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

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
2-23-23	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	AC	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period		2022/2								
B	rate	Instructions:     Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.     List any other name or names under which the owner conducts the business of the cable system.     If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.  Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.  25206  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
		CABLE ONE, INC. d/b/a SPARKLIGHT								
					2520	620222				
					25206	2022/2				
		210 E EARLL DRIVE PHOENIX, AZ 85012								
С		STRUCTIONS: In line 1, give any business or trade names used to id mes already appear in space B. In line 2, give the mailing address of								
System	1	IDENTIFICATION OF CABLE SYSTEM:  SPARKLIGHT								
	2	MAILING ADDRESS OF CABLE SYSTEM:  3000 N. WESTWOOD BLVD.  (Number, street, rural route, apartment, or suite number) POPLAR BLUFF, MO 63902								
	lan a	(City, town, state, zip code)			:_4	- 41-				
Area		structions: For complete space D instructions, see page 1b. Identify hall communities.	only the frst comr	nunity served below and re	ist on page	3 TD				
Served	WIL	CITY OR TOWN	STATE							
First		TAYLORVILLE	IL							
Community	Е	Below is a sample for reporting communities if you report multiple cha		•	ı					
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	3 GRP#				
Sample	Ald		MD	A		1				
		ance	MD	В		2				
	Ge	ring	MD	В		3				

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

WHITEHALL

#### FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM 25206 CABLE ONE, INC. d/b/a SPARKLIGHT Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D 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 Δroa of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **TAYLORVILLE** IL AA First **HEWITTVILLE** IL AA Community OWANECO IL AA **PANA** IL AA 1 **CHRISTIAN COUNTY** IL AA 1 STONINGTON IL AA 1 See instructions for **SHELBYVILLE** ΙL AA 1 additional information on alphabetization. SHELBY COUNTY IL AA 1 IL 1 **MOWEAQUA** AA **ASSUMPTION** IL AA 1 **BETHANY** IL AA Add rows as necessary. **DALTON CITY** IL AA 1 **BLUE MOUND** IL AΑ 1 **MACON** IL AA 1 LITCHFIELD IL 2 AB 2 **SCHRAM CITY** IL AB 2 **TAYLOR SPRINGS** IL AB RAMSEY IL AB 3 **UNINC. FAYETTE COUNTY** IL AB 3 **BROWNSTOWN** IL AB 3 IL AΒ 3 VANDALIA **BLUFF CITY** IL AB 3 **VERA** IL AB 3 IL MONTGOMERY CO. AB 4 RAYMOND IL AB 4 **FARMERSVILLE** IL AB 4 **NOKOMIS** IL AB **COALTON** IL AB WITT IL AB 4 **HILLSBORO** IL AB 4 **GIRARD** IL AB 4 **NILWOOD** IL AB IL **SUNSET LAKES** AB 4 IL AB 4 VIRDEN **MACOUPIN COUNTY** IL AB 4 **CARLINVILLE** IL AB 5 **EAST GILLESPIE** IL AΒ 5 **GILLESPIE** IL AB 5 **AUBURN** IL AC 6 **THAYER** IL AC 6 **GREENVILLE** IL AD IL 7 UNINC. BOND CO. AD

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

IL

ΑE

8

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
CABLE ONE, INC. d/b/a SPARKLIGHT			25206						
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.									
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
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When reporting the carriage of television broadcast stations on a community-by-commu 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#						
ROODHOUSE	IL	AE	8	First					
CARROLLTON	IL	AE	8	Community					
JERSEYVILLE	IL	AE	9						
BRIGHTON	IL	AE	9						
MANCHESTER	IL	AE	10						
				See instructions for					
				additional information on alphabetization.					
				,					
				Add rows as necessary.					

**ACCOUNTING PERIOD: 2022/2** FORM SA3E. PAGE 2. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 25206 CABLE ONE. INC. d/b/a SPARKLIGHT SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES E In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information Secondary about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be). **Transmission** Service: Sub-Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken scribers and down by categories of secondary transmission service. In general, you can compute the number of subscribers in Rates each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 NO. OF NO. OF SUBSCRIBERS CATEGORY OF SERVICE RATE CATEGORY OF SERVICE SUBSCRIBERS RATE Residential: · Service to first set 215 \$ 42.00 **ECONOMY IPTV** 54.00 · Service to additional set(s) • FM radio (if separate rate) Motel, hotel 11 56.00

