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

SA3E Long Form

Return completed workbook by email to

AMOUNT coplicsoa@copyright.gov

For additional information,

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

Α	AC	COUNTING PERIOD COVERED BY THIS ST	TATEMENT:							
Accounting Period		2021/2								
B Owner	rate	ructions: Give the full legal name of the owner of the cable system title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner cor If there were different owners during the accounting period agle statement of account and royalty fee payment covering Check here if this is the system's first filing. If not, enter	nducts the business of the cable system and only the owner on the last day of any the entire accounting period.	tem. <i>the accounting period should si</i>		6311				
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABL	E SYSTEM							
		North State Communications, LLC								
		North State Communications								
					63110	202102				
					63110	2021/2				
		4100 Mendenhall Oaks Parkway, Suite 3 High Point, NC 27265	00							
С		TRUCTIONS: In line 1, give any business or trade in the already appear in space B. In line 2, give the matrix								
System	1	1 IDENTIFICATION OF CABLE SYSTEM:								
		MAILING ADDRESS OF CABLE SYSTEM:								
	2	(Number, street, rural route, apartment, or suite number)								
		(City, town, state, zip code)								
D	Ins	t ructions: For complete space D instructions, see p	age 1b. Identify only the first co	mmunity served below and r	elist on pag	e 1b				
Area	wit	all communities.								
Served		CITY OR TOWN	STATE							
First		High Point	NC							
Community	E	elow is a sample for reporting communities if you re	port multiple channel line-ups ir	n Space G.						
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	GRP#				
Sample	Ald	1	MD	Α		1				
Gampie	Alli	ance	MD	В		2				
	Ge	ing	MD	В		3				
form in order to pro numbers. By provi search reports pre	ocess ding P pared	tion 111 of Title 17 of the United States Code authorizes the Cop our statement of account. PII is any personal information that ca I, you are agreeing to the routine use of it to establish and mainta or the public. The effect of not providing the PII requested is that ments of account, and it may affect the legal sufficiency of the fili	n be used to identify or trace an individual ain a public record, which includes appe it may delay processing of your stateme	al, such as name, address, and tele aring in the Office's public indexes a ent of account and its placement in t	phone Ind in					

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ALLOCATION NUMBER

DATE RECEIVED

02/28/2022

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FORM	SA3E.	PAGE	1b.

			<u></u>							
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
North State Communications, LLC			63110							
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 filings.										
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses										
below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).										
When reporting the carriage of television broadcast stations on a community-by-community channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber grou									
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#							
High Point	NC			First						
Archdale	NC			Community						
Asheboro	NC									
Greensboro	NC									
Jamestown	NC									
Kernersville	NC			See instructions for						
Randleman	NC			additional information						
Thomasville	NC			on alphabetization.						
Trinity	NC									
				Add rows as necessary.						
		L		I						

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:											
Name	North State Communica	ations, LLC							63	311		
	SECONDARY TRANSMISSION	I SERVICE: S	UBSCR	IBERS AND F	RATES							
E	In General: The information in s			-								
0	system, that is, the retransmission											
Secondary Transmission	about other services (including plast day of the accounting period						those exis	sting on the				
Service: Sub-	Number of Subscribers: Both						able svster	n. broken				
scribers and												
Rates	each category by counting the n	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											
	category, but do not include disc						ns within a	particular rate				
	Block 1: In the left-hand block					condary transm	ission serv	ice that cable				
	systems most commonly provide			-		-						
	that applies to your system. Not			-		-						
	categories, that person or entity											
	subscriber who pays extra for ca first set" and would be counted o					a in the count u	inder "Serv	ice to the				
	Block 2: If your cable system					service that ar	e different	from those				
	printed in block 1 (for example, t											
	with the number of subscribers a					•	,	-				
	sufficient.	1			K 0							
	BLC	OCK 1 NO. OF			BLOCK 2							
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	GORY OF SE	RVICE	SUBSCRIBERS	RA	TE		
	Residential:				Fiber TV							
	Service to first set		9,576	\$ 25.00	Fiber-TV			9,451		90.		
	• Service to additional set(s)					inition (Reside		3,459	\$	5.9		
	• FM radio (if separate rate)					s Entertainmei	nt (Bus.)	40		57.0		
	Motel, hotel					s Lite (Bus.)		1		72.0		
	Commercial					s Office HD (B		113		82.0		
	Converter				Hospital	ity HD Plus (B	us.)	27	\$8	82.0		
	Residential											
	Non-residential											
	SERVICES OTHER THAN SEC	ONDARY TR	ANSMIS	SIONS: RATI	ES							
F	In General: Space F calls for ra	ite (not subscri	ber) info	ormation with r	espect to a	all your cable sy	/stem's ser	vices that were				
Г	not covered in space E, that is, t											
Services	service for a single fee. There and furnished at cost or (2) services											
Other Than	amount of the charge and the ur											
Secondary	enter only the letters "PP" in the		Jubuany	billed. If dify i		narged on a va		nogram bablo,				
ransmissions:												
Rates	Block 2: List any services that											
	listed in block 1 and for which a				lished. List	t these other se	rvices in th	ie form of a				
	brief (two- or three-word) descrip			ate for each.			T					
	CATEGORY OF SERVICE	BLO		ORY OF SEF		RATE	CATECO	BLOCK 2 RY OF SERVICE	RA	<u></u>		
	Continuing Services:	RATE		ation: Non-res		RATE	CATEGO	INT OF SERVICE	RA.			
	Pay cable			el, hotel	Jaoma	\$ 399.00	Extra Va	riety Tier	\$	9.0		
	Pay cable—add'l channel			nmercial		φ 000.00	Ultimate		\$	7.(
	• Fire protection		-	cable			Hispanic		\$	5.0		
	•Burglar protection		-	cable-add'l c	hannel		НВО			18.0		
	Installation: Residential			protection			Cinemax	(16.0		
	• First set			glar protection	ı		Starz			16.0		
	Additional set(s)			services:			Showtim	ie, TMS		10.9		
	• FM radio (if separate rate)			connect		\$ 38.00	Basic D			11.		
		1								-		
	• Converter		• Disc	connect			Enhance	ed DVR	\$ 2	22.0		
	, , ,			connect let relocation		\$ 20.00		ed DVR al Set Top Box	\$ 2 \$			
	, , ,		• Out		ress	\$20.00 \$50.00				22.		

	VNER OF CABLE SYS	5 I EIVI.			SYSTEM ID	
North State C	ommunicatio	ns, LLC			6311	0 Name
PRIMARY TRANSMIT	TERS: TELEVISIO	ON				
carried by your cabl FCC rules and regul 76.59(d)(2) and (4), substitute program b	e system during t lations in effect or 76.61(e)(2) and (pasis, as explaine	he accountin n June 24, 19 4), or 76.63 (d in the next	g period except 981, permitting t (referring to 76.6 paragraph	(1) stations carri he 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 [section: ; and (2) certain stations carried on a	G Primary Transmitters:
Substitute Basis basis under specific • Do not list the stati station was carrie • List the station her basis. For further in the paper SA3 Column 1: List e each multicast strea cast stream as "WE WETA-simulcast). Column 2: Give	s Stations: With r FCC rules, regul on here in space ed only on a subs e, and also in spa information conc form. ach station's call im associated with TA-2". Simulcast the channel numb	respect to any ations, or aut G—but do lis titute basis ace I, if the st erning substi sign. Do not h a station ac streams mus per the FCC I	y distant station thorizations: st it in space I (th ation was carrie itute basis static report originatio coording to its ov it be reported in has assigned to	he Special Stater ed both on a subs ons, see page (v) on program servic ver-the-air desigr column 1 (list ea the television sta	cable system on a substitute program ment and Program Log)—if the stitute basis and also on some othe of the general instructions located ces such as HBO, ESPN, etc. Identify nation. For example, report multi ach stream separately; for example ation for broadcasting over-the-air in	Television
on which your cable Column 3: Indica educational station, (for independent mu For the meaning of f Column 4: If the planation of local se Column 5: If you cable system carried carried the distant so For the retransmi	system carried the ate in each case of by entering the lease ilticast), "E" (for n these terms, see station is outside rvice area, see have entered "Ye d the distant static tation on a part-til ission of a distant	ne station whether the s etter "N" (for r oncommercia page (v) of th the local ser age (v) of the es" in column on during the me basis bec multicast str	tation is a network), "N-M" al educational), al educational), vice area, (i.e. " e general instruct a 4, you must con accounting peri- cause of lack of eam that is not	ork station, an ind (for network mult or "E-M" (for non- uctions located in 'distant"), enter "Y tions located in to omplete column 5 iod. Indicate by e activated channe subject to a royal	i, stating the basis on which you entering "LAC" if your cable syster	
the cable system an tion "E" (exempt). For explanation of these Column 6: Give	d a primary trans or simulcasts, also three categories the location of ea or Canadian statio	mitter or an a o enter "E". If , see page (v ch station. Fo ons, if any, giv	association repro f you carried the () of the general or U.S. stations, we the name of t	esenting the prim channel on any instructions loca list the commun the community w	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 ith which the station is identified	
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the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WCWG WFMY-5 WFMY-3 WFMY-3 WFMY-4 WFMY-4 WFMY-4 WGHP-4 WGHP-5 WGHP-5 WGHP-6 WGHP-3 WGPX WLX1	d a primary trans or simulcasts, also three categories the location of ea or Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 16.1 35.5 35.3 35.1 35.4 35.4 35.2 31.4 31.5 31.6 31.3 26.3 20.17	mitter or an a o enter "E". If , see page (v ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION I N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	association repro- f you carried the () of the general or U.S. stations, we the name of the , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	esenting the prime channel on any instructions loca list the community we space G for eace AA 5. BASIS OF CARRIAGE	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 ith which the station is identified th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION Lexington, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC High Point, NC High Point, NC High Point, NC High Point, NC Burlington, NC	additional information
the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WCWG WFMY-5 WFMY-3 WFMY-4 WFMY-4 WFMY-4 WFMY-4 WGHP-4 WGHP-5 WGHP-6 WGHP-6 WGHP-3 WGPX WLXI WMYV-5	d a primary trans or simulcasts, also three categories the location of ea or Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 16.1 35.5 35.3 35.1 35.4 35.4 35.2 31.4 31.5 31.6 31.3 26.3 20.17 28.5	mitter or an a o enter "E". If , see page (v ch station. Fe ons, if any, giv nnel line-ups, CHANNI 3. TYPE OF STATION I N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	association repro- f you carried the y) of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	esenting the prime channel on any instructions loca list the community we space G for eace AA 5. BASIS OF CARRIAGE	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 ith which the station is identified th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION 6. LOCATION OF STATION 6. LOCATION OF STATION Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC High Point, NC High Point, NC High Point, NC High Point, NC Greensboro, NC Greensboro, NC Greensboro, NC	additional information
the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WCWG WFMY-5 WFMY-3 WFMY-4 WFMY-4 WFMY-4 WGHP-4 WGHP-5 WGHP-5 WGHP-6 WGHP-3 WGHP-3 WGPX WLXI WMYV-5 WMYV-4	d a primary trans or simulcasts, also three categories the location of ea or Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 16.1 35.5 35.3 35.1 35.4 35.4 35.2 31.4 31.5 31.6 31.3 26.3 20.17 28.5 28.4	mitter or an a o enter "E". If , see page (v ch station. Fo nns, if any, giv nnel line-ups, CHANN 3. TYPE OF STATION I N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	association repro- f you carried the () of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	esenting the prime channel on any instructions loca list the community we space G for eace AA 5. BASIS OF CARRIAGE	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 ith which the station is identified th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION 6. LOCATION OF STATION Cereensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC High Point, NC High Point, NC High Point, NC High Point, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC	additional information
the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WCWG WFMY-5 WFMY-3 WFMY-4 WFMY-4 WFMY-4 WGHP-4 WGHP-5 WGHP-6 WGHP-3 WGHP-3 WGHP-3 WGHP-3 WGHP-3 WGHP-3 WGHV-4 WMYV-5 WMYV-4 WMYV-3	d a primary trans or simulcasts, also three categories the location of ea or Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 16.1 35.5 35.3 35.1 35.4 35.4 35.4 35.2 31.4 31.5 31.6 31.3 26.3 20.17 28.5 28.4 28.3	mitter or an a so enter "E". If , see page (v ch station. Fo nns, if any, giv nnel line-ups, CHANNI 3. TYPE OF STATION I N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	association repro- f you carried the y) of the general or U.S. stations, we the name of f , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	esenting the prime channel on any instructions loca list the community we space G for eace AA 5. BASIS OF CARRIAGE	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 ith which the station is identified th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION 6. LOCATION OF STATION 6. LOCATION OF STATION Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC High Point, NC High Point, NC High Point, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC	additional information
the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utili 1. CALL SIGN WCWG WFMY-5 WFMY-3 WFMY-4 WFMY-4 WFMY-4 WGHP-4 WGHP-4 WGHP-5 WGHP-6 WGHP-6 WGHP-7 WGHP-8 WGHP-8 WGHP-8 WGHP-8 WGHP-8 WGHP-8 WGHP-8 WGHP-1 WGHP-8 WGHP-8 WGHP-1 WGHP-1 WGHP-1 WGHP-1 WGHP-1 WGHP-1 WGHP-3 WGHP-1 WGHP-3 WGH2 WGH2 WGH2 WGH2 WGH2 WGH2 WGH2 WGH2	d a primary trans or simulcasts, also three categories the location of ea or Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 16.1 35.5 35.3 35.1 35.4 35.4 35.2 31.4 31.5 31.6 31.3 26.3 20.17 28.5 28.4 28.3 33.4	mitter or an a so enter "E". If , see page (v ch station. Fo ons, if any, giv nel line-ups, CHANN 3. TYPE OF STATION I N-M N-M N-M N-M N-M N-M N-M N-M N-M I I I I I I-M I I-M I E-M	association repro- f you carried the () of the general or U.S. stations, we the name of the use a separate EL LINE-UP 4. DISTANT? (Yes or No) 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	esenting the prime channel on any instructions loca list the community we space G for eace AA 5. BASIS OF CARRIAGE	Aary 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 ith which the station is identified th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION Lexington, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC High Point, NC High Point, NC High Point, NC High Point, NC Greensboro, NC	additional information
the cable system an tion "E" (exempt). For explanation of these Column 6: Give FCC. For Mexican of Note: If you are utilit 1. CALL SIGN WCWG WFMY-5 WFMY-3 WFMY-4 WFMY-4 WFMY-4 WGHP-4 WGHP-5 WGHP-4 WGHP-5 WGHP-3 WGHP-3 WGHP-3 WGHP-3 WGHP-3 WGHP-3 WGHV-4 WMYV-5 WMYV-4 WMYV-3	d a primary trans or simulcasts, also three categories the location of ea or Canadian static zing multiple char 2. B'CAST CHANNEL NUMBER 16.1 35.5 35.3 35.1 35.4 35.4 35.4 35.2 31.4 31.5 31.6 31.3 26.3 20.17 28.5 28.4 28.3	mitter or an a so enter "E". If , see page (v ch station. Fo nns, if any, giv nnel line-ups, CHANNI 3. TYPE OF STATION I N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	association repro- f you carried the y) of the general or U.S. stations, we the name of f , use a separate EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	esenting the prime channel on any instructions loca list the community we space G for eace AA 5. BASIS OF CARRIAGE	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 ith which the station is identified th channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION 6. LOCATION OF STATION 6. LOCATION OF STATION Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC High Point, NC High Point, NC High Point, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC Greensboro, NC	additional information

