
	SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE			
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)			

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#		
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	☐ First 50 major television market ☐ Second 50 major television market			
Base Rate Fee	INSTRUCTIONS:			
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHF Grade B contour stations, that were classified as		
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none ent			
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.			
Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.			
	ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP	ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1			
	and enter here. This is the			
	total number of DSEs for total number of DSEs for this subscriber group this subscriber group			
	subject to the surcharge subject to the surcharge			
	computation			
	SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY			
	SURCHARGE First Group	SURCHARGE Second Group\$		
	ONE HUNDRED NINTEENTH SUBSCRIBER GROUP	ONE HUNDRED TWENTIETH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the		
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation			
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE Third Group	SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)		

FORM SA3F PAGE 20

	LEGAL NAME OF CHARLED OF CARLE OVCTEM	FURM SASE, PAGE 20.		
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	·		
Computation of	First 50 major television market	Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:			
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group.	for the VHE Grade B contour stations, that were classified as		
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none er			
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	,		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.			
	ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP		
1	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the	and enter here. This is the		
	total number of DSEs for total number of DSEs for			
	this subscriber group	this subscriber group		
	subject to the surcharge subject to the surcharge computation			
	SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY			
	SURCHARGE	SURCHARGE		
	First Group	Second Group		
	ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge computation	subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page			

FORM SA3E. PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBS	CRIBER GROUP	
9 Computation of	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is locate by section 76.5 of FCC rules in effect on June 24, 1981:	also compute a	
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified a Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to see the particular group.		
	ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SIXTH SU	JBSCRIBER GROUP	
	ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group SYNDICATED EXCLUSIVITY SURCHARGE Line 1: Enter the VHF DSEs SYNDICATED EXCLUSIVITY SURCHARGE First Group Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	-	
	this subscriber group subject to the surcharge computation		

FORM SA3F PAGE 20

	LEGAL NAME OF OWNER OF GARLE OVOTEN	FURIN SASE, PAGE 20.	
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:		
of	First 50 major television market	Second 50 major television market	
Base Rate Fee	INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of	
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group.	o for the VHF Grade B contour stations that were classified as	
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.		
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
l	ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED THIRTIETH SUBSCRIBER GROUP	
l		1: 4 5 4 4 44 44 505	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the	and enter here. This is the	
	total number of DSEs for	total number of DSEs for	
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE	SURCHARGE	
	First Group	Second Group	
	ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page		
ı			

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1		
Name			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
Gomputation of Base Rate Fee and Syndicated	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block this schedule.	compute a n as defined k A, part 9 of	
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.		
for Partially Distant Stations	 Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 		
	ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP ONE HUNDRED THIRTY-FOURTH SUBS	SCRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	<u>-</u>	
	ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group\$ SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group\$		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)		

FORM SA3E. PAGE 20.

Nama	SYSTEM ID# SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1			
Name				
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	☐ First 50 major television market ☐ Second 50 major television market			
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of			
Syndicated	this schedule.			
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.			
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.			
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show			
Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.			
	your dotted outstand on the form.			
	ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the	and enter here. This is the		
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation			
	SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY			
	SURCHARGE First Group	SURCHARGE Second Group		
	r iist Group	Second Group		
	ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FORTIETH SUBSCRIBER GROUP			
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs			
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge computation	subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)			

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#		
Name	SANTA ROSA TELEPHONE COOPERATIVE, INC.	2021/1		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	☐ First 50 major television market	Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:			
and	Step 1: In line 1, give the total DSEs by subscriber group for comm	ercial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as			
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.			
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.			
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show			
Stations	your actual calculations on this form.	galloo appiloazio to tilo particalar gioapi i oa ao notinoca to onom		
	ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the	and enter here. This is the		
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE	SURCHARGE		
	First Group	Second Group		
	ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge	subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE Third Group	SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag			
	, , , , ,	,		

FORM SA3E. PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	Second 50 major television market al VHF Grade B contour stations listed in block A, part 9 of the VHF Grade B contour stations that were classified as zero. DSEs used to compute the surcharge. mula outlined in block D, section 3 or 4 of part 7 of this es applicable to the particular group. You do not need to show		
Glations	your actual calculations on this form.		
1	ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP	
		Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	
		Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
		SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
	ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GF		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 7)		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1		
Name			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9 Computation	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:		
and Syndicated Exclusivity Surcharge for Partially Distant Stations	 Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 		
	ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUB-	SCRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	First Group		
	ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	\$	

FORM SA3E. PAGE 20.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC. 2021/1			
Name				
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of	☐ First 50 major television market ☐ Second 50 major television market			
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of			
Syndicated	this schedule.			
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.			
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.			
Partially Distant	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show			
Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.			
	you could out the form			
	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP		
	Line 4. Fatantha MIF DOF	Line 4. Enter the VIIIE DOEs		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1		
	and enter here. This is the	and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group	this subscriber group		
	subject to the surcharge subject to the surcharge computation			
	SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY			
	SURCHARGE	SURCHARGE		
	First Group	Second Group		
	ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP			
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE	SURCHARGE		
	Third Group	Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)			
	· · · · · · · · · · · · · · · · · · · ·			

FORM SA3F PAGE 20

	LEGAL MANE OF CHAIRD OF CARLE OVERTING	FURIVI SASE, PAGE 20.	
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SANTA ROSA TELEPHONE COOPERATIVE, INC.	SYSTEM ID# 2021/1	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9 Computation	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable syste by section 76.5 of FCC rules in effect on June 24, 1981:	· ·	
Computation of	☐ First 50 major television market ☐ Second 50 major television mar	ket	
Base Rate Fee	INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations	listed in block A, part 9 of	
Syndicated	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour station	ane that were classified as	
Exclusivity Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	That were classified as	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-EI	GHTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line	1	
	and enter here. This is the and enter here. This is		
	total number of DSEs for total number of DSEs for	or	
	this subscriber group subject to the surcharge this subscriber group subject to the surcharge	_	
		·	
	SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY		
	SURCHARGE		
	First Group	· · · · · · · · · · · · · · · · · · ·	
	ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP ONE HUNDRED SIXTIE	ETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs	· · ·	
	Line 3: Subtract line 2 from line 1		
	and enter here. This is the and enter here. This is total number of DSEs for total number of DSEs for		
	this subscriber group this subscriber group		
	subject to the surcharge subject to the surcharge		
		····· -	
	SYNDICATED EXCLUSIVITY SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE		
	Third Group	<mark>\$</mark>	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	<mark>\$</mark>	
1			
1			