Commercial Converter Residential Non-residential

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1			BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	ı	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential				
<ul> <li>Pay cable</li> </ul>	10.99-19.00	Motel, hotel			STANDARD CABLE	\$67.75
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial			DIGITAL FAMILY PLUS	\$16.00
<ul> <li>Fire protection</li> </ul>		Pay cable			IPTV - STANDARD	\$67.75
•Burglar protection		Pay cable-add'l channel			HISPANIC TIER	\$6.00
Installation: Residential		Fire protection				
First set	\$ 100.00	Burglar protection				
<ul> <li>Additional set(s)</li> </ul>		Other services:				
• FM radio (if separate rate)		Reconnect	\$	90.00		
Converter		Disconnect				
		Outlet relocation	\$	30.00		
		Move to new address	\$	30.00		

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G. identify every television station (including translator stations and law power television stations)

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

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

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

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AA 4 DISTANT? 1. CALL 2 B'CAST 3 TYPF 5 BASIS OF 6 LOCATION OF STATION CARRIAGE SIGN CHANNEL ΩF (Yes or No) NUMBER **STATION** (If Distant) **KSDK** 35 Ν Yes 0 ST. LOUIS, MO **WICS** 15 Ν No SPRINGFIELD, IL WAND 20 N No DECATUR, IL WAND-DT2 20.2 I-M No DECATUR, IL WRSP 16 ı No SPRINGFIELD, IL WRSP-DT2 16.2 I-M No SPRINGFIELD, IL **WBUI** 22 ı No DECATUR, IL **WCIX** 11 ı No SPRINGFIELD, IL WCIA 34 N No CHAMPAIGN. IL WILL 9 Ε **URBANA, IL** No WICS-DT2 15.2 I-M No SPRINGFIELD, IL WICS-DT3 15.3 I-M No SPRINGFIELD, IL WICS-DT4 I-M SPRINGFIELD, IL 15.4 No WICS-SIMUL 15 N No SPRINGFIELD, IL WCIA-SIMUL 34 N CHAMPAIGN, IL No WRSP-SIMUL SPRINGFIELD, IL 16 No WAND-SIMUL 20 Ν No DECATUR, IL

G

Primary Transmitters: Television

See instructions for additional information on alphabetization.

FORM SA3E. PAGE 3.  LEGAL NAME OF OW	NED OF CARLE ON	OTEM:			SYSTEM	ID#
CABLE ONE, I			-		252	Name
PRIMARY TRANSMITT			<u>'</u>			
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute Basis basis under specifc F • Do not list the statio station was carried • List the station here basis. For further i in the paper SA3 frolumn 1: List ea each multicast stream cast stream as "WET. WETA-simulcast).	G, identify every system during the tions in effect or 6.61(e)(2) and (asis, as explaine Stations: With r CC rules, regular in here in space of only on a substantial and also in spanformation concorm.  Ch station's call in associated with A-2". Simulcast	r television stree accounting of June 24, 199 (4), or 76.63 (r) d in the next respect to any titions, or auth G—but do listitute basis. Ince I, if the state rning substitute sign. Do not rea a station accestreams must	period, except of all, permitting the eferring to 76.61 paragraph. If distant stations orizations: to the effect of the effect o	(1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your case Special Statement I both on a substitutions, see page (v) of a program services er-the-air designaticulumn 1 (list each	and low power television stations) If only on a part-time basis under in network programs [sections and (2) certain stations carried on a able system on a substitute program and and Program Log)—if the atte basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multi- a stream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television
on which your cable s Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: If the s planation of local serv Column 5: If you h 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 t Column 6: Give th	system carried the in each case way entering the le icast), "E" (for no ese terms, see partetion is outside vice area, see parave entered "You the distant statication on a part-tir sion of a distant at entered into or a primary transis simulcasts, also three categories, he location of ea Canadian station	the station.  whether the stater "N" (for no concommercial coage (v) of the case in column on during the case multicast streen or before Jumitter or an ase content "E". If a see page (v) ch station. Forns, if any, give	ation is a networetwork), "N-M" (for educational), or egeneral instructive area, (i.e. "or general instructive area, vou must confect accounting period ause of lack of a earn that is not some accounting period ause of lack of a earn that is not some 30, 2009, be association repressou carried the confect of the general in the confect are used.	rk station, an inder for network multicar "E-M" (for noncoutions located in the distant"), enter "Ye ons located in the nplete column 5, sod. Indicate by enterivated channel cubject to a royalty tween a cable systemating the primar channel on any other tructions located ist the community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further the in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
		CHANN	EL LINE-UP	AA CONT'D		
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	
WILL-SIMUL	9	E	No		URBANA, IL	
WBUI-SIMUL	21		No		DECATUR, IL	