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Nama
North State Co	ommunicatio	ns, LLC			63110	Name
PRIMARY TRANSMIT	TERS: TELEVISIO	N				
carried by your cable	system during t	he accountin	g period except	(1) stations carri	ns and low power television stations) ed only on a part-time basis under rtain network programs [section:	G
76.59(d)(2) and (4), 7	76.61(e)(2) and (4), or 76.63	(referring to 76.	•	; and (2) certain stations carried on a	Primary
substitute program ba				is carried by your	cable system on a substitute progran	Transmitters: Television
basis under specifc F	CC rules, regula	ations, or aut	horizations			relevision
 Do not list the station station was carried 			st it in space I (t	he Special State	ment and Program Log)—if the	
 List the station here 	e, and also in spa information conc	ace I, if the st			stitute basis and also on some othe of the general instructions located	
Column 1: List ea	ch station's call	-			ces such as HBO, ESPN, etc. Identify	
			•	•	nation. For example, report multi ach stream separately; for example	
WETA-simulcast).			·	,		
its community of licer	nse. For example	e, WRC is Ch	0		ation for broadcasting over-the-air ir is may be different from the channe	
	te in each case v	whether the s			dependent station, or a noncommercia	
	• •	•	,	•	ticast), "I" (for independent), "I-M commercial educational multicast)	
For the meaning of th	nese terms, see	page (v) of th	ne general instru	uctions located in	,	
planation of local ser					he paper SA3 form , stating the basis on which you	
			•	-	entering "LAC" if your cable system	
carried the distant sta						
					Ity payment because it is the subjec system or an association representin	
the cable system and	l a primary trans	mitter or an a	association repr	esenting the prim	nary transmitter, enter the designa	
· · · /					other basis, enter "O." For a furthe Ited in the paper SA3 form	
Column 6: Give th	ne location of ea	ch station. Fo	or U.S. stations,	, list the commun	ity to which the station is licensed by the	
FCC. For Mexican or Note: If you are utiliz					ith which the station is identifec	
			EL LINE-UP			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
WUNL-3	33.3	E-M	NO		Winston Salem, NC	
WXII-2	16.2	N-M	NO		Winston Salem, NC	
WXII-1	16.1	N	NO		Winston Salem, NC	
WXLV-3	29.3	N	NO		Winston Salem, NC	
WXLV-5	29.5	N-M	NO		Winston Salem, NC	
WXLV-6	29.6	N-M	NO		Winston Salem, NC	
WXLV-4	29.4	N-M	NO		Winston Salem, NC	
				1		

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	N
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMIT	TERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during t ations in effect o 6.61(e)(2) and	the accountin in June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.	(1) stations carrie	as and low power television stations) ed only on a part-time basis under rtain network programs [section: and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
station was carried • List the station here basis. For further i in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give th	n here in space d only on a subs , and also in sp nformation cond orm. ch station's call n associated wit A-2". Simulcast ne channel num	G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC	st it in space I (t ation was carrie itute basis static report originatic ccording to its o st be reported in has assigned to	ed both on a subsons, see page (v) on program servic ver-the-air design column 1 (list each the television sta	nent and Program Log)—if the titute 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 titon for broadcasting over-the-air ir s may be different from the channe	
on which your cable s Column 3: Indicat educational station, b	system carried t te in each case by entering the le	he station whether the s etter "N" (for r	station is a netw network), "N-M"	ork station, an inc (for network mult	dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast)	
For the meaning of th	iese terms, see	page (v) of th	ne general instru	uctions located in	the paper SA3 form	
planation of local sen Column 5: If you l cable system carried carried the distant sta For the retransmis	vice area, see p have entered "Y the distant stati ation on a part-ti sion of a distan	age (v) of the 'es" in columr on during the me basis bec t multicast str	e general instruct a 4, you must co accounting per cause of lack of eam that is not	tions located in the properties the column 5, iod. Indicate by e activated channel subject to a royal	, stating the basis on which you ntering "LAC" if your cable systen I capacity ty payment because it is the subjec	
the cable system and tion "E" (exempt). For explanation of these Column 6: Give th	a primary trans simulcasts, als three categories he location of ea Canadian statio	smitter or an a so enter "E". If s, see page (v ach station. Fe ons, if any, giv	association repr f you carried the /) of the general or U.S. stations ve the name of	esenting the prim channel on any of linstructions locat list the communi the community wi	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 th which the station is identifec h channel line-up.	
		CHANN	EL LINE-UP	AC		
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#	Name
North State Co	mmunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regulat	system during t tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.6	(1) stations carrie he carriage of ce	as and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your	cable system on a substitute progran	Television
basis under specifc F0 • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fo Column 1: List ead each multicast stream cast stream as "WETA- WETA-simulcast). Column 2: Give th its community of licen: on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried th carried the distant star For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these tt Column 6: Give th	CC rules, regul a here in space only on a subs and also in spa- formation cond- orm. ch station's call associated with A-2". Simulcast e channel num se. For examply ystem carried t e in each case y entering the lo cast), "E" (for n ese terms, see ation is outside ice area, see p ave entered "Y the distant stati ision of a distant t entered into c a primary trans simulcasts, als hree categories e location of ea	ations, or aut G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Ch he station whether the s etter "N" (for r ioncommercia page (v) of the table (v) of the es" in column on during the me basis bec t multicast str on or before J smitter or an a so enter "E". If s, see page (v)	horizations: st it in space I (t ation was carrie itute basis static report originatic ccording to its or it be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instru- vice area, (i.e.," e general instru- vice area, (i.e., " e general instru- vice area, (i.e., " e general instru- sause of lack of eam that is not une 30, 2009, b association repri- f you carried the or U.S. stations,	he Special Staten ad both on a subs- ons, see page (v) on program servic ver-the-air design column 1 (list ea- the television sta- hington, D.C. This ork station, an inc (for network multi or "E-M" (for non- uctions located in the mplete column 5, iod. Indicate by e activated channel subject to a royal etween a cable s- esenting the prime channel on any of instructions located list the communi	nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identifi- ation. For example, report multi ch stream separately; for example titon for broadcasting over-the-air ir s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form 'es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you intering "LAC" if your cable syster	Television
Note: If you are utilizing						
		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	

LEGAL NAME OF (OWNER OF CABLE SY	STEM:			SYSTEM ID:	Namo
North State	Communicatio	ns, LLC			63110)
PRIMARY TRANSM	NITTERS: TELEVISIO	ON				
In General: In spa carried by your cal FCC rules and reg 76.59(d)(2) and (4 substitute program Substitute Bas basis under specif • Do not list the sta station was carrier • List the station he basis. For furthhin in the paper SA Column 1: List each multicast stree cast stream as "W WETA-simulcast). Column 2: Give ts community of lie	ace G, identify ever ble system during t julations in effect o), 76.61(e)(2) and (n basis, as explaine sis Stations: With fc FCC rules, regula ation here in space ried only on a subs erer, and also in spa er information cond 3 form. each station's call eam associated wit 'ETA-2". Simulcast e the channel numi cense. For example	y television si he accounting n June 24, 19 (4), or 76.63 (ed in the next respect to any ations, or auti G—but do lis titute basis ace I, if the st cerning substi sign. Do not h a station ac streams mus ber the FCC I e, WRC is Ch	g period except 981, permitting t (referring to 76.6 paragraph y distant station horizations: st it in space I (the ration was carried itute basis static report originatic coording to its on at be reported in has assigned to	(1) stations carrie the carriage of cer 61(e)(2) and (4))]; is carried by your he Special Staten ed both on a subst ons, see page (v) on program servic ver-the-air design column 1 (list eac o the television sta	as and low power television stations) ed only on a part-time basis under rtain network programs [section: and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the titute 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 titon for broadcasting over-the-air ir s may be different from the channe	G Primary Transmitters: Television
Column 3: Indi		whether the s			lependent station, or a noncommercia icast), "I" (for independent), "I-M	
For the meaning o	of these terms, see	page (v) of th	ne general instru	uctions located in	commercial educational multicast) the paper SA3 form	
blanation of local s Column 5: If yo cable system carri	service area, see p ou have entered "Y ed the distant station station on a part-ti	age (v) of the es" in column on during the me basis bec	e general instruct n 4, you must co accounting per cause of lack of	tions located in th omplete column 5, iod. Indicate by en activated channel	, stating the basis on which you ntering "LAC" if your cable systen	
For the retransm of a written agreen the cable system a tion "E" (exempt). I explanation of thes Column 6: Give FCC. For Mexican	ment entered into o and a primary trans For simulcasts, als se three categories e the location of ea or Canadian static	n or before Ju mitter or an a o enter "E". If s, see page (v ich station. Fo ons, if any, giv	une 30, 2009, b association repre- f you carried the () of the general or U.S. stations, ve the name of t	etween a cable s esenting the prime channel on any of linstructions locat list the communi the community wi	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 th which the station is identifec	
For the retransm of a written agreen the cable system a tion "E" (exempt). I explanation of thes Column 6: Give FCC. For Mexican	nent entered into o and a primary trans For simulcasts, als se three categories e the location of ea	n or before Ju mitter or an a o enter "E". If s, see page (v ich station. Fo ons, if any, giv nnel line-ups,	une 30, 2009, b association repri- f you carried the () of the general or U.S. stations, ve the name of t , use a separate	etween a cable s esenting the prime channel on any o linstructions locat list the communit the community wi e space G for each	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 th which the station is identifec	
For the retransm of a written agreen the cable system a tion "E" (exempt). I explanation of thes Column 6: Give FCC. For Mexican Note: If you are ut	ment entered into o and a primary trans For simulcasts, als se three categories e the location of ea or Canadian static tillizing multiple cha	n or before Ju mitter or an a o enter "E". If s, see page (v ich station. Fo ons, if any, giv nnel line-ups,	une 30, 2009, b association repri- f you carried the /) of the general or U.S. stations, ve the name of t , use a separate EL LINE-UP 4. DISTANT? (Yes or No)	etween a cable s esenting the prime channel on any o linstructions locat list the communit the community wi e space G for each	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 th which the station is identifec	-
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
North State Co	mmunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable s FCC rules and regulat	system during t tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.0	(1) stations carrie he carriage of ce	as and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your	cable system on a substitute progran	Television
Substitute Basis S basis under specifc F(• Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 for Column 1: List ead cast stream as "WETA WETA-simulcast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these tt Column 6: Give th	Stations: With CC rules, regul in here in space only on a subs and also in spa- formation condor orm. ch station's call associated with A-2". Simulcast e channel num se. For exampl ystem carried t e neach case y entering the la cast), "E" (for n ese terms, see lation is outside ice area, see p pave entered "Y the distant stati ision of a distant t entered into c a primary trans simulcasts, als hree categories e location of ea	respect to an ations, or auti G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s etter "N" (for r ioncommercia page (v) of the the local ser age (v) of the the local ser age (v) of the me basis bec t multicast str on or before J smitter or an a so enter "E". If s, see page (v	y distant station horizations: st it in space I (t ation was carrie itute basis static report originatic ccording to its o it be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instruct accounting per ause of lack of eam that is not une 30, 2009, b association repr f you carried the or U.S. stations,	he Special Staten ad both on a subs- ons, see page (v) on program servic ver-the-air design column 1 (list ea- the television sta- hington, D.C. This ork station, an inc (for network multi or "E-M" (for non- uctions located in the mplete column 5, iod. Indicate by e activated channel subject to a royal etween a cable s- esenting the prime channel on any of instructions located list the communi	nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identifi- ation. For example, report multi ch stream separately; for example titon for broadcasting over-the-air ir s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form 'es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you intering "LAC" if your cable syster	Television
Note: If you are utilizin						
		CHANN	EL LINE-UP	AF		
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 OW	NER OF CABLE SY	STEM:			SYSTEM ID#	
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMIT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during t itions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your	cable system on a substitute progran	Television
station was carried • List the station here basis. For further i in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give th its community of licer on which your cables Column 3: Indicate educational station, b	n here in space d only on a subs , and also in spa- nformation condor orm. ch station's call n associated with A-2". Simulcast he channel num ise. For exampl system carried t e in each case y entering the la icast), "E" (for n	G—but do list stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Ch he station whether the s etter "N" (for r ioncommercia	st it in space I (t ation was carrie itute basis statio report originatio ccording to its o st be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational),	ed both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list ea o the television sta hington, D.C. Thi ork station, an inc (for network mult or "E-M" (for non	nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identifi- nation. For example, report multi ch stream separately; for example ation for broadcasting over-the-air in s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form	
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	-	CHANN	EL LINE-UP	AG		
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#	Nomo
North State Co	mmunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regulat	system during t tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.0	(1) stations carrie	es and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
Substitute Basis 3 basis under specifc FG • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 for Column 1: List ead cast stream as "WETA WETA-simulcast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these tt Column 6: Give th	Stations: With CC rules, regul in here in space only on a subs and also in spa- formation condor orm. ch station's call associated with A-2". Simulcast e channel num se. For exampl ystem carried t e neach case y entering the la cast), "E" (for n ese terms, see lation is outside ice area, see p pave entered "Y the distant stati ision of a distant t entered into c a primary trans simulcasts, als hree categories e location of eat	respect to an ations, or auti G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s etter "N" (for r ioncommercia page (v) of the the local ser age (v) of the the local ser age (v) of the me basis bec t multicast str on or before J smitter or an a so enter "E". If s, see page (v	y distant station horizations: st it in space I (t ation was carrie tute basis static report originatic ccording to its o it be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instruct of accounting per ause of lack of eam that is not une 30, 2009, b association repr f you carried the or U.S. stations,	he Special Staten ad both on a subs- ons, see page (v) on program servic ver-the-air design column 1 (list ea- the television sta- hington, D.C. This ork station, an inc (for network multi or "E-M" (for non- uctions located in the proplete column 5, iod. Indicate by e activated channel subject to a royal retween a cable st essenting the prime channel on any of list the communi	nent and Program Log)—if the titute 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 Rependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form (es". If not, enter "No". For an ex- ne paper SA3 form is stating the basis on which you intering "LAC" if your cable systen 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 ty to which the station is licensed by the	Television
Note: If you are utilizing					th which the station is identifec h channel line-up.	
		CHANN	EL LINE-UP	AH		
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 OV	WNER OF CABLE SY	STEM:			SYSTEM ID#	Name
North State C	Communicatio	ons, LLC			63110	Naille
PRIMARY TRANSMI	TTERS: TELEVISI	ON				
In General: In spac carried by your cabl FCC rules and regu 76.59(d)(2) and (4), substitute program I Substitute program I Substitute Basis basis under specifc • Do not list the stati station was carrie • List the station her basis. For further in the paper SA3 Column 1: List e each multicast strea cast stream as "WE WETA-simulcast). Column 2: Give its community of lice	G Primary Transmitters: Television					
educational station, for independent mu For the meaning of Column 4: If the olanation of local se Column 5: If you cable system carried carried the distant s For the retransm of a written agreement he cable system ar ion "E" (exempt). For explanation of these Column 6: Give	ate in each case of by entering the le ulticast), "E" (for n these terms, see station is outside envice area, see p u have entered "Y d the distant stati- tation on a part-ti- ission of a distant ent entered into on d a primary trans- or simulcasts, also the location of ea- or Canadian station	whether the s etter "N" (for r ioncommercia page (v) of the the local ser age (v) of the ces" in columr on during the me basis bec t multicast str on or before J smitter or an a so enter "E". If s, see page (v ach station. Fo ons, if any, giv	network), "N-M" al educational), ne general instru- vice area, (i.e. ' general instruc- t 4, you must cc accounting per eause of lack of eam that is not une 30, 2009, b association repr f you carried the r) of the general pr U.S. stations, we the name of	(for network multi or "E-M" (for non- uctions located in 'distant"), enter "Y tions located in the mplete column 5, iod. Indicate by el activated channel subject to a royal estween a cable sy esenting the prime e channel on any c instructions locat , list the communit the community with	stating the basis on which you ntering "LAC" if your cable systen 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 ty to which the station is licensed by the th which the station is identifec	
	g	•	EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OW	VNER OF CABLE SY	STEM:			SYSTEM ID#	Namo
North State C	ommunicatio	ons, LLC			63110	Naille
PRIMARY TRANSMIT	TERS: TELEVISI	ON				
In General: In space carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute program b Substitute Basis basis under specific l • Do not list the station station was carrie • List the station here basis. For further in the paper SA3 Column 1: List er each multicast stread cast stream as "WET WETA-simulcast). Column 2: Give f its community of lice	G Primary Transmitters: Television					
on which your cable Column 3: Indica educational station, I for independent mu For the meaning of t Column 4: If the column 5: If you cable system carried For the retransmis of a written agreeme he cable system an- ion "E" (exempt). For explanation of these Column 6: Give t	system carried t ate in each case by entering the le lticast), "E" (for m hese terms, see station is outside rvice area, see p have entered "Y d the distant stati tation on a part-ti ssion of a distan- ent entered into c d a primary trans or simulcasts, als three categories the location of ea r Canadian station	he station whether the s etter "N" (for r ioncommercia page (v) of the the local ser age (v) of the ces" in column on during the me basis bec t multicast str n or before J smitter or an a to enter "E". If s, see page (v ach station. Fo ons, if any, giv	tation is a network), "N-M" al educational), ne general instru- vice area, (i.e. " a general instruct a 4, you must co accounting per vause of lack of eam that is not une 30, 2009, b association repri- f you carried the ty of the general or U.S. stations, we the name of the	ork station, an ind (for network multi or "E-M" (for non- uctions located in 'distant"), enter "Y stions located in the omplete column 5, iod. Indicate by en- activated channel subject to a royal etween a cable sy essenting the prim- e channel on any of instructions locat , list the communit the community with	lependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form (es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable systen 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 ty to which the station is licensed by the th which the station is identifec	
		•	EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Nomo
North State Co	mmunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable s FCC rules and regulat	system during t tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.0	(1) stations carrie	es and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your	cable system on a substitute progran	Television
Substitute Basis S basis under specifc F(• Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 for Column 1: List ead cast stream as "WETA WETA-simulcast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried t carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these tt Column 6: Give th	Stations: With CC rules, regul in here in space only on a subs and also in spa- formation condor orm. ch station's call associated with A-2". Simulcast e channel num se. For exampl ystem carried t e neach case y entering the la cast), "E" (for n ese terms, see lation is outside ice area, see p pave entered "Y the distant stati ision of a distant t entered into c a primary trans simulcasts, als hree categories e location of eat	respect to an ations, or auti G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s etter "N" (for r ioncommercia page (v) of the the local ser age (v) of the the local ser age (v) of the me basis bec t multicast str on or before J smitter or an a so enter "E". If s, see page (v	y distant station horizations: st it in space I (t ation was carrie tute basis static report originatic ccording to its o it be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instruct of accounting per ause of lack of eam that is not une 30, 2009, b association repr f you carried the or U.S. stations,	he Special Staten ad both on a subs- ons, see page (v) on program servic ver-the-air design column 1 (list ea- the television sta- hington, D.C. This ork station, an inc (for network multi or "E-M" (for non- uctions located in the proplete column 5, iod. Indicate by e activated channel subject to a royal retween a cable st essenting the prime channel on any of list the communi	nent and Program Log)—if the titute 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 Rependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form (es". If not, enter "No". For an ex- ne paper SA3 form is stating the basis on which you intering "LAC" if your cable systen 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 ty to which the station is licensed by the	
Note: If you are utilizin					th which the station is identifec h channel line-up.	
		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 OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Nama
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMIT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during itions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63	g period except 981, permitting t (referring to 76.	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
 basis under specifc F Do not list the station station was carried List the station here basis. For further i in the paper SA3 f Column 1: List ea each multicast strean cast stream as "WET WETA-simulcast). Column 2: Give th its community of licer on which your cables Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: If the s planation of local serv 	CC rules, regul n here in space d only on a subs , and also in sp nformation concorre- orm. ch station's call n associated wit A-2". Simulcast ne channel num ise. For exampl system carried t e in each case y entering the la icast), "E" (for r lese terms, see tation is outside vice area, see p	ations, or aut G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Ch he station whether the s setter "N" (for r ioncommercia page (v) of the age (v) of the	horizations: st it in space I (t report originatic coording to its o to be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instru- vice area, (i.e. ⁴	he Special Stater ed both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list ea hington, D.C. Thi- ork station, an inco (for network mult or "E-M" (for nom uctions located in 'distant"), enter "Y	nent and Program Log)—if the titute 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 ation for broadcasting over-the-air ir s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form 'es". If not, enter "No". For an ex	
cable system carried carried the distant sta For the retransmis of a written agreemen the cable system and tion "E" (exempt). For explanation of these Column 6: Give th	the distant stati tition on a part-ti sion of a distan nt entered into o a primary trans simulcasts, als three categories the location of ea Canadian statio	on during the me basis bec t multicast str on or before J smitter or an a to enter "E". It s, see page (\ ach station. Fr ons, if any, gir	accounting per cause of lack of eam that is not une 30, 2009, b association repr f you carried the /) of the general or U.S. stations we the name of	iod. Indicate by e activated channe subject to a royal etween a cable s esenting the prim channel on any instructions locat list the communit the community wi	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 ty to which the station is licensed by the th which the station is identifec	
		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 STATION	(Yes or No)	CARRIAGE (If Distant)	0. LOCATION OF STATION	

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMIT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during itions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
station was carried • List the station here basis. For further i in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give th its community of licer on which your cables Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: If the s	n here in space d only on a subs , and also in sp nformation con- orm. ch station's call n associated wit A-2". Simulcast he channel num ise. For exampl system carried t e in each case y entering the lu icast), "E" (for r use terms, see tation is outside	G—but do list stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Ch he station whether the s setter "N" (for r concommercia page (v) of the the local ser	st it in space I (t ation was carrie itute basis statio report originatio coording to its o at be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instru- vice area, (i.e. '	ed both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list ea o the television sta hington, D.C. Thi ork station, an inc (for network mult or "E-M" (for none uctions located in "distant"), enter "Y	es". If not, enter "No". For an ex	
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		CHANN	EL LINE-UP	AM		
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 OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Nama
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63	g period except 981, permitting t (referring to 76.	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
station was carried • List the station here basis. For further if in the paper SA3 for Column 1: List ea each multicast stream cast stream as "WET. WETA-simulcast). Column 2: Give the its community of licentian on which your cables Column 3: Indicatt educational station, b	n here in space l only on a subs , and also in sp information con- orm. ch station's call n associated wil A-2". Simulcast the channel num ise. For exampl system carried t e in each case y entering the lo	G—but do list stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Ch he station whether the s etter "N" (for n	st it in space I (t ation was carrie itute basis statio report originatio ccording to its o st be reported in has assigned to hannel 4 in Was station is a netw network), "N-M"	ed both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list ea o the television sta hington, D.C. Thi ork station, an inc (for network mult	nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identify vation. For example, report multi ch stream separately; for example ation for broadcasting over-the-air ir s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast)	
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		CHANN	EL LINE-UP	AN		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	-			,		

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Nomo
North State Co	mmunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during t tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.0	(1) stations carrie he carriage of ce	as and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				s carried by your	cable system on a substitute progran	Television
Substitute Basis 3 basis under specifc F0 • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 for Column 1: List ear cast stream as "WET/ WETA-simulcast stream cast stream as "WET/ WETA-simulcast). Column 2: Give th its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the si planation of local serv Column 5: If you h cable system carried to carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	Stations: With CC rules, regul in here in space only on a subs and also in spa- formation condor orm. ch station's call associated with A-2". Simulcast e channel num se. For exampl ystem carried t e neach case y entering the la cast), "E" (for n ese terms, see lation is outside ice area, see p pave entered "Y the distant stati ision of a distant t entered into c a primary trans simulcasts, als hree categories e location of ea	respect to an ations, or auti G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s etter "N" (for r ioncommercia page (v) of the the local ser age (v) of the the local ser age (v) of the me basis bec t multicast str on or before J smitter or an a so enter "E". If s, see page (v	y distant station horizations: st it in space I (t ation was carrie tute basis static report originatic ccording to its o it be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instruct of accounting per ause of lack of eam that is not une 30, 2009, b association repr f you carried the or U.S. stations,	he Special Staten ad both on a subs- ons, see page (v) on program servic ver-the-air design column 1 (list ea- the television sta- hington, D.C. This ork station, an inc (for network multi or "E-M" (for non- uctions located in the mplete column 5, iod. Indicate by e activated channel subject to a royal etween a cable s- esenting the prime channel on any of instructions located list the communi	nent and Program Log)—if the titute 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 s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form 'es". If not, enter "No". For an ex he paper SA3 form 's stating the basis on which you intering "LAC" if your cable systen 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 ty to which the station is licensed by the	Television
Note: If you are utilizi					th which the station is identifec h channel line-up.	
		CHANN	EL LINE-UP	AO		
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 OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Namo	
North State Co	ommunicatio	ns, LLC			63110	Naille	
PRIMARY TRANSMIT	TERS: TELEVISI	NC					
 n 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 ECC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried 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 associated with a station according to its over-the-air designation. For example, report multi east stream as "WETA-2". Simulcast streams must be reported in column 1 (list each station for broadcasting over-the-air ir ts community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 							
educational station, t for independent mul For the meaning of th Column 4: If the solanation of local ser Column 5: If you cable system carried carried the distant sta For the retransmis of a written agreeme he cable system and ion "E" (exempt). Fo explanation of these Column 6: Give the	té in each case to by entering the le ticast), "E" (for m nese terms, see station is outside vice area, see p have entered "Y the distant stati ation on a part-ti ssion of a distant nt entered into o d a primary trans r simulcasts, als three categories he location of eac Canadian statio	whether the s etter "N" (for r ioncommercia page (v) of the the local ser age (v) of the es" in column on during the me basis bec t multicast str n or before Ju smitter or an a o enter "E". If s, see page (v ich station. Fo ons, if any, giv	network), "N-M" al educational), ne general instru- vice area, (i.e. " general instruct 1 4, you must cc accounting per eause of lack of eam that is not une 30, 2009, b association repri- f you carried the r) of the general pr U.S. stations, we the name of the	(for network multi or "E-M" (for non- uctions located in distant"), enter "Y tions located in the mplete column 5, iod. Indicate by el activated channel subject to a royal etween a cable sy essenting the prime channel on any c instructions locat list the community with	es". If not, enter "No". For an ex the paper SA3 form stating the basis on which you ntering "LAC" if your cable systen capacity by payment because it is the subjec ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ed in the paper SA3 form by to which the station is licensed by the the which the station is identifec		
-		CHANN	EL LINE-UP	AP		-	
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 OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Nama
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
station was carried • List the station here basis. For further i in the paper SA3 fr Column 1: List ea each multicast stream cast stream as "WET. WETA-simulcast). Column 2: Give th its community of licer on which your cables Column 3: Indicat educational station, b (for independent mult For the meaning of th	n here in space l only on a subs , and also in sp information con- orm. ch station's call n associated wil A-2". Simulcast he channel num ise. For exampl system carried t e in each case y entering the li icast), "E" (for r ese terms, see	G—but do list stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Ch he station whether the s setter "N" (for r ioncommercia page (v) of th	st it in space I (t ation was carrie itute basis statio report originatio coording to its o at be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), ne general instru	ed both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list ea b the television sta hington, D.C. This ork station, an inc (for network mult or "E-M" (for none uctions located in	nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identifi- iation. For example, report multi ch stream separately; for example ation for broadcasting over-the-air in s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form Yes". If not, enter "No". For an ex	
cable system carried carried the distant sta For the retransmis of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	have entered "Y the distant stati tition on a part-ti sion of a distan at entered into c a primary trans simulcasts, als hree categories te location of ea Canadian statio	es" in column on during the me basis bec t multicast str on or before J smitter or an a so enter "E". If s, see page (v ach station. F ons, if any, giv nnel line-ups	A, you must compare a second to the secon	omplete column 5 riod. Indicate by e activated channe subject to a royal between a cable s essenting the prim e channel on any i instructions locat , list the communit the community wi e space G for eac	, stating the basis on which you ntering "LAC" if your cable systen 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 ty to which the station is licensed by the th which the station is identifec	
	1	CHANN	EL LINE-UP	AQ		
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	
		1		1		1

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	N
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during t itions in effect o 6.61(e)(2) and	the accountin in June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.0	(1) stations carrie	is and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
station was carried • List the station here basis. For further i in the paper SA3 fi Column 1: List ea each multicast stream cast stream as "WET.	n here in space I only on a subs , and also in spa nformation cond orm. ch station's call n associated wit	G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac	st it in space I (t ation was carrie itute basis static report originatic ccording to its o	ed both on a subs ons, see page (v) on program servic ver-the-air design	nent and Program Log)—if the titute 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	
WETA-simulcast).	e channel num	ber the FCC	has assigned to	the television sta	tion for broadcasting over-the-air ir	
			-		s may be different from the channe	
educational station, b (for independent mult For the meaning of th	e in each case y entering the le icast), "E" (for n lese terms, see	whether the s etter "N" (for r noncommercia page (v) of th	network), "N-M" al educational), ne general instru	(for network mult or "E-M" (for none uctions located in	lependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form ′es". If not, enter "No". For an ex	
planation of local serv Column 5: If you be cable system carried carried the distant star For the retransmis of a written agreement the cable system and tion "E" (exempt). For explanation of these to Column 6: Give the	vice area, see p have entered "Y the distant stati tition on a part-ti sion of a distan nt entered into c a primary trans simulcasts, als three categories the location of ea Canadian static	age (v) of the fes" in column on during the ime basis bec t multicast str on or before J smitter or an a co enter "E". If s, see page (v ach station. Fo ons, if any, giv	e general instruct 1 4, you must cc accounting per- cause of lack of team that is not une 30, 2009, b association repr f you carried the /) of the general or U.S. stations, we the name of	tions located in the properties of the second secon	te paper SA3 form stating the basis on which you ntering "LAC" if your cable syster 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 ty to which the station is licensed by the th which the station is identifec	
		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	
		••••••				
					1	

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Nama
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMIT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during t itions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
station was carried • List the station here basis. For further i in the paper SA3 f Column 1: List ea each multicast stream cast stream as "WET WETA-simulcast). Column 2: Give th its community of licer on which your cables Column 3: Indicate educational station, b	n here in space d only on a subs , and also in spa- nformation condor orm. ch station's call n associated with A-2". Simulcast he channel num ise. For exampl system carried t e in each case y entering the la icast), "E" (for n	G—but do list stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC e, WRC is Ch he station whether the s etter "N" (for r ioncommercia	st it in space I (t ation was carrie itute basis statio report originatio ccording to its o st be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational),	ed both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list ea o the television sta hington, D.C. Thi ork station, an inc (for network mult or "E-M" (for non	nent and Program Log)—if the titute 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 ation for broadcasting over-the-air ir s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form	
planation of local sem Column 5: If you I cable system carried carried the distant sta For the retransmis of a written agreemen the cable system and tion "E" (exempt). For explanation of these Column 6: Give th	vice area, see p have entered "Y the distant stati tition on a part-ti sion of a distan nt entered into c a primary trans simulcasts, als three categories the location of ea Canadian static	age (v) of the es" in column on during the me basis bec t multicast str on or before J smitter or an a to enter "E". If s, see page (v ach station. Fr ons, if any, giv nnel line-ups	e general instruct n 4, you must co accounting per cause of lack of eam that is not une 30, 2009, b association repr f you carried the () of the general or U.S. stations ve the name of , use a separate	tions located in the properties of the second secon	, stating the basis on which you ntering "LAC" if your cable systen 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 ty to which the station is licensed by the th which the station is identifec	
	-	CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	
North State Co	ommunicatio	ons, LLC			63110	Name
PRIMARY TRANSMITT	ERS: TELEVISI	ON				
carried by your cable FCC rules and regula	system during tions in effect o 6.61(e)(2) and	the accountin n June 24, 19 (4), or 76.63 (g period except 981, permitting t (referring to 76.	(1) stations carrie	as and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	G Primary Transmitters:
				is carried by your	cable system on a substitute progran	Television
 basis under specifc F Do not list the station station was carried List the station here basis. For further if in the paper SA3 for Column 1: List eareach multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licent on which your cables column 3: Indicate educational station, b (for independent mult For the meaning of the Column 5: If you here cast system carried the distant station station of local server control for the distant station fo	CC rules, regul n here in space l only on a subs , and also in sp nformation concorre- orm. ch station's call n associated wit A-2". Simulcast he channel num ise. For exampl system carried t e in each case y entering the la icast), "E" (for r ese terms, see tation is outside vice area, see p have entered "Y the distant stati tion on a part-ti	ations, or aut G—but do lis stitute basis ace I, if the st cerning subst sign. Do not th a station ac streams mus ber the FCC I e, WRC is Cf he station whether the s etter "N" (for n ioncommercia page (v) of the ease (v) of the ces" in column on during the me basis bec	horizations: st it in space I (t report originatic coording to its o to be reported in has assigned to hannel 4 in Was station is a netw network), "N-M" al educational), he general instru- vice area, (i.e. ' e general instru- vice area, (i.e. ' accounting per cause of lack of	the Special Stater ad both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list ea b the television sta hington, D.C. This ork station, an ind (for network mult or "E-M" (for non uctions located in "distant"), enter "Y ctions located in the omplete column 5 field. Indicate by e activated channe	nent and Program Log)—if the titute basis and also on some othe of the general instructions located es such as HBO, ESPN, etc. Identifi- ation. For example, report multi ch stream separately; for example titon for broadcasting over-the-air ir s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form 'es". If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you intering "LAC" if your cable syster	relevision
the cable system and tion "E" (exempt). For explanation of these t Column 6: Give th	a primary trans simulcasts, als hree categories he location of ea	smitter or an a so enter "E". If s, see page (\ ach station. Fe	association repr f you carried the /) of the general or U.S. stations	esenting the prim e channel on any l instructions loca , list the communi	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 th which the station is identifec	
Note: If you are utilizi	ng multiple cha	•	•	•	h channel line-up.	
	1	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	