FORM SA3F PAGE 3 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations)

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

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

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

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

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

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

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

		CHANN	AB		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KDNL	31	N	No		ST. LOUIS, MO
KDNL-DT2	31.2	I-M	No		ST. LOUIS, MO
KSDK	35	N	No		ST. LOUIS, MO
KMOV	24	N	No		ST. LOUIS, MO
KETC	23	E	Yes	0	ST. LOUIS, MO
WRBU	28	I	No		E. ST. LOUIS, IL
KTVI	33	I	No		ST. LOUIS, MO
KTVI-DT2	33.2	I-M	No		ST. LOUIS, MO
KPLR	26	I	No		ST. LOUIS, MO
KPLR-DT2	26.2	I-M	No		ST. LOUIS, MO
KPLR-DT3	26.3	I-M	No		ST. LOUIS, MO
KDNL-DT3	31.3	I-M	No		ST. LOUIS, MO
KMOV-DT2	24.2	I-M	No		ST. LOUIS, MO
KMOV-DT3	24.3	I-M	No		ST. LOUIS, MO
KSDK-DT2	35.2	I-M	No		ST. LOUIS, MO
KSDK-DT3	35.3	I-M	No		ST. LOUIS, MO
KSDK-DT4	35.4	I-M	No		ST. LOUIS, MO
KDNL-DT4	31.4	I-M	No		ST. LOUIS, MO

G

**Primary** Transmitters: Television

FORM SA3F PAGE 3 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations)

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

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

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

		CHANN	EL LINE-UP	AB CONT'D	
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
KDNL-DT4	31.4	I-M	No		ST. LOUIS, MO
KDNL-SIMUL	31	I	No		ST. LOUIS, MO
KMOV-SIMUL	24	N	No		ST. LOUIS, MO
KTVI-SIMUL	33	I	No		ST. LOUIS, MO
KSDK-SIMUL	35	N	No		ST. LOUIS, MO
KETC-SIMUL	23	Е	Yes	E	ST. LOUIS, MO
KPLR-SIMUL	26	ı	No		ST. LOUIS, MO

G

**Primary** Transmitters: Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KSDK	35	N	Yes	0	ST. LOUIS, MO
WICS	15	N	No		SPRINGFIELD, IL
WAND	20	N	No		DECATUR, IL
WAND-DT2	20.2	I-M	No		DECATUR, IL
WRSP	16	I	No		SPRINGFIELD, IL
WRSP-DT2	16.2	I-M	No		SPRINGFIELD, IL
WBUI	22	I	No		DECATUR, IL
WICS-SIMUL	15	N	No		SPRINGFIELD, IL
WCIX	11	I	No		SPRINGFIELD, IL
WCIA	34	N	No		CHAMPAIGN, IL
WILL	9	E	No		URBANA, IL
WICS-DT2	15.2	I-M	No		SPRINGFIELD, IL
WICS-DT3	15.3	I-M	No		SPRINGFIELD, IL
WCIA-SIMUL	34	N	No		CHAMPAIGN, IL
WRSP-SIMUL	16	ı	No		SPRINGFIELD, IL
WAND-SIMUL	20	N	No		DECATUR, IL
WILL-SIMUL	9	E	No		URBANA, IL
WBUI-SIMUL	21	ı	No		DECATUR, IL