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Nome	
North State Communications, LLC 63110					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 [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a contract on the part part of the statement of t							
				is carried by your	cable system on a substitute progran	Transmitters: Television	
 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 1 (the Special Statement and Program Log)—if the station have arried only on a substitute basis List the station here, and also in space 1, 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 is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "T-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: Hyou have entered "Yes" in column 4; yo							
Note. Il you are utilizi	ng muluple cha	•	•	•	n channei nne-up.		
		CHANN	EL LINE-UP	AU			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#		
North State Communications, LLC 63110					Name		
PRIMARY TRANSMIT	TERS: 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 [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph							
				is carried by your	cable system on a substitute progran	Television	
 Substitute program basis, as explained in the field paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identified an 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 in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the pap							
For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifec							
Note: If you are utiliz			EL LINE-UP	•			
			_				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#		
North State Communications, LLC 63110					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 [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph							
				is carried by your	cable system on a substitute progran	Television	
 Substitute Pagian basis, as expansion in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute progran basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifier each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream associated with a station according to its over-the-air designation. For example, where the reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the 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 nencomk 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 a							
the cable system and tion "E" (exempt). For explanation of these t Column 6: Give th FCC. For Mexican or	a primary trans simulcasts, als three categories the location of ea Canadian station	smitter or an a to enter "E". If s, see page (v ach station. Fe ons, if any, giv	association repr f you carried the /) of the general or U.S. stations ve the name of	esenting the prim e channel on any l instructions locat , list the communi the community wi	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 th which the station is identifec		
Note: If you are utilizi	ing multiple cha		EL LINE-UP	•	n channer nne-up.		
	a DiakaT		_				
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		

Name	LEGAL NAME OF North State							SYSTEM ID# 63110			
H Primary Transmitters: Radio	 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 receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. 										
	Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).										
			-			·					
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION			

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2021/2	
LEGAL NAME OF OWNER OF North State Communic					:	63110	Name	
SUBSTITUTE CARRIAG	E: SPECIA		IT AND PROGRAM LOG	;				
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.								
1. SPECIAL STATEMEN			TITUTE CARRIAGE				Carriage:	
 During the accounting per broadcast by a distant star 	•	ir cable system	n carry, on a substitute bas	sis, any nonn	etwork television progra	im XNo	Special Statement and Program Log	
Note: If your answer is "No	," leave the	rest of this pag	ge blank. If your answer is	"Yes," you m				
Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect during the accoun								
s	UBSTITUT	E PROGRAM			EN SUBSTITUTE IAGE OCCURRED	7. REASON FOR		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION		
					_			
					_			
					_			
					_			
					_			

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST										
Name	North State	Communica	tions, LLC						63110		
J Part-Time Carriage Log	North State Communications, LLC 63110 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. • Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." • State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m 3:15 a.m. app." • You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m12:00 p.m."										
			DATES		ר ב	PART-TIME CAF	PRIACE				
	CALL SIGN		I CARRIAGE OCCU HOUR	RS		CALL SIGN		-	URS		
		DATE	FROM	TO			DATE	FROM	ТО		
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FORM	SA3E. PAGE 7.						
	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name				
No	th State Communications, LLC	63110					
Inst all a (as page	OSS RECEIPTS ructions: The figure you give in this space determines the form you file and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to con- e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service	K Gross Receipts				
 COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. 							
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.	entered on line 1 of					
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be er low.	ntered on line 2 in block					
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	ld be entered on line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	is 1.064 percent of the					
	Line 1. Enter the amount of gross receipts from space K. Line 2. Multiply the amount in line 1 by 0.01064. Enter the result here.	\$ 1,483,462.50					
	This is your minimum fee.	\$ 15,784.04					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the is space G. If, in space G, you identified any stations as "distant" by stating "Yes" in colum "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. X No—Leave block 3 below blank and the state of the television state of the television state of the television state of the television state of television state	n 4, you must check d?					
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero.	\$					
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero.	0.00					
	Line 3. Add lines 1 and 2 and enter here.	\$ -					
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger.	\$ 15,784.04	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 zero	0.00	submitting additional doposits under				
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact the Licensing				
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 16,509.04	appropriate form for submitting the additional fees.				
	EFT Trace # or TRANSACTION ID #						
	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						

ACCOUNTING PERIOD: 2021/2

ACCOUNTING PERIO	IOD: 2021/2	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	North State Communications, LLC	63110
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television to its subscribers and (2) the cable system's total number of activated channels, during the accounting	
	1. Enter the total number of channels on which the cable	23
	system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	403
	and nonbroadcast services	405
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Individual to		
Be Contacted for Further Information		elephone 336-821-8650
	Address 4100 Mendenhall Oaks Parkway, Suite 300 (Number, street, rural route, apartment, or suite number)	
	High Point, NC 27265 (City, town, state, zip)	
	Email tim.pressley@Lumosfiber.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright	Office regulations.)
Certification	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line	1 of space B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of in line 1 of space B and that the owner is not a corporation or partnership; or	f the cable system as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity iden in line 1 of space B.	tified as owner of the cable system
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fa are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good f [18 U.S.C., Section 1001(1986)] 	
	/s/ Mary McDermott	
	Enter an electronic signature on the line above using an "/s/" signature to certify this stat (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place yo button, then type /s/ and your name. Pressing the "F2" button will avoid enabling Excel's	our cursor in the box and press the "F2"
	Typed or printed name: Mary McDermott	
	Title: General Counsel (Title of official position held in corporation or partnership)	
	Date: February 28, 2022	
Privacy Act Notice	: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identify	ing information (PII) requested on th
	cess your statement of account. PII is any personal information that can be used to identify or trace an individual, si	

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephol numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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 t completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of lav

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
North State Communications, LLC	63110	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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system shal scribers and amounts collected from subscribers receiving secondary transmissions pursuant to	for the basic I not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instru- paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners?		Concerning Gross Receipts Exclusion
X NO YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address		
You must complete this worksheet for those royalty payments submitted as a result of a late payment o For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 for		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	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	• • • • • • • • • • • • • • • •	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L (page 7)	(interest charge)	
* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further as contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	ssistance please	
** 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 Copyrig please list below the owner, address, first community served, accounting period, and ID number as give filing.		
Owner Address		
First community served Accounting period ID number		
Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identify	ving information (PII) requested on th	

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 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 durinc 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 accountinc 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 anc the base rate fee. In addition, cable systems located within certain televi sion 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. Distan 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 (hereaf ter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge

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

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable sys-

tems 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, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981

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

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

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

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any 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 Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

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

- · Determine which distant stations were carried by the system 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.

DSE SCHEDULE. PAGE 11.

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

Determine whether any of the stations you carried were partially distantthat 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. 1.064% of gross receipts 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 (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.

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

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

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in guestion (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

1		Distant Stations Carried		Identification	of Subscriber Grou	ips		
In most cases	under current FCC	STATION	DSE	CITY	OUTSIDE LOCAL	-	GRO	SS RECEIPTS
rules, all of F	airvale would be within	A (independent)	1.0		SERVICE AREA	OF	FROM S	UBSCRIBERS
the local servic	e area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B, C, I	D ,E		\$310,000.00
A and C and al	I of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A and C			100,000.00
dega Bay woul	d be within the local	D (part-time)	0.139	Bodega Bay	Stations A and C			70,000.00
service areas o	of stations B, D, and E.	E (network)	0.25	Fairvale	Stations B, D, and	ΙE		120,000.00
		TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS			\$600,000.00
		Minimum Fee Total Gross	Receipts		\$600,000.00			
Santa Rosa	Stations A and C				x .01064			
	35 mile zone				\$6,384.00			
		First Subscriber Group		Second Subso	riber Group		Third Subscriber Group	
	· ` ~ _ ~ ´	(Santa Rosa)		(Rapid City and	l Bodega Bay)		(Fairvale)	
	Fairvale	Gross receipts	\$310,000.00	Gross receipts	¢17	70,000.00	Gross receipts	\$120.000.00
		DSEs	. ,	DSEs	φ17	,	DSEs	\$120,000.00 1.389
Rapid City					ŕ			
		Base rate fee	\$6,497.20	Base rate fee		51,907.71	Base rate fee	\$1,604.03
	Bodega	\$310,000 x .01064 x 1.0 =	,	. ,		,	\$120,000 x .01064 x 1.0 =	1,276.80
	Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
		Base rate fee	\$6,497.20	Base rate fee	\$	51,907.71	Base rate fee	\$1,604.03
Station and 35 mile		Total Base Rate Fee: \$6,4 In this example, the cable s				ne 1 (page	7)	

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM										
1	North State Communications, LLC 63110										
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	0.00									
Computation	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-										
of DSEs for Category "O"	mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs										
Stations	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE										
Otations	UNEL DIGIN	DOL	OALL OIGH	DOL	OALL OIGH	DOL					
Add rows as											
necessary. Remember to copy											
all formula into new											
rows.						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					

Name	LEGAL NAME OF			_							SYSTEM ID#
Name	North State Communications, LLC 6311										63110
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station on rounding, see page (viii) of the general instructions in the paper SA3 form. CATEGORY LAC STATIONS: COMPUTATION OF DSEs 1. CALL 2. NUMBER 3. NUMBER 4. BASIS OF 5. TYPE 6. DSE										
	SIGN		OF HOL CARRIE			HOURS ATION	CARRIA VALUE	GE	VALUE	=	
			SYSTEM			AIR					
				÷ ÷			=		x x	=	
										=	
				÷			=		x	=	
							=			=	
				-			=			=	
				÷			=		x	=	
	SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule,										
4 Computation of DSEs for Substitute- Basis Stations	 Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form). 										
			SU	BSTITUTE	-BASI	S STATION	IS: COMPUT	ATION OF	DSEs	-	
	1. CALL	2. NUME	BER	3. NUME		4. DSE	1. CALL		MBER	3. NUMBER	4. DSE
	SIGN	OF PROG	RAMS	OF DA IN YEA			SIGN	OF PR	OGRAMS	OF DAYS IN YEAR	
			÷		=				÷		=
			- -						+ +		=
			÷		=				÷		=
			-		=				÷		=
	SUM OF DSE Add the DSEs Enter the s	of each stat	tion.	S STATION			·		÷ 0.00]	-
5		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 number of DSEs applicable to your system.									
Total Number	1. Number o	1. Number of DSEs from part 2 ● 0.00									
of DSEs	2. Number of DSEs from part 3 • 0.00										
	3. Number of DSEs from part 4 ● ▶ 0.00										
	TOTAL NUMBE	ER OF DSEs	3						>		0.00

LEGAL NAME OF (OWNER OF CABLE	SYSTEM:					S	YSTEM ID#	N
North State C	ommunication	is, LLC						63110	Name
Instructions: Blo	ock A must be com	pleted.							
In block A: • If your answer if	"Yes," leave the r	emainder of p	part 6 and part	7 of the DSE sche	edule blank a	nd complete p	art 8, (page 16) o	f the	6
schedule. • If your answer if	"No," complete bl	ocks B and C	below						_
				ELEVISION M	ARKETS				Computation of
		outside of all	major and sma	aller markets as de	fined under s	ection 76.5 of	FCC rules and re	gulations in	3.75 Fee
effect on June 24		schedule—[ОО NOT COM	PLETE THE REM	AINDER OF F	PART 6 AND 7	7.		
	plete blocks B and								
Column 1:	List the call sign						tom was normitte	d to corru	
CALL SIGN	under FCC rules	and regulations of the second se	ons prior to Ju dule. (Note: T	i part 2, 3, and 4 of ne 25, 1981. For fu he letter M below r Act of 2010.)	urther explana	ation of permit	ted stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	 (Note the FCC rt A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursu *F A station pre- 	ules and regu- ed pursuant f cal educations d station (76. or DSE schect ant to individ eviously carrie JHF station w	lations cited b 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-tir <i>v</i> ithin grade-B	ne or substitute ba contour, [76.59(d)(se in effect o 6.57, 76.59(b e)(1), 76.63(a 63(a) referrin bstitution of g sis prior to Ju	n June 24, 194 p), 76.61(b)(c), a) referring to g to 76.61(d)] grandfathered une 25, 1981	76.63(a) referring 76.61(e)(1) stations in the		
	M Retransmission	on of a distar	it multicast stro	eam.					
Column 3:		e stations ide	ntified by the l	n parts 2, 3, and 4 etter "F" in column			worksheet on pag	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: CC	MPUTATION OF	= 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule				-	
Line 2: Enter the	e sum of permitte	ed DSEs fro	m block B ab	ove				-	
				er of DSEs subject t 7 of this schedu		5 rate.		0.00	
Line 4: Enter gro	oss receipts from	n space K (p	age 7)					276	Do any of the DSEs represent
							x 0.03	513	partially permited/
Line 5: Multiply	line 4 by 0.0375	and enter s	um here						partially nonpermitted
			_				х		carriage?
Line 6: Enter tot	al number of DS	Es from line	93					-	If yes, see part 9 instructions.
Line 7: Multiply	line 6 by line 5 a	nd enter hei	re and on line	e 2, block 3, spac	e L (page 7))		0.00	

DSE SCHEDULE. PAGE 13.

		OWNER OF CABLE					S	YSTEM ID#	Name
NOI		ommunication			_ /			63110	
	1. CALL	2. PERMITTED	1. CALL	2. PERMITTED		1. CALL	2. PERMITTED	3. DSE	6
	SIGN	BASIS	SIGN	BASIS		SIGN	BASIS		Computation of
			 						3.75 Fee
•••••									

						DSE SCHEDULE. PAGE 14.			
Name	LEGAL NAME OF OWN					SYSTEM ID#			
Name	North State Co	mmunications,	LLC			63110			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the For A—Part-time sp 76.59 B—Late-night pr 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compar in block	or to June 25, 1981, call sign for each dis the DSE for this sta the accounting perio the basis of carriage CC rules and regula ecialty programming (d)(1),76.61(e)(1), o rogramming: Carriage (e)(3)). arriage under certair rail instructions in the the station's DSE fo e the DSE figures lis (B, column 3 of part	under former FCC rules go tant station identifed by the tion for a single accounting od and year in which the ca e on which the station was of tions cited below pertain to provide the station was of transitions of the station was of the carriage, on a part-time to r 76.63 (referring to 76.61(of ge under FCC rules, section a FCC rules, regulations, or paper SA3 form. r the current accounting per ted in columns 2 and 5 and 6 for this station.	ns identifed by the letter "F" in column 2 of block B, part 6 (i.e., those governing part-time and substitute carriage.) he letter "F" in column 2 of part 6 of the DSE schedule. g period, occurring between January 1, 1978 and June 30, 1981. carriage and DSE occurred (e.g., 1981/1). s carried by listing one of the following letters: to those in effect on June 24, 1981.) e basis, of specialty programming under FCC rules, sections					
			E FOR STATIONS CARRI						
	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESENT	6. PERMITTED			
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE			
7	Instructions: Block A	A must be completed	1.						
-	In block A:								
Computation	,	, I	cks B and C, below.		4.4.				
of the	If your answer is	"No," leave blocks b	and C blank and complete	· ·					
Syndicated BLOCK A: MAJOR TELEVISION MARKET									
Exclusivity Surcharge	 Is any portion of the c 	cable system within a	top 100 major television ma	rket as defned by section	76.5 of ECC rules in effec	t.lune 24, 1981?			
ourenuige			100110 24, 10011						
	Yes-Complete	blocks B and C .		No—Proceed to	о рап 8				
				BLOCK C: Computation of Exempt DSEs					
	BLOCK B: Ca	arriage of VHF/Grad	e B Contour Stations	BLOCK C: Computation of Exempt DSEs					
	,		e primary stream of a	Was any station listed in block B of part 7 carried in any commu-					
	or in part, over the ca	1 0	de B contour, in whole	nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)					
	· /	5	propriate permitted DSE		Yes—List each station below with its appropriate permitted DSE				
		and proceed to part 8.	FF F		and proceed to part 8.				
	CALL SIGN	DSE C	ALL SIGN DSE	CALL SIGN	DSE CALL S	IGN DSE			
		<u>Ⅰ</u>							
		т	DTAL DSEs 0.00	1	TOTAL	DSEs 0.00			

DSE SCHEDULE. PAGE15.

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SYSTEM ID# North State Communications, LLC 63110	Namo
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7) 1,483,462.50	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7 0.00	0
	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	Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. Xo—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? IX 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 DSE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
	A. Enter 0.00599 of gross receipts (the amount in section1)	-
	B. Enter 0.00377 of gross receipts (the amount in section.1)	
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	-
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	-
	A. Enter 0.00599 of gross receipts (the amount in section 1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00178 of gross receipts (the amount in section 1)	
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
	SECTION 4: SECOND 50 TELEVISION MARKET	
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?	1
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 DSE 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)	
	B. Enter 0.00189 of gross receipts (the amount in section 1)	
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	

ACCOUNTING PERIOD: 2021/2

CCOUNTING PERIOD		IDSE SCHEDULE. PAGE
Name		INE OF OWNER OF CABLE SYSTEM: SYSTEM I SYSTEM I 631
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)
Surcharge		C. Multiply line B by 3.000 and enter here.
		D. Enter 0.00089 of gross receipts (the amount in section 1)▶ \$
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here
		F. Multiply line D by line E and enter here
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)
		Syndicated Exclusivity Surcharge
8	6 was	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.
Computation		ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.
of	,	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
Base Rate Fee	blank	
		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	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. No—Complete the following sections.
	Castian	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," use the total number of DSEs from part 5.)
	Section 1	
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank.
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.
		A. Enter 0.01064 of gross receipts
		(the amount in section 1)
		B. Enter 0.00701 of gross receipts (the amount in section 1)
		C. Subtract 1.000 from total DSEs
		(the figure in section 2) and enter here
		D. Multiply line B by line C and enter here
		E. Add lines A and D. This is your base rate fee. Enter here
		and in block 3, line 1, space L (page 7)
	1	Base Rate Fee

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	None
North	State Communications, LLC	63110	Name
Section	f 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		0
	(the amount in section 1)►		
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) \$		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here ▶		Buserhater
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1)		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee		
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$	0.00	
	FANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television but		
shall ins ups in S	tead be reported on a community-by-community basis (subscriber groups) if the cable system reported mul pace G	tiple channel line-	9
-	ral: If any of the stations you carried were partially distant, the statute allows you, in computing your base ra	ate fee, to exclude	Commutation
receipts	from subscribers located within the station's local service area, from your system's total gross receipts. To		Computation of
this exc	usion, you must:		Base Rate Fee
	ivide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dis		and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Dete nd the portion of your system's gross receipts attributable to that group, and calculate a separate base rate		Exclusivity
Finally:	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your syste	m.	Surcharge for
	f any portion of your cable system is located within the top 100 television market and the station is not exen		Partially
	to compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block r, if your cable system is wholly located outside all major television markets, complete block A only.	A and B below.	Distant Stations, and
	Identify a Subscriber Group for Partially Distant Stations		for Partially
	For each community served, determine the local service area of each wholly distant and each partially dista	int station you	Permitted Stations
carried	o that community.		
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers v the station's local service area. A subscriber located outside the local service area of a station is distant to t e token, the station is distant to the subscriber.)		
Step 3:	Divide your subscribers into subscriber groups according to the complement of stations to which they are di	istant. Each	
	er group must consist entirely of subscribers who are distant to exactly the same complement of stations. N will have only one subscriber group when the distant stations it carried have local service areas that coincid		
-	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of you er groups.	ur system's	
In each			
• Identif	the communities/areas represented by each subscriber group.		
	e call sign for each of the stations in the subscriber group's complement—that is, each station that is distar	nt to all of the	
• If:	ers in the group.		
1) your	system is located wholly outside all major and smaller television markets, give each station's DSE as you ga this schedule; or,	ave it in parts 2, 3,	
2) any p	ortion of your system is located in a major or smaller television market, give each station's DSE as you gave 6 of this schedule.	e it in block B,	
•	e DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	ate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the ge	neral instructions	
	paper SA3 form.		
page. In DSEs fo	Ite a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule o In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber gro Ir that group's complement of stations and total gross receipts from the subscribers in that group). You do n ual calculations on the form.	up (that is, the total	

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM I
Name	North State Communications, LLC	631
	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 signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	distant
	.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.	

FORM SA3E. PAGE 19.

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Ra Image: Sign in the strength of the strengt of the strength of the strength of the str	LEGAL NAME OF OWNER North State Comm						S	YSTEM ID# 63110	Name
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE Significant Significant <th>В</th> <th></th> <th></th> <th></th> <th>TE FEES FOR EACH</th> <th>SUBSCR</th> <th>IBER GROUP</th> <th></th> <th></th>	В				TE FEES FOR EACH	SUBSCR	IBER GROUP		
CALL SIGN DSE Syndh		FIRST	SUBSCRIBER GROU			SECOND	SUBSCRIBER GROU		٥
Image: Second Group Image: Second Group<	COMMUNITY/ AREA 0			COMMUNITY/ AREA			0	Computatio	
and and and an and and an and and an and and	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Syndik Signification Signif									Base Rate Fe
Image: Second Group Image: Second Group<									and
Image: Second Group Image: Second Group<			-						Syndicated
Image: Second			-						Exclusivity
Image: Second Group Image: Second Group<			-						for
Stati International internationa international international internatina inte							n - 11111111111111111111111111111111111		Partially
indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication indication									Distant
Stross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Community of the stress o			-						Stations
Stross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Community of the stress o									
Gross Receipts First Group s 0.00 gross Receipts Second Group s 0.00 Base Rate Fee First Group s 0.00 Base Rate Fee Second Group s 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Gr									
Stross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Community of the stress o			-						
Gross Receipts First Group s 0.00 gross Receipts Second Group s 0.00 Base Rate Fee First Group s 0.00 Base Rate Fee Second Group s 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Gr									
Stross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Community of the stress o									
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE For an and the second droup Community area Communit	Fotal DSEs			0.00	Total DSEs	1		0.00	
THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY (AREA O COMINITY CALL SIGN COMINITY CALL SIGN COMINITY CALL SIGN COMINI	Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	d Group	\$	0.00	
THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY (AREA O COMINITY CALL SIGN COMINITY CALL SIGN COMINITY CALL SIGN COMINI	Dear Data For First Or			0.00	Deer Dete Fee Course			0.00	
COMMUNITY/ AREA O COMMUNITY/ AREA O 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 Cotal DSEs 0.00 Total DSEs 0.00 Sross Receipts Fourth Group S 0.00	Sase Rate Fee First Gr	-	•		Base Rate Fee Secon	-			
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Contract of the second sec		THIRD	SUBSCRIBER GROU			FOURTH	SUBSCRIBER GROU		
Image: Construction of the second	JOMMONIT I/ AREA			U	COMMONIT I/ AREA			U	
Image: Construction of the second	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00			-						
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00			-						
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00			-		-				
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00			=				*		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00							······································		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00			-						
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00									
	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee Third Group \$ 0.00	Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
II	3ase Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
te Fee: Add the base rate fees for each subscriber group as shown in the boxes above. re and in block 3, line 1, space L (page 7) \$ 0.00				iber group a	as shown in the boxes al	oove.			

FORM	SA3E.	PAGE	19.

LEGAL NAME OF OWN						S	63110	Name
				TE FEES FOR EACH			10	
COMMUNITY/ AREA	FIFTH	SUBSCRIBER GRC	0UP 0	COMMUNITY/ AREA	SIXTH	SUBSCRIBER GROU	UP 0	9
COMMONT I/ AREA			U	COMMONT T/ AREA			v	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
		-						Exclusivity
								Surcharge
								for Destioning
								Partially Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRC	UP		EIGHTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
						-		
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subs pace L (page 7)	criber group a	as shown in the boxes al	oove.	\$		

FORM	SA3E.	PAGE	19.

EGAL NAME OF OWN						5	63110	Name
				TE FEES FOR EACH				
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otal DSEs		11	0.00	Total DSEs			0.00	
Gross Receipts First (Froup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
	Sioup	<u> </u>	0.00			• 		
ase Rate Fee First (Group	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
	ELEVENTH	SUBSCRIBER GRO			TWELVTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
		e fees for each subs space L (page 7)	criber group a	as shown in the boxes a	above.	\$		

		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		RIBER GROUP		
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ase Rate Fee First Gro	up	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
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iross Receipts Third Gro	aud	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
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	JP	IBER GROUP		TE FEES FOR EAC		SUBSCRIBER GRO		
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	0.00	\$ \$		Gross Receipts Seco Base Rate Fee Seco	0.00	\$	-	
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	Group	ase Rate Fee First G
	0.00		d Group	Base Rate Fee Seco	0.00		Group	ase Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Seco	0.00 JP	\$	Group	ase Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Seco	0.00 JP	\$	Group	ase Rate Fee First G NI OMMUNITY/ AREA
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LEGAL NAME OF OWNEF						S	YSTEM ID# 63110	Name
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWENT	ry-third	SUBSCRIBER GRO	UP	TWENT	Y-FOURTH	I SUBSCRIBER GROU	IP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee Third G	, o up							

North State Comm		E SYSTEM: DNS, LLC				S	YSTEM ID# 63110	Name
				TE FEES FOR EACH				
TWEN COMMUNITY/ AREA	I Y-FIFTH	SUBSCRIBER GRO	UP 0	TWENTY-SIXTH SUBSCRIBER GROUP				9
COMMONIT IT AREA			U	COMMONT IT AREA			v	Computation
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	aun	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
	oup	÷				÷		
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWENTY-S	SEVENTH	SUBSCRIBER GRO	UP	TWEN	ry-eighth	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		-						
Total DSEs			0.00	Total DSEs			0.00	
	roup	s	0.00	Total DSEs Gross Receipts Fourth	Group	S	0.00	
Fotal DSEs Gross Receipts Third Gi Base Rate Fee Third Gi		s				Image: Signature state		
bross Receipts Third G		<u>\$</u>	0.00	Gross Receipts Fourth			0.00	

FURINI SASE. FAGE 19								
LEGAL NAME OF OWNER North State Comm						SY	STEM ID# 63110	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCR	IBER GROUP		
	TY-NINTH	SUBSCRIBER GROU			THIRTIETH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatior of
	DOL	ON LE CICIL	DOL	ON LE CICIT	DOL		DOL	Base Rate Fe
								and
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			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
THIR	TY-FIRST	SUBSCRIBER GROU	JP	THIRT	Y-SECONE) SUBSCRIBER GROUP	5	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		Gross Receipts Fourth	Group	\$	0.00			
		- <u>-</u>			. 2.00p	<u>.</u>		
					_			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				11				
Base Rate Fee: Add th	e hase ret	e fees for each subsci	riber arous	as shown in the boxes a	above			
Enter here and in block						\$		

LEGAL NAME OF OWN	IER OF CABL					5	63110	Name
							03110	
		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EACH		IBER GROUP	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computatio
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Fotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	ld Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TH	IRTY-FIFTH	SUBSCRIBER GRO	DUP	THI	RTY-SIXTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
ase Rate Fee: Add			scriber group	as shown in the boxes a	bove.	\$		

FORIN SASE. FAGE 19								
LEGAL NAME OF OWNER North State Comm						SY	STEM ID# 63110	Name
В	LOCK A:		BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
	SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROUF		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computatior
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROU				I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
			iber group	as shown in the boxes a	above.			
Enter here and in block			9.244			\$		

EGAL NAME OF OW		E SYSTEM:					SYSTEM ID#	
North State Com	nmunicatio	ons, LLC					63110	Nam
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				•			Computa	
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otal DSEs	-		0.00	Total DSEs			0.00	
iross Receipts First	Group	<u>\$</u>	0.00	Gross Receipts Second Group \$ 0.00				
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FC	ORTY-THIRD	SUBSCRIBER GRO	DUP	FOR	TY-FOURTH	I SUBSCRIBER GRO	UP	
OMMUNITY/ AREA	•		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
ase Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
		te fees for each subs space L (page 7)	criber group a	II as shown in the boxes	above.	\$		

FORM	SA3F	PAGE	19

EGAL NAME OF OWNER						S	63110	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		RIBER GROUP	ID	
OMMUNITY/ AREA		SUBSCRIBER GROU	0	COMMUNITY/ AREA		1 SUBSCRIBER GROU	0	9 Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FORTY-	SEVENTH	SUBSCRIBER GROU	IP	FORT	TY-EIGHTH	SUBSCRIBER GROU	UP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
ase Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			-					

LEGAL NAME OF OWNEF						S`	YSTEM ID# 63110	Name
				TE FEES FOR EACH			P	
FOR I	Y-NIN I H	SUBSCRIBER GRO	<u>90</u>	COMMUNITY/ AREA	FIFTIETE	I SUBSCRIBER GROU	р 0	9
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FIF	TY-FIRST	SUBSCRIBER GRO	UP	FIFT	Y-SECOND) SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs	<u> </u>		0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts Third Group \$ 0.00		Gross Receipts Fourth	Group	\$	0.00			
	Jup	<u>*</u>	0.00		Sidup	• 		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subs		11				

	cations, LLC					63110	
	K A: COMPUTATION				RIBER GROUP	UP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				Comp
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otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00	
	IFTH SUBSCRIBER GR				H SUBSCRIBER GRO		
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OMMUNITY/ AREA			COMMUNITY/ ARE				
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OMMUNITY/ AREA		0		A	1	0	
OMMUNITY/ AREA		0		A	1	0	
OMMUNITY/ AREA		0		A	1	0	
OMMUNITY/ AREA		0		A	1	0	
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and syndical syndical <td< th=""><th></th><th>DSE</th><th colspan="4">CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE</th><th>CALL SIGN</th><th>DSE</th><th>CALL SIGN</th></td<>		DSE	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE				CALL SIGN	DSE	CALL SIGN
Syndice Exclusion Surchar for Partia Dista Station Total DSEs	Base Rat								
Image: Second Group Image: Second Group<									
Surcha for Partial Distant Station of the second Group is 0.00 SIXTIETH SUBSCRIBER GROUP COMMUNITY / AREA 0 SIXTIETH SUBSCRIBER GROUP COMMUNITY / AREA 0 CALL SIGN DSE CAL							-		
Partial Distar Station Distar Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTIETH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Comparison of the second of the									
Distar Station Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTIETH SUBSCRIBER GROUP 0 0 CALL SIGN DSE 0 CALL SIGN DSE 0 CALL SIGN DSE 0 Image: Comparison of the second of									
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Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE C									
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Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTIETH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0 CALL SIGN DSE COMMUNITY/ AREA O COMMUNITY O CALL SIGN DSE O O O O O O O O O O O O O O O O O O <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>									
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Base Rate Fee Second Group \$ 0.00 SIXTIETH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Comparison of the second distribution of the second distributicondi		0.00			Total DSEs	0.00			otal DSEs
Base Rate Fee Second Group \$ 0.00 SIXTIETH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Comparison of the second distribution of the second distributicondi		0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	oup	Gross Receipts First Gr
SIXTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE Image: Colspan="2">O Image:				- 1				•	I -
COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DSE 0.00		0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First G
CALL SIGN DSE CALL SIGN DSE Image: Contract of the stress of		JP	I SUBSCRIBER GROU	SIXTIETH		UP	SUBSCRIBER GRO	TY-NINTH	FIF
Total DSEs 0.00		0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
		DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							-		
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Gross Receipts Fourth Group \$ 0.00		0.00			Total DSEs	0.00			otal DSEs
		0.00	\$	n Group	Gross Receipts Fourt	0.00	\$	iroup	Gross Receipts Third G
Base Rate Fee Fourth Group \$ 0.00									

	JP	BER GROUP				COMPUTATION O SUBSCRIBER GRO		
9 Comput	COMMUNITY/ AREA 0							COMMUNITY/ AREA
of	DSE	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE				DSE	CALL SIGN	
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and Syndica								
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for								
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	0.00			Total DSEs	0.00			otal DSEs
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	JP	\$	-	SI	UP	\$ SUBSCRIBER GRO		ase Rate Fee First G
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	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	ase Rate Fee First G SIX OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	ase Rate Fee First G SIX OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	ase Rate Fee First G SIX OMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	ase Rate Fee First G
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	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	Base Rate Fee First G SIX
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	ase Rate Fee First G SIX
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	Base Rate Fee First G SIX COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	Base Rate Fee First G SIX COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	Base Rate Fee First G SIX COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	ase Rate Fee First G SIX
	JP 0 DSE	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0 DSE	SUBSCRIBER GRO	(TY-THIRD	Base Rate Fee First G SIX
	JP 0	SUBSCRIBER GROU	Y-FOURTH	SI. COMMUNITY/ ARE	UP 0	SUBSCRIBER GRO	(TY-THIRD	Base Rate Fee First G SIX COMMUNITY/ AREA CALL SIGN
	JP 0 DSE	SUBSCRIBER GROU	Y-FOURTH	COMMUNITY/ ARE	UP 0 DSE	SUBSCRIBER GRO	CTY-THIRD	CALL SIGN
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LEGAL NAME OF OW		F SYSTEM.					SYSTEM ID#	
North State Com							63110	Name
	BLOCK A:	COMPUTATION C	DF BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		H		H SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	•		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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								for
								Partially
								Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		H SUBSCRIBER GRO		
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	I Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Paga Data Faat A !!	the bees	food for an	oriber artic	an abour in the best	abova			
Enter here and in blo			scriber group	as shown in the boxes	above.	\$		