G

**Primary** Transmitters: Television

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AD				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
KDNL	31	N	No		ST. LOUIS, MO			
KDNL-DT2	31.2	I-M	No		ST. LOUIS, MO			
KSDK	35	N	No		ST. LOUIS, MO			
KMOV	24	N	No		ST. LOUIS, MO			
KETC	23	Е	Yes	0	ST. LOUIS, MO			
WRBU	28	I	No		E. ST. LOUIS, IL			
KTVI	33	I	No		ST. LOUIS, MO			
KTVI-DT2	33.2	I-M	No		ST. LOUIS, MO			
KPLR	26	I	No		ST. LOUIS, MO			
KPLR-DT2	26.2	I-M	No		ST. LOUIS, MO			
KPLR-DT3	26.3	I-M	No		ST. LOUIS, MO			
KDNL-DT3	31.3	I-M	No		ST. LOUIS, MO			
KMOV-DT2	24.2	I-M	No		ST. LOUIS, MO			
KMOV-DT3	24.3	I-M	No		ST. LOUIS, MO			
KSDK-DT3	35.3	I-M	No		ST. LOUIS, MO			
KSDK-DT4	35.4	I-M	No		ST. LOUIS, MO			
KDNL-DT4	31.4	I-M	No		ST. LOUIS, MO			
KDNL-SIMUL	31	I	No		ST. LOUIS, MO			

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television station (accounting period, except (1) stations carried only on a part-time basis to the control of th	under <sup>′</sup>	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section of the control of the carriage of the carri	ons	

76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AD CONT'D								
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							
KMOV-SIMUL	24	N	No		ST. LOUIS, MO							
KTVI-SIMUL	33	I	No		ST. LOUIS, MO							
KSDK-SIMUL	35	N	No		ST. LOUIS, MO							
KETC-SIMUL	23	E	Yes	E	ST. LOUIS, MO							
KPLR-SIMUL	26	I	No		ST. LOUIS, MO							
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Primary Transmitters: Television

FORM SA3E. PAGE 3.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID#

Name

Name

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

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

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

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

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

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

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

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

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

		CHANN	AE		
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
KDNL	31	N	Yes	0	ST. LOUIS, MO
KDNL-DT2	31.2	I-M	Yes	0	ST. LOUIS, MO
KSDK	35	N	No		ST. LOUIS, MO
KMOV	24	N	Yes	0	ST. LOUIS, MO
KETC	23	E	Yes	0	ST. LOUIS, MO
WRBU	28	I	Yes	0	E. ST. LOUIS, IL
KTVI	33	I	No		ST. LOUIS, MO
KTVI-DT2	33.2	I-M	No		ST. LOUIS, MO
KPLR	26	I	No		ST. LOUIS, MO
KPLR-DT2	26.2	I-M	No		ST. LOUIS, MO
KPLR-DT3	26.3	I-M	No		ST. LOUIS, MO
KDNL-DT3	31.3	I-M	Yes	0	ST. LOUIS, MO
KMOV-DT2	24.2	I-M	Yes	0	ST. LOUIS, MO
KMOV-DT3	24.3	I-M	Yes	0	ST. LOUIS, MO
KSDK-DT2	35.2	I-M	No		ST. LOUIS, MO
KSDK-DT3	35.3	I-M	No		ST. LOUIS, MO
KSDK-DT4	35.4	I-M	No		ST. LOUIS, MO
KDNL-DT4	31.4	I-M	Yes	0	ST. LOUIS. MO

G

Primary Transmitters: Television

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FORM SA3E. PAGE 3.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television s carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis	,	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section of the control of the cont		
[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 carri	ied on a	Primary

substitute program basis, as explained in the next paragraph.

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

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

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AE CONT'D	
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
KDNL-SIMUL	31	ı	Yes	E	ST. LOUIS, MO
KMOV-SIMUL	24	N	Yes	E	ST. LOUIS, MO
KTVI-SIMUL	33	I	No		ST. LOUIS, MO
KSDK-SIMUL	35	N	No		ST. LOUIS, MO
KETC-SIMUL	23	Е	Yes	E	ST. LOUIS, MO
KPLR-SIMUL	26	ı	No		ST. LOUIS, MO