FORM	SA3F	PAGE	19

	BLE SYSTEM: ions, LLC					63110 SYSTEM
	A: COMPUTATION C		11		RIBER GROUP	I I P
MMUNITY/ AREA	IN SUBSCRIBER GRO	0	COMMUNITY/ ARE		1 SUBSCRIBER GRO	0
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
al DSEs		0.00	Total DSEs	·		0.00
oss Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
se Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SEVENTY-FIRS	ST SUBSCRIBER GRO	OUP	SEVEI	NTY-SECONE) SUBSCRIBER GRO	UP
MMUNITY/ AREA		0	COMMUNITY/ AREA 0			
				А		U
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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EGAL NAME OF OWNE						5	SYSTEM ID#	
North State Comn	nunicatio	ons, LLC					63110	Name
		COMPUTATION C SUBSCRIBER GRO				RIBER GROUP	UD	
COMMUNITY/ AREA		SUBSCRIDER GRU	0 0	COMMUNITY/ AREA	0P 0	9		
								Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate I
								and
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otal DSEs		11	0.00	Total DSEs		11	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
	. oup	·				·		
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	NTY-FIFTH	SUBSCRIBER GRO				H SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
		t e fees for each subs space L (page 7)	criber group a	II	above.	\$		

LEGAL NAME OF OWNE North State Comn						S	YSTEM ID# 63110	Name
				TE FEES FOR EAC			_	
SEVENTY- COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GRC	0UP 0	SEVEN COMMUNITY/ AREA		I SUBSCRIBER GROU	IP 0	9
			v				Ŭ	Computatior
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
B ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO)UP		EIGHTIETH	I SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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Fotal DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
pro 11110 C		·						
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	

LEGAL NAME OF OWNEF North State Comm						S	YSTEM ID# 63110	Name
				TE FEES FOR EACH				
EIGH COMMUNITY/ AREA	IY-FIRST	SUBSCRIBER GRO	0P 0	EIGH I COMMUNITY/ AREA	Y-SECOND	SUBSCRIBER GROU	р 0	9
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GRO	UP	EIGHT	Y-FOURTH	I SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	oup	<u>\$</u>	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				11				

LEGAL NAME OF OWNER						S	YSTEM ID# 63110	Name
				TE FEES FOR EACH				
	ITY-FIFTH	SUBSCRIBER GRC				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computatior
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
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								Syndicated
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								Partially
		-						Distant
								Stations
Fotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
B ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
EIGHTY-	SEVENTH	SUBSCRIBER GRC	UP	EIGH	TY-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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						-		
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						+		
Fotal DSEs		11	0.00	Total DSEs		11	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	n Group	\$	0.00	

		E EVETENA.					SYSTEM ID#	
LEGAL NAME OF OW North State Con						,	63110	Nam
				TE FEES FOR EAG				
EIC COMMUNITY/ ARE		SUBSCRIBER GRO	DUP 0	COMMUNITY/ ARE		H SUBSCRIBER GRO	UP 0	9
	•		U	COMMONT I/ ARE	A		v	Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NI	NETY-FIRST	SUBSCRIBER GRO	DUP	NINE	TY-SECON	D SUBSCRIBER GRO	UP	
OMMUNITY/ AREA	Ą		0	COMMUNITY/ ARE	A		0	
					-			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$		Gross Receipts Fou	rth Group	s	0.00	
	r	·				·		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
se Rate Fee: Add	I the base rat	te fees for each subs	scriber group a	as shown in the boxes	s above.			
Total DSEs Gross Receipts Third Base Rate Fee Third Base Rate Fee: Add Enter here and in blo	d Group		0.00	Gross Receipts Fou Base Rate Fee Fou	rth Group	\$ \$ \$	0.0	00

LEGAL NAME OF OWNE North State Comm						SY	STEM ID# 63110	Name
				TE FEES FOR EACH				
NINE COMMUNITY/ AREA	IY-THIRD	SUBSCRIBER GROU	JP 0	NINET COMMUNITY/ AREA	Y-FOURTH	I SUBSCRIBER GROUP	0	9
COMMUNITY AREA			U	COMMONT Y AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
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		-						otationo
Total DSEs		11	0.00	Total DSEs		11	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GROU	IP	NINE	ETY-SIXTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
			0.00	Total DSEs			0.00	
otal DSEs		s		Gross Receipts Fourth	Group	\$	0.00	
	iroup	<u> </u>	0.00					
Fotal DSEs Gross Receipts Third G	iroup	·	0.00					
		\$	0.00	Base Rate Fee Fourth		\$	0.00	
Bross Receipts Third G		\$				\$	0.00	

FORM SASE. FAGE 18								
LEGAL NAME OF OWNE North State Comm						Sì	STEM ID# 63110	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	RIBER GROUP		
	SEVENTH	SUBSCRIBER GROU			TY-EIGHTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
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								Surcharge for
								Partially
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
							4	
	TY-NINTH	SUBSCRIBER GROU		11	INDREDTH	SUBSCRIBER GROUP	» ٥	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-							
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Sase Rate Fee: Add th	e hase rat	e fees for each subscr	iber aroup	as shown in the boxes al	bove			

LEGAL NAME OF OWNER North State Comm						SY	STEM ID# 63110	Name
				TE FEES FOR EACH				
ONE HUNDRI	ED FIRST	SUBSCRIBER GROU	JP 0	ONE HUNDREE	SECOND	SUBSCRIBER GROUP	0	9
COMMONT I/ AREA			v	COMMONT I/ AREA			•	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for Destioller
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lotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRE	ED THIRD	SUBSCRIBER GROU	JP	ONE HUNDRED	D FOURTH	SUBSCRIBER GROUP		
OMMUNITY/ AREA		0		COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Fotal DSEs	1		0.00	Total DSEs	1	ll 	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
				11				
	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ase Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

LEGAL NAME OF OWNER OF C North State Communic					S	YSTEM ID# 63110	Name
	A: COMPUTATION						
ONE HUNDRED FI	TH SUBSCRIBER GR	OUP 0	ONE HUNI COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	9
		•		`		•	Computatior
CALL SIGN DSI	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs		0.00	Total DSEs				
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED SEVEN	ITH SUBSCRIBER GR	OUP	ONE HUNDF	RED EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0		۹		0	
CALL SIGN DSI	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	÷	5.00			<u>*</u>		
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
			LI				

LEGAL NAME OF OWNER						SY	STEM ID# 63110	Name
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ONE HUNDRI COMMUNITY/ AREA	NINTH U	SUBSCRIBER GROU	JP 0	ONE HUNDI		SUBSCRIBER GROUP	<u> </u>	9
			Ŭ				•	Computatior
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	D TWELVTH	SUBSCRIBER GROUP	C	
COMMUNITY/ AREA		0		COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	I	11	0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Raco Rato Eoo Third O	roup	¢	0.00	Base Pate Fee Ferret	h Group	e	0.00	
	Jup	Ψ	0.00			Ψ	0.00	
			riber group	as shown in the boxes a	above.			
Base Rate Fee Third G Base Rate Fee: Add th Enter here and in block	e base rat		0.00	as shown in the boxes a		\$\$	0.00	

				TE FEES FOR EACH		COMPLIENTION O		
	JP	IBER GROUP		1		SUBSCRIBER GRC		
Compu	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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=	0.00 0.00		nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED	0.00 0.00		Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F
	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F
	0.00 0.00	\$	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED	0.00 0.00	\$	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
-	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA
	0.00 0.00	S SUBSCRIBER GRO	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	0.00 0.00 JP 0	SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED F OMMUNITY/ AREA CALL SIGN
	0.00 0.00	S SUBSCRIBER GRO	DSE	Gross Receipts Secon	0.00 0.00	SUBSCRIBER GRC	Group	otal DSEs
	0.00 0.00	S I SUBSCRIBER GRO	DSE	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA CALL SIGN	0.00 0.00 JP 0 DSE 0	SUBSCRIBER GRC	Group	Bross Receipts First G Base Rate Fee First G

FORM SA3E, PAGE 19	FORM	SA3E.	PAGE	19.
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LEGAL NAME OF OWNER	R OF CABL					SY	STEM ID# 63110	Name
			BASERA	TE FEES FOR EACH	SUBSCP			
						SUBSCRIBER GROUF	2	
COMMUNITY/ AREA			0	COMMUNITY/ AREA		0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatior of
ONLE OFOR					DOL		DOL	Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs		11	0.00	Total DSEs			0.00	
Gross Receipts First Gro	oun	\$	0.00	Gross Receipts Second Group \$ 0.00				
	oup	4	0.00			Ψ		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED NIN	NTEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED TV	VENTIETH	SUBSCRIBER GROUP	þ	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						. =		
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes at	oove.	¢		
	5, inte 1, S	phace L (page /)				\$		

LEGAL NAME OF OWNER North State Commu						SY	STEM ID# 63110	Name
				TE FEES FOR EACH				
	Y-FIRST	SUBSCRIBER GROU			Y-SECOND	SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Currentia estered
								Syndicated Exclusivity
								Surcharge
								for
								Partially Distant
						-		Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Grou	qu	\$	0.00	Gross Receipts Second Group \$ 0.00				-
Base Rate Fee First Grou	qu	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED TWENT	Y-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
		¢.	0.00		Croup	¢	0.00	
Gross Receipts Third Gro	νuμ	_Ψ	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				11				

LEGAL NAME OF OWNER North State Comm						SI	STEM ID# 63110	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-SIXTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and
								Syndicated Exclusivity
		-						Surcharge
								for
								Partially Distant
								Stations
Fotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
NE HUNDRED TWENTY	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	. ha	- food fra	ih ar					
Enter here and in block			ibel group a	as shown in the boxes ab	JOVE.	\$		

LEGAL NAME OF OWNEF						S	YSTEM ID# 63110	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED TWEN	TY-NINTH	SUBSCRIBER GROUP	0	ii	THIRTIETH	I SUBSCRIBER GROUP	0	9
COMMUNITY AREA			U	COMMUNITY/ AREA			U	Computation
CALL SIGN	ALL SIGN DSE CALL SIGN			CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
otal DSEs		·	0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
·	·	<u>·</u>						
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED THIF	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIRT	Y-SECOND	SUBSCRIBER GROUP		
OMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
			0.00	T () DOG			0.00	
otal DSEs	DSEs 0.00			Total DSEs			0.00	
Bross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				<u> </u>				

LEGAL NAME OF OWNEF North State Comm						S	YSTEM ID# 63110	Name
BI	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROUP		n		I SUBSCRIBER GROUP		~
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
	DOL	ONLE CICIN	DOL		DOL		DOL	Base Rate Fe
								and
								Syndicated
		-						Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
						_		
Total DSEs		1	0.00	Total DSEs		11	0.00	
Gross Receipts First Gro	aua		0.00	Gross Receipts Second	d Croup	•	0.00	
	oup	\$	0.00	Gloss Receipts Second	Gloup	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED THIF	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	IRTY-SIXTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs	1	·····	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
	loup	·	0.00		Cicap	v		
		·		as shown in the boxes at		•		

LEGAL NAME OF OWNER	R OF CABL					SI	STEM ID# 63110	Name
RI				TE FEES FOR EACH	SUBSOR			
ONE HUNDRED THIRTY						I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		-						Base Rate Fe
								and Syndiaeted
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								•••••••
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	_
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second		\$	0.00	
	RTY-NINTH	SUBSCRIBER GROUP		11	FORTIETH	I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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						•		
Total DSEs		······	0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				11				
			riber group a	as shown in the boxes at	oove.			
Enter here and in block	ວ, iine 1, s	pace ∟ (page /)				\$		

LEGAL NAME OF OWNER						SY	STEM ID# 63110	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED FOR COMMUNITY/ AREA	KTY-FIRST	SUBSCRIBER GROUP	0	ONE HUNDRED FORT	Y-SECONE	SUBSCRIBER GROUP	0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee and
								Syndicated
								Exclusivity
		-						Surcharge for
								Partially
								Distant
		-						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	II as shown in the boxes at	oove.	\$		

LEGAL NAME OF OWNEF	R OF CABL					SY	STEM ID# 63110	Name
			BASE RA	TE FEES FOR EACH				
ONE HUNDRED FOF	RTY-FIFTH	SUBSCRIBER GROUP	0	ONE HUNDRED FC	RTY-SIXTH	I SUBSCRIBER GROUP	0	9
			·				Ŭ	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				
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	<u>,</u>
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-EIGHTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-						
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	n shown in the boxes at	oove.	\$		

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LEGAL NAME OF OWNEF North State Comm						S	YSTEM ID# 63110	Name
				TE FEES FOR EACH				
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GRO	UP 0	ONE HUNDREI) FIFTIETH	I SUBSCRIBER GROU	P 0	9
COMMUNITY AREA			U	COMMONT T/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and Syndicated
								Exclusivity
								Surcharge
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						n <mark>-</mark>		Partially Distant
		-						Stations
Total DSEs			0.00	Total DSEs				
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	00
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIFT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	1		0.00	Total DSEs	1	······	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ase Rate Fee: Add the	e base rat	e fees for each subso	riber group :	II	hove			

LEGAL NAME OF OWNER North State Comm						SY	STEM ID# 63110	Name
				TE FEES FOR EACH				
ONE HUNDRED FIF	IY-IHIRD	SUBSCRIBER GROU	<u>קן</u> ס	COMMUNITY/ AREA	Y-FOURTH	SUBSCRIBER GROUF	, 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		11	0.00	Total DSEs		11	0.00	
Gross Receipts First Gr	0110		0.00	Gross Receipts Secon	d Croup	•		
	oup	<u>\$</u>	0.00	Gloss Receipts Secon	u Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED FI	FTY-SIXTH	I SUBSCRIBER GROUF	>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs		··	0.00	Total DSEs	·	· ·	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee : Add the Enter here and in block			riber group :	II as shown in the boxes al	bove.	\$		

LEGAL NAME OF OWNER	R OF CABL					SY	STEM ID# 63110	Name
			BASEDA	TE FEES FOR EACH	SUBSOR			
ONE HUNDRED FIFTY-			DAGE RA	1		SUBSCRIBER GROUP		_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						n =		Base Rate Fe
								and
								Syndicated Exclusivity
						n -		Surcharge
								for
								Partially
		-						Distant
								Stations
		-						
							0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	l Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROUP		ONE HUNDRE	D SIXTIETH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$		

LEGAL NAME OF OWNER North State Comm						S	YSTEM ID# 63110	Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	IP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	J Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
								and
								Syndicated
						-		Exclusivity
								Surcharge
								for Dortiolly
						-		Partially Distant
								Stations
		-						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	•				· F	·		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	bove.	\$	0.00	

SYSTEM ID# 63110				LEGAL NAME OF OWNER		
FOR EACH SUBSCRIBER GROUP				BL		
SIXTH SUBSCRIBER GROUP	IP 0	SUBSCRIBER GROU	FIFTH	COMMUNITY/ AREA		
	· · · · · ·					
GN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN		
is 0.00	0.00			Total DSEs		
Gross Receipts Second Group \$ 0.00		\$ 0.00		t Group \$ 0.00		Gross Receipts First Gro
e Fee Second Group \$ 0.00	0.00	\$	oup	Base Rate Fee First Gro		
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THIRTY-NINTH SUBSCRIBER GROUP FORTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Fortal DSEs 0.00 Total DSEs 0.00 \$ 0.00 Gross Receipts Third Group \$ 0.00 \$ 0.00 \$ 0.00	THIRTY-NINTH SUBSCRIBER GROUP FORTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0							
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Community/ AREA	COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	e Fee First Group \$	Rate Fee Seco	0.00	ase Rate Fee Second Gr	oup \$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Construction of the second state		THIRTY-NINTH SUB			FOR	RTIETH SUBSCRIBER GI	ROUP	
Image: Second State Sta	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Amplitude state	IITY/ AREA	/UNITY/ AREA	0	OMMUNITY/ AREA		0	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Image: state stat	GN DSE CA	L SIGN	DSE	CALL SIGN D	SE CALL SIGN	DSE	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00								
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00								
Stross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Image: series of the series							
Stross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00								
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00								
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00								
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00						H		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00								
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Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00								
	Total DSEs 0.00 Total DSEs 0.00	:s	DSEs	0.00	otal DSEs		0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	ceipts Third Group	Receipts Fourt	0.00	ross Receipts Fourth Gro	up <u>\$</u>	0.00	
	Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	e Fee Third Group s	Rate Fee Fourt	0.00	ase Rate Fee Fourth Gro	up \$	0.00	

LEGAL NAME OF OWNE						SYSTEM ID# 63110		Nar
				TE FEES FOR EAG				
	RTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Compu of
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								Surcha
								for Partia
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Total DSEs			0.00	Total DSEs			0.00	
Bross 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	
FOF	TY-THIRD	SUBSCRIBER GRO	UP	FO	RTY-FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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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 (Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
Base Rate Fee: Add ti Enter here and in bloci			criber group	II as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE			•		SYSTEM ID# 63110		Nai	
E	BLOCK A:	COMPUTATION OI	F BASE RA					
	RTY-FIFTH	SUBSCRIBER GRO		11		H SUBSCRIBER GRO		g
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	ັ Compi
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Fotal 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		\$	0.00	Base Rate Fee Sec		\$	0.00	
	-SEVENTH	SUBSCRIBER GRO		H		H SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	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 th Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN				Name				
				TE FEES FOR EAG				
	RTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
								Base Rate
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
FI	FTY-FIRST	SUBSCRIBER GRO	UP	FI	FTY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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							63110 COUP RIBER GROUP O SIGN DSE Ba D D D D D D D D D D D D D	
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	irth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group	II as shown in the boxes	s above.	\$		

Nam	SYSTEM ID# 63110 RATE FEES FOR EACH SUBSCRIBER GROUP		•			LEGAL NAME OF OWNER North State Comm		
				п				
9		SUBSCRIBER GROU	Y-FOURTH	11		SUBSCRIBER GRO	Y-THIRD	
-	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Comput of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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and								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gro
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
	JP	SUBSCRIBER GROU	FTY-SIXTH	FI	JP	SUBSCRIBER GRC	TY-FIFTH	FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	oup	Total DSEs Gross Receipts Third Gr

LEGAL NAME OF OWNER OF CA North State Communicat					5	63110	Nai
BLOCK A		OF BASE RA	TE FEES FOR EAG				
	H SUBSCRIBER GRO		m		H SUBSCRIBER GRO		g
COMMUNITY/ AREA		0	COMMUNITY/ ARE	0	ະ Compu		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	compu
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	¢	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	\$	0.00				0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTY-NIN1	H SUBSCRIBER GRO	OUP		SIXTIET	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•••••• <mark>•</mark> •••••••••••••••••••••••••						
			11				
Fotal DSEs		0.00	Total DSEs			0.00	
	<u>\$</u>	0.00	Total DSEs Gross Receipts Fou	Irth Group	\$	0.00	
	s			rth Group	<u>\$</u>		
Total DSEs Gross Receipts Third Group Base Rate Fee Third Group					\$\$		

North State Communica	ABLE SYSTEM: tions, LLC				5	63110	
	A: COMPUTATION		11				
SIXTY-FIR	ST SUBSCRIBER GR	OUP 0	SIXTY-SECOND SUBSCRIBER GROUP				
		U	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 First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00	
	RD SUBSCRIBER GR		1		SUBSCRIBER GRO		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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					•		
Fotal DSEs		0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third Group	s	0.00	Total DSEs Gross Receipts Fou	Irth Group	\$	0.00	

LEGAL NAME OF OWI North State Com			•			5	63110	Nan
				TE FEES FOR EAG				
		I SUBSCRIBER GRO		1		H SUBSCRIBER GRO		9
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	A		0	Compu
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXT	Y-SEVENTH	I SUBSCRIBER GRO	DUP	S	IXTY-EIGHTI	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	\		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						···		
						=		
Fotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN			•			\$	63110 631	Na
	BLOCK A:	COMPUTATION C	DF BASE RA	TE FEES FOR EAG	CH SUBSCF	RIBER GROUP		
	XTY-NINTH	SUBSCRIBER GRO		SEVENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Comp
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								Base R
								ar Sundi
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								•
Total DSEs		11	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	
	NTY-FIRST	SUBSCRIBER GRO		1		D SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
Base Rate Fee Third Base Rate Fee: Add Enter here and in bloc	the base rat	te fees for each subs				\$	0.00	

LEGAL NAME OF OWNE North State Comm			•			S	63110	Name
				TE FEES FOR EAC				
	ITY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
-	NTY-FIFTH	SUBSCRIBER GROU		1		H SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						=		
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	above.	\$		

North State Communicat	BLE SYSTEM: ions, LLC				5	63110		
			TE FEES FOR EAC					
	H SUBSCRIBER GRO				H SUBSCRIBER GRO			
COMMUNITY/ AREA		0	COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE					
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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		
SEVENTY-NIN	H SUBSCRIBER GRO	DUP		EIGHTIETH	H SUBSCRIBER GRO	UP		
OMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	••••							
		0.00	Total DSEs			0.00		
Total DSEs		0.00	Gross Receipts Fou	rth Group	\$	0.00		
otal DSEs Gross Receipts Third Group	\$	0.00						
	\$	0.00						

LEGAL NAME OF OWN North State Com						\$	63110	Name
				TE FEES FOR EAG				
	HTY-FIRST	SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (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	
EIG	HTY-THIRD	SUBSCRIBER GRO	UP	EIG	HTY-FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	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 bloc			criber group	as shown in the boxes	s above.	\$		

	63110	S			•			LEGAL NAME OF OWNER North State Commu
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
Compu	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Ra								
and		_						
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	0.00			Total DSEs	0.00			Total DSEs
_	0.00	\$	Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
Ţ								
	0.00	\$		Base Rate Fee Second	0.00	\$		Base Rate Fee First Gro
_		SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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_	0.00			TALDOS				
	0.00			Total DSEs	0.00			Fotal DSEs
-	0.00							
-	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	oup	Gross Receipts Third Gr

LEGAL NAME OF OWNE						5	63110	Nan	
				TE FEES FOR EAG					
	ITY-NINTH	SUBSCRIBER GRO			UP	9			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computa	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	of				
								Base Rat	
								and	
								Syndic	
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								for	
								Partia	
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								Statio	
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	iroup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00		
NIN	ETY-FIRST	SUBSCRIBER GRO		NINI	ETY-SECONE	D SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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 (Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00		
Base Rate Fee: Add ti Enter here and in bloci			criber group	as shown in the boxes	s above.	\$			

EGAL NAME OF OWNE						5	63110 631	Nam
				TE FEES FOR EAG				
	TY-THIRD	SUBSCRIBER GRO		m		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comput of
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otal 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	
NINE	TY-FIFTH	SUBSCRIBER GRO	UP	N	INETY-SIXTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	e base rat	e fees for each subsc		as shown in the boxes		\$		

	BLE SYSTEM: ions, LLC				Ş	63110	Na
	A: COMPUTATION C		n				
	H SUBSCRIBER GRO				H SUBSCRIBER GRO		ļ
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Com
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							Curt
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							Dis
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Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINETY-NIN	H SUBSCRIBER GRO	OUP	ONE	HUNDREDTH	H SUBSCRIBER GRO	UP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	A		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		0.00	Total DSEs			0.00	
Fotal DSEs			н				
	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
otal DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	<u>\$</u>	0.00	

BLOCK A: ONE HUNDRED FIRST COMMUNITY/ AREA CALL SIGN DSE	COMPUTATION OF SUBSCRIBER GROU				RIBER GROUP		
COMMUNITY/ AREA	SUBSCRIBER GROU	JP				·	
					D SUBSCRIBER GROU		9
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	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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							Surcha for
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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	
ONE HUNDRED THIRE	SUBSCRIBER GROU	JP	ONE HUNDF	ED FOURTH	H SUBSCRIBER GROU	UP	
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-						
	-						
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

BLOCK A: COMPUT/ ONE HUNDRED FIFTH SUBSCRIE COMMUNITY/ AREA CALL SIGN DSE CALL S CALL SIGN DSE CALL S CALL SIGN DSE CALL S CALL SIGN SECOND SECONDAL SECOND S Gross Receipts First Group S	BER GROUP 0 IGN DSE IGN DSE	П		RIBER GROUP 1 SUBSCRIBER GROU CALL SIGN CALL SIGN C	UP 0 DSE 0 0 0 0.00 0.00	
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Total DSEs Gross Receipts First Group	0.00	Total DSEs			0.00	
Gross Receipts First Group	0.00		ond Group	 Image: Solution of the second s		
Gross Receipts First Group	0.00		ond Group	 Image: Solution of the second s		
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Gross Receipts First Group	0.00		ond Group	 Image: Second sec		
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ross Receipts First Group	0.00		ond Group	\$		
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iross Receipts First Group	0.00		ond Group	\$		
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		Gross Receipts Sec	ond Group	\$	0.00	
tase Pate Fee First Group						
	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED SEVENTH SUBSCRIE	BER GROUP	ONE HUND	RED EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	0	COMMUNITY/ AREA 0				
CALL SIGN DSE CALL S	IGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs	0.00	Total DSEs			0.00	
Gross Receipts Third Group	0.00	Gross Receipts Four	rth Group	\$	0.00	
]					
Sase Rate Fee Third Group \$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# North State Communications, LLC 63110									
				ATE FEES FOR EAG					
ONE HUNDR COMMUNITY/ AREA	ED NINTH	SUBSCRIBER GROU	JP 0	ONE HUN		SUBSCRIBER GRO	UP 0	9	
COMMONITI / AREA			U		A		U	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
								Syndicated	
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								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		
ONE HUNDRED E	LEVENTH	SUBSCRIBER GROU	JP	ONE HUNDRI	ED TWELVTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	1								
Total DSEs	1		0.00	Total DSEs			0.00		
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
]		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00		
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	s above.	\$			

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AREA 0 DSE CALL SIGN DSE DSE CALL SIGN DSE and Syndicate and Syndicate Exclusivi Surcharg for Partially Distant Stations Second Group \$ Second Group \$ Second Group \$ ORED SIXTEENTH SUBSCRIBER GROUP AREA 0	BL	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC		IBER GROUP			
DSE CALL SIGN DSE DSE CALL SIGN DSE Base Rate and Syndicate Exclusivi Surcharg for Partially Distant Stations Stations Second Group \$ Second Group \$ Second Group \$ ORED SIXTEENTH SUBSCRIBER GROUP AREA 0	ONE HUNDRED THIR	TEENTH	SUBSCRIBER GROU		1		I SUBSCRIBER GRO		٥	
DSE CALL SIGN DSE Base Rate and Syndicate Exclusivi Surcharg for Partially Distant Stations Second Group \$ 0.00 Second Group \$ 0.00 Second Group \$ 0.00	COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	-	
and Syndicate Exclusivi Surcharg for Partially Distant Stations Second Group <u>\$ 0.00</u> Second Group <u>\$ 0.00</u> Second Group <u>\$ 0.00</u>	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Exclusivit Surcharg for Partially Distant Stations Second Group \$ 0.00 Second Group \$ 0.00 Second Group \$ 0.00										
Surcharg for Partially Distant Stations Second Group <u>\$ 0.00</u> Second Group <u>\$ 0.00</u> Second Group <u>\$ 0.00</u> MRED SIXTEENTH SUBSCRIBER GROUP AREA 0										
for Partially Distant Stations 0.00 Second Group \$ 0.00 Second Group \$ 0.00 Second Group \$ 0.00										
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Second Group \$ 0.00 PRED SIXTEENTH SUBSCRIBER GROUP AREA 0	Total DSEs			0.00	Total DSEs			0.00		
DRED SIXTEENTH SUBSCRIBER GROUP AREA 0	Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
DRED SIXTEENTH SUBSCRIBER GROUP AREA 0	Base Rate Fee First Gro	and	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
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		IEENIH	SUBSCRIBER GROU	<u>مر</u> 0	1		1 SUBSCRIBER GRU			
DSE CALL SIGN DSE	COMMUNITY/ AREA			U	COMMUNITY/ ARE	A		U		
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			-							
0.00	Fotal DSEs			0.00	Total DSEs			0.00		
Fourth Group \$ 0.00	Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Fourth Group \$ 0.00	Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		

LEGAL NAME OF OWNER North State Comm			•			S	YSTEM ID# 63110	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
	ENTEENTH	SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	J Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
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								Partially
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec		\$	0.00	
	NTEENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-				+		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group	II as shown in the boxes	s above.	\$		

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Com	U			COMMONT I AREA	U			OMMUNIT I/ AREA
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	0.00	\$	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT	0.00	\$	Group	oss Receipts First G Ise Rate Fee First G DNE HUNDRED TWEN DMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	oss Receipts First G Se Rate Fee First G <u>DNE HUNDRED TWEN</u> DMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	oss Receipts First G se Rate Fee First G DNE HUNDRED TWEN DMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	oss Receipts First G se Rate Fee First G DNE HUNDRED TWEN DMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	oss Receipts First G Se Rate Fee First G <u>DNE HUNDRED TWEN</u> DMMUNITY/ AREA
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	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	oss Receipts First G Ise Rate Fee First G DNE HUNDRED TWEN DMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	oss Receipts First G Ise Rate Fee First G DNE HUNDRED TWEN DMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED TWEN OMMUNITY/ AREA
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	0.00	\$ SUBSCRIBER GROUP	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRED TWENT COMMUNITY/ AREA	0.00 0.00 0	SUBSCRIBER GROU	Group	ross Receipts First G ase Rate Fee First G ONE HUNDRED TWEN DMMUNITY/ AREA
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LEGAL NAME OF OWNE			_			(SYSTEM ID# 63110	Name
-			BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP		
	NTY-FIFTH	SUBSCRIBER GROUP		1		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computatior
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
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								Partially
								Distant
								Stations
		-						
Total DSEs		11	0.00	Total DSEs		11	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TWENTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-EIGHTH	SUBSCRIBER GROUP	D	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
	.							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th			riber group	as shown in the boxes	above.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OWNE North State Comm			•			5	63110	Name
				TE FEES FOR EAG				
	NTY-NINTH	SUBSCRIBER GROUP				H SUBSCRIBER GROUF		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		_						and
								Syndicated
		-						Exclusivity
								Surcharge for
		-						Partially
								Distant
								Stations
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	-	\$	0.00	Base Rate Fee Sec		\$	0.00	
-	RTY-FIRST	SUBSCRIBER GROUP		11		D SUBSCRIBER GROUF	。 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
					'			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE North State Comn			•			\$	63110 631	Name
E	BLOCK A:		BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	RTY-THIRD	SUBSCRIBER GROUP		11		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		0	J 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 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	
ONE HUNDRED THIF	RTY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED TH	HRTY-SIXTH	H SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	`			
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	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE North State Comm						S	63110	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAG	CH SUBSCF	IBER GROUP		
ONE HUNDRED THIRTY	-SEVENTH	SUBSCRIBER GROUP		1		H SUBSCRIBER GROUF		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	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	
ONE HUNDRED THIR	TY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRE	ED FORTIETH	I SUBSCRIBER GRO	UP	
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 G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	II as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN North State Com			•			S	63110	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EA		RIBER GROUP		
	ORTY-FIRST	SUBSCRIBER GROUP)			D SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	J 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	cond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED F	ORTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED F	ORTY-FOURTH	H SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloc			riber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE North State Comm			-			S	63110	Name
В	BLOCK A:		BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
	RTY-FIFTH	SUBSCRIBER GROUP				I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	3 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		-						Exclusivity
								Surcharge for
								Partially
		-						Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED F	ORTY-EIGHTH	I SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						Ħ		
						Π		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNE North State Comn			•				SYSTEM ID# 63110	Name
E	LOCK A:		BASE RA	ATE FEES FOR EAC		IBER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU	JP	ONE HUNDR		I SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA 0			0	COMMUNITY/ ARE	A		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
						n <mark>=</mark>		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	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FI	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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 C	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

Nan	63110	S						LEGAL NAME OF OWNER
		BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A:	BL
^	JP	SUBSCRIBER GROU	-FOURTH	ONE HUNDRED FIFT		SUBSCRIBER GROU	Y-THIRD	ONE HUNDRED FIFT
9 Comput	0			COMMUNITY/ AREA	0	COMMUNITY/ AREA 0		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate		-				-		
and		-						
Syndica		-				-		
Exclusiv Surcha		-						
for		-				-		
Partial								
Distar								
Statior		-						
		-				-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	l Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	JP	SUBSCRIBER GROU	TY-SIXTH	ONE HUNDRED FI	IP	SUBSCRIBER GROU	TY-FIFTH	ONE HUNDRED FIFT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		-				-		
		=				-		
		-						
						-		
						-		
						-		
	0.00			Total DSEs	0.00			otal DSEs
	0.00				0.00			
	0.00		O					
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	oup	Gross Receipts Third Gr

LEGAL NAME OF OWNE North State Comm						5	63110	Name
В	BLOCK A:		BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	-SEVENTH	SUBSCRIBER GROUP				I SUBSCRIBER GROUP		9
COMMUNITY/ AREA 0			0	COMMUNITY/ ARE	A		0	J Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec		\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROU		ONE HUNDR	ED SIXTIETH	I SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-				H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	II as shown in the boxes	above.	\$		

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Symplicated	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 Exclusivity Surcharge for Partially Distant Stations	 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 schedule. In making this computation, use gross receipts fig your actual calculations on this form. 	er zero. of DSEs used to compute the surcharge.
orations		
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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 First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1
	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 (page	each subscriber group as shown 7)

FORM SASE PAGE 20

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Sundiasted	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 Exclusivity Surcharge for	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	er zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this ures applicable to the particular group. You do not need to show
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	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	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
	11111 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	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#				
Name	North State Communications, LLC	63110				
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP				
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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					
and Syndicated Exclusivity Surcharge for Partially Distant Stations	 Step 1: In line 1, give the total DSEs by subscriber group for comments this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number 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.				
	NINTH SUBSCRIBER GROUP	TENTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs				
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs				
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation				
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group				
	ELEVENTH SUBSCRIBER GROUP	TWELVTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs				
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs				
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation				
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group				
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 9 7)				

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLU	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none effect of the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts your actual calculations on this form.	 arket any portion of your cable system is located in as defined Second 50 major television market mercial VHF Grade B contour stations listed in block A, part 9 of up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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 SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTEENTH SUBSCRIBER GROUP	SIXTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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	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	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Exclusivity Surcharge for Partially	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none endities 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 er zero. of DSEs used to compute the surcharge.
Distant Stations		ures applicable to the particular group. You do not need to show
	SEVENTEENTH SUBSCRIBER GROUP	EIGHTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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 SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	NINEENTH SUBSCRIBER GROUP	TWENTYTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	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 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Exclusivity Surcharge for Partially Distant Stations	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none end Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. 	for the VHF Grade B contour stations that were classified as er 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 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
	TWENTY-THIRD SUBSCRIBER GROUP	TWENTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge 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 e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.
Name	North State Communications, LLC	SYSTEM ID# 63110
	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 ma 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 commet this schedule.	rcial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	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 Stations	Step 4: Compute the surcharge for each subscriber group using the	
	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 SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	TWENTY-SEVENTH SUBSCRIBER GROUP	TWENTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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	
i i		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: North State Communications, LLC	FORM SA3E. PAGE 20. SYSTEM ID# 63110
		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 ma by section 76.5 of FCC rules in effect on June 24, 1981:	the station is not exempt in Part 7, you mus also compute a
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	Computation of First 50 major television market Second 50 major television market Base Rate Fee and INSTRUCTIONS: Syndicated Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A this schedule. Surcharge for 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. Partially 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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not	
	TWENTY-NINTH SUBSCRIBER GROUP	THIRTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SURCHARGE First Group	SURCHARGE Second Group
	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 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Exclusivity Surcharge	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none end 	for the VHF Grade B contour stations that were classified as the term of term
for Partially Distant Stations	 Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. 	· •
	THIRTY-THIRD SUBSCRIBER GROUP	THIRTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the V/HE DSEs	
	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	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 SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	THIRTY-FIFTH SUBSCRIBER GROUP	THIRTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	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	sach subscriber group as shown 7)

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
North State Communications, LLC	63110
BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	
First 50 major television market	Second 50 major television market
 this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number 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.
THIRTY-SEVENTH SUBSCRIBER GROUP	THIRTY-EIGHTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
Line 1: Enter the VHF DSEs	FORTIETH 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	Line 3: 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 Group	Fourth Group
	North State Communications, LLC BLOCK B: COMPUTATION OF SYNDICATED EXCLUS If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market and by section 76.5 of FCC rules in effect on June 24, 1981:

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	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:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated Exclusivity Surcharge for Partially	 Step 1: In line 1, give the total DSEs by subscriber group for commentities 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 the schedule intervention of the schedule of the subscriber group using the schedule is the subscriber group using the schedule is the subscriber group using the schedule. 	for the VHF Grade B contour stations that were classified as er zero. of DSEs used to compute the surcharge. formula outlined in block D, section 3 or 4 of part 7 of this
Distant Stations	schedule. In making this computation, use gross receipts fig your actual calculations on this form.	ures applicable to the particular group. You do not need to show
	FORTY-FIRST SUBSCRIBER GROUP	FORTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FORTY-THIRD SUBSCRIBER GROUP	FORTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY 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)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY 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 mar 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 Exclusivity Surcharge	 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 	for the VHF Grade B contour stations that were classified as er zero.
for Partially Distant Stations	 Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. 	
	FORTY-FIFTH SUBSCRIBER GROUP	FORTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FORTY-SEVENTH SUBSCRIBER GROUP	FORTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group subject to the surcharge computation	this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY 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)s

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	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 mar 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 Exclusivity Surcharge for	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none endities 3: In line 3, subtract line 2 from line 1. This is the total number of the schedule. 	for the VHF Grade B contour stations that were classified as ter zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this ures applicable to the particular group. You do not need to show
	FORTY-NINTH SUBSCRIBER GROUP	FIFTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
		computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTY-FIRST SUBSCRIBER GROUP	FIFTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
		computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	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 mar 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 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	
	FIFTY-THIRD SUBSCRIBER GROUP	FIFTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTY-FIFTH SUBSCRIBER GROUP	FIFTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY 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 mar 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 Exclusivity Surcharge	 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 the schedule of t	for the VHF Grade B contour stations that were classified as
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	
	FIFTY-SEVENTH SUBSCRIBER GROUP	FIFTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTY-NINTH SUBSCRIBER GROUP	SIXTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 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 e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Exclusivity Surcharge for Partially	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none end Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the 	for the VHF Grade B contour stations that were classified as er zero. of DSEs used to compute the surcharge.
Distant 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.	
	SIXTY-FIRST SUBSCRIBER GROUP	SIXTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SIXTY-THIRD SUBSCRIBER GROUP	SIXTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group 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 e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Exclusivity Surcharge for	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none entities 3: In line 3, subtract line 2 from line 1. This is the total number of the schedule of the schedule. 	for the VHF Grade B contour stations that were classified as er zero.
Partially Distant Stations	 Step 3: In fine 3, subtract line 2 from line 1. This is the total number of DoCs discut to compute the subcharge. 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. 	
	SIXTY-FIFTH SUBSCRIBER GROUP	SIXTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the V/HE DSEs	Line 1: Enter the VHE DSEs
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSES Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SURCHARGE First Group	SURCHARGE Second Group
	SIXTY-SEVENTH SUBSCRIBER GROUP	SIXTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

9 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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:	63110
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:	P
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 commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Syndicated this schedule. 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
for Partially Distant StationsStep 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.	N
SIXTY-NINTH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP	
Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs	
Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs	
Line 3: Subtract line 2 from line 1Line 3: Subtract line 2 from line 1and enter here. This is theand enter here. This is thetotal number of DSEs fortotal number of DSEs forthis subscriber groupthis subscriber groupsubject to the surchargesubject to the surcharge	
computation	
SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group \$	
SEVENTY-FIRST SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP	
Line 1: Enter the VHF DSEs	
Line 2: Enter the Exempt DSEs	
Line 3: Subtract line 2 from line 1Line 3: Subtract line 2 from line 1and enter here. This is theand enter here. This is thetotal number of DSEs fortotal number of DSEs forthis subscriber groupthis subscriber groupsubject to the surchargesubject to the surchargecomputation	
SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE 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)	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	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 mar 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 Exclusivity Surcharge for	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none endities 3: In line 3, subtract line 2 from line 1. This is the total number of the schedule. 	for the VHF Grade B contour stations that were classified as the zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this ures applicable to the particular group. You do not need to show
	SEVENTY-THIRD SUBSCRIBER GROUP	SEVENTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTY-FIFTH SUBSCRIBER GROUP	SEVENTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation	computation
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	
Name	North State Communications, LLC	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9 Computation 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 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:	
	SEVENTY-SEVENTH SUBSCRIBER GROUP	SEVENTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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 SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	SEVENTY-NINTH SUBSCRIBER GROUP	EIGHTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#		
Name	North State Communications, LLC	63110		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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:			
9				
Computation of	☐ First 50 major television market	Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:			
and Syndicated Exclusivity Surcharge	 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. 			
for Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the	 In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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. 		
	EIGHTY-FIRST SUBSCRIBER GROUP	EIGHTY-SECOND SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group		
	EIGHTY-THIRD SUBSCRIBER GROUP	EIGHTY-FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: 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 in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY 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 mar 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 Exclusivity Surcharge for Partially	 Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none endities 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 er zero. of DSEs used to compute the surcharge.
Distant Stations		ures applicable to the particular group. You do not need to show
	EIGHTY-FIFTH SUBSCRIBER GROUP	EIGHTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	EIGHTY-SEVENTH SUBSCRIBER GROUP	EIGHTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	Computation	Computation
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	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 mar 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.	rcial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity Surcharge for	Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number of	ter zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the	
	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	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group
	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	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group\$	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	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:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated Exclusivity Surcharge for Partially Distant	 Step 1: In line 1, give the total DSEs by subscriber group for commentities schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none entities the schedule in a subtract line 2 from line 1. This is the total number of Step 3: In line 3, subtract line 2 for a subscriber group using the for schedule. In making this computation, use gross receipts for schedule. In making this computation, use gross receipts for schedule. 	for the VHF Grade B contour stations that were classified as er zero. of DSEs used to compute the surcharge.
Stations	your actual calculations on this form.	
	NINETY-THIRD SUBSCRIBER GROUP	NINETY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SURCHARGE First Group	SURCHARGE Second Group
	NINETY-FIFTH SUBSCRIBER GROUP	NINETY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the 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 e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	North State Communications, LLC	63110
	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 ma 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 Exclusivity Surcharge for Partially Distant Stations		
	NINETY-SEVENTH SUBSCRIBER GROUP	NINETY-EIGHTH SUBSCRIBER GROUP
	NINETY-SEVENTH SUBSCRIBER GROUP	NINE I Y-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
	NINETY-NINTH SUBSCRIBER GROUP	ONE HUNDREDTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge 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
	Third Group	Fourth Group \$

LEGAL NAME OF OWNER OF CABLE SYSTEM: North State Communications, LLC BLOCK B: COMPUTATION OF SYNDICATED EXCLUS If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Surcharge Surger S	
If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market	I the station is not exempt in Part 7, you mus also compute a
Syndicated Exclusivity Surcharge. Indicate which major television ma	
First 50 major television market	Second 50 major television market
INSTRUCTIONS:	
	ercial VHF Grade B contour stations listed in block A, part 9 of
	o for the VHF Grade B contour stations that were classified as
Step 4: Compute the surcharge for each subscriber group using the	
	ONE HUNDERED SECOND SUBSCRIBER GROUP
ONE HUNDERED FIRST SUBSCRIBER GROUP	ONE HUNDERED SECOND SUBSCRIDER 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
subject to the surcharge	subject to the surcharge
computation	computation
First Group	Second Group
ONE HUNDERED THIRD SUBSCRIBER GROUP	ONE HUNDERED FOURTH SUBSCRIBER GROUP
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for
this subscriber group	this subscriber group
	subject to the surcharge computation
	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	reach subscriber group as shown e 7)
	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none et 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 fi your actual calculations on this form. ONE HUNDERED FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: North State Communications, LLC	SYSTEM ID# 63110
	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 ma 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.	rcial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group	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 of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. 	
	ONE HUNDRED FIFTH SUBSCRIBER GROUP	ONE HUNDRED SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	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
	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	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	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 ma 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	nercial 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	p 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	nter zero.
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 fin 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 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 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	r each subscriber group as shown je 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#	
Name	North State Communications, LLC	63110	
	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 me 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	p 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	Step 4: Compute the surcharge for each subscriber group using the		
Distant Stations		igures applicable to the particular group. You do not need to show	
Stations	your actual calculations on this form.		
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP	ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP	
	Line 1: Enter the V/HE DSEe	Line 1: Enter the V/HE DSEe	
	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	
	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 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	
	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		
	In the boxes above. Enter here and in block 4, line 2 of space L (pag	le 7)	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	North State Communications, LLC	63110
	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 Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule.	nercial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber grou	p 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 e Step 3: In line 3, subtract line 2 from line 1. This is the total numbe	
Partially	Step 4: Compute the surcharge for each subscriber group using th	
Distant		igures applicable to the particular group. You do not need to show
Stations	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	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 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	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 SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group\$
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo in the boxes above. Enter here and in block 4, line 2 of space L (page	r each subscriber group as shown ge 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#	
Name	North State Communications, LLC	63110	
	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 Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comn this schedule.	nercial VHF Grade B contour stations listed in block A, part 9 of	
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber grou	p 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 e Step 3: In line 3, subtract line 2 from line 1. This is the total numbe		
Partially	Step 3. In this 3, subtract line 2 from the 1. This is the total number Step 4 : Compute the surcharge for each subscriber group using the	5	
Distant		figures applicable to the particular group. You do not need to show	
Stations	your actual calculations on this form.		
	ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	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	
	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	and enter here. This is the	
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo in the boxes above. Enter here and in block 4, line 2 of space L (page	r each subscriber group as shown ge 7)	

Nomo	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#	
Name	North State Communications, LLC	63110	
	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 Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comm 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	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 fi	e 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	
Stations	your actual calculations on this form.		
	ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
	computation		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	First Group	Second Group	
	ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge computation	subject to the surcharge	
		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	e 7)s	
	, i u 3	,	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#	
Name	North State Communications, LLC	63110	
	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	nercial 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 grou	p for the VHF Grade B contour stations that were classified as	
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none e	nter 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	5	
Distant		igures applicable to the particular group. You do not need to show	
Stations	your actual calculations on this form.		
	ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED THIRTIETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 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	
	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		
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo in the boxes above. Enter here and in block 4, line 2 of space L (page	r each subscriber group as shown ge 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
	North State Communications, LLC	
9	 First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as 	
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations		
	ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	ONE HUNDRED THIRTY-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	ONE HUNDRED THIRTY-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	total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#	
Name	North State Communications, LLC	63110	
	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 Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for commettis 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 Stations	Step 4: Compute the surcharge for each subscriber group using the	5	
	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	computation	
	SYNDICATED EXCLUSIVITY		
	SURCHARGE First Group	SURCHARGE Second Group	
	ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED FORTIETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	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	each subscriber group as shown 9 7)	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.		
Name	North State Communications, LLC	SYSTEM ID# 63110		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
9				
Computation of	First 50 major television market	Second 50 major television market		
Base Rate Fee	INSTRUCTIONS:			
and Syndicated Exclusivity Surcharge for Partially Distant	 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 			
Stations	your actual calculations on this form.			
	ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP		
l	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		
	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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group		
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each in the boxes above. Enter here and in block 4, line 2 of space L (page 1)	ach subscriber group as shown 7)		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.	
Name	North State Communications, LLC	63110	
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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:		
9			
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.	rcial VHF Grade B contour stations listed in block A, part 9 of	
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as		
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.		
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the		
	ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-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	Line 3: Subtract line 2 from line 1 and enter here. This is the	
	total number of DSEs for	total number of DSEs for	
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge	
	computation	computation	
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group	
	ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 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 e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID# 63110	
Hame			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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:		
9			
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		
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	Step 4: Compute the surcharge for each subscriber group using the		
Distant Stations	your actual calculations on this form.	igures applicable to the particular group. You do not need to show	
	ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED FIFTIETH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	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	
	SURCHARGE First Group	Second Group	
	ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs	
	Line 3: Subtract line 2 from line 1	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 (pag	le 7)	
	1		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#		
	North State Communications, LLC 63'			
9	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:			
Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	by section 76.5 of FCC rules in effect on June 24, 1981:			
	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		
	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 3: 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 e in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#		
Name	North State Communications, LLC	63110		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you 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:			
9				
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 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	Step 4: Compute the surcharge for each subscriber group using the			
Distant Stations	schedule. In making this computation, use gross receipts the your actual calculations on this form.	igures applicable to the particular group. You do not need to show		
	ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs		
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the		
	total number of DSEs for	total number of DSEs for		
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge		
	computation	computation		
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY		
	SURCHARGE	SURCHARGE		
	First Group	Second Group		
	ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED SIXTIETH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs	Line 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			
	in the boxes above. Enter here and in block 4, line 2 of space L (pag	le 7)		