Primary Transmitters: Television

						NG PERIOD: 2022/
R OF CABLE SY	STEM:			SYS		Name
C. d/b/a SP	ARKLIGHT	•			25206	
S: TELEVISIO	N					
identify every stem during the stem during the stem of (2) and (4) as, as explained ations: With recording the stem carried in space of the stem carried the stem carried the each case we entered "Ye e distant station of a distant station of	r television standard to the accounting a June 24, 1984), or 76.63 (mathematical formulation of the accounting and the next present to any tions, or authors, or authors, or authors, or authors, or authors, if the standard to the station account of the station account of the station. The station account of the station account of the station. The station account of the station account of the station account of the station of the station account of the station of the station. For the station of the	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations:  it in space I (the tition was carried ute basis station eport origination cording to its over be reported in compart of the educational), or egeneral instruction as a sasigned to the educational), or egeneral instruction energy in the education ene	(1) stations carried e carriage of certa (e)(2) and (4))]; all carried by your carried by a substitute, see page (v) of a program services er-the-air designation of the television static ington, D.C. This near the station, an indeport network multicar "E-M" (for noncorritions located in the instant"), enter "Yes only the program of the column 5, so in the community the primary channel on any other structions located ist the community with	only on a part-time basis under in network programs [sections and (2) certain stations carried on a suble system on a substitute program that and Program Log)—if the subsis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommerce st), "I" (for independent), "I-M" numercial educational multicast), apaper SA3 form.  s". If not, enter "No". For an expaper SA3 form. tating the basis on which your string "LAC" if your cable system apacity. payment because it is the subject em or an association representing transmitter, enter the designater basis, enter "O." For a further I in the paper SA3 form. to which the station is licensed by which the station is identifed.	m ,	Primary Transmitters: Television
	CHANN	FL LINE-UP	AF			
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
Since	c. d/b/a SP.  S: TELEVISIO  identify every stem during the sin effect or  id(e)(2) and (e) a, as explained ations: With recruite, regular area in space and also in space and	identify every television states and uring the accounting as in effect on June 24, 198 (16)(2) and (4), or 76.63 (ns., as explained in the next pations: With respect to any crules, regulations, or authorize in space G—but do list and also in space I, if the statemation concerning substitus. It is station's call sign. Do not respect to a specific control of the statemation of the station accepts. Simulcast streams must channel number the FCC has been carried the station. In each case whether the station accepts are also should be set of the station of the station of the station of a distant multicast stream on a part-time basis becaute of a distant multicast stream on a part-time basis becaute of a distant multicast stream on a part-time basis becaute of a distant multicast stream on a part-time basis becaute of a distant multicast stream on a part-time basis becaute of a distant multicast stream on a part-time basis becauted into on or before Juping primary transmitter or an assulcasts, also enter "E". If the categories, see page (v) or the see categories, see page (v) or andian stations, if any, give multiple channel line-ups, if CHANNEL OF	C. d/b/a SPARKLIGHT  S: TELEVISION  identify every television station (including testem during the accounting period, except on a in effect on June 24, 1981, permitting the file)(2) and (4), or 76.63 (referring to 76.61 on as explained in the next paragraph.  ations: With respect to any distant stations: ere in space G—but do list it in space I (thenly on a substitute basis.  and also in space I, if the station was carried formation concerning substitute basis station on a substitute basis station associated with a station according to its own of the station is a network. Simulcast streams must be reported in concerning the letter "N" (for network), "N-M" (for st), "E" (for noncommercial educational), on each case whether the station is a network eternic the letter "N" (for network), "N-M" (for st), "E" (for noncommercial educational), or earned, see page (v) of the general instruction is outside the local service area, (i.e. "Concerned "Yes" in column 4, you must concerned in a distant multicast stream that is not some and a distant multicast stream that is not some of the one of the distant station of each station. For U.S. stations,	identify every television station (including translator stations at stem during the accounting period, except (1) stations carried as in effect on June 24, 1981, permitting the carriage of certaint(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (5), as explained in the next paragraph.  Intions: With respect to any distant stations carried by your cast rules, regulations, or authorizations:  In the space G—but do list it in space I (the Special Statemently on a substitute basis.  In also in space I, if the station was carried both on a substitute primation concerning substitute basis stations, see page (v) of an explaint of a station according to its over-the-air designation. It is station according to its over-the-air designation. It is succeeded with a station according to its over-the-air designation. It is sharing the letter "N" (for network), "N-M" (for network multicast), "E" (for noncommercial educational), or "E-M"	S: TELEVISION  identify every television station (including translator stations and low power television stations) stem during the accounting period, except (1) stations carried only on a part-time basis under ns in effect on June 24, 1981, permitting the carriage of certain network programs [sections in television]. It (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a si, as explained in the next paragraph.  Attons: With respect to any distant stations carried by your cable system on a substitute program trules, regulations, or authorizations:  ere in space G—but do list it in space I (the Special Statement and Program Log)—if the haly on a substitute basis.  and also in space I, if the station was carried both on a substitute basis and also on some other remation concerning substitute basis stations, see page (v) of the general instructions located not also in space I, if the station was carried both on a substitute basis and also on some other remation concerning substitute basis stations, see page (v) of the general instructions located not also in space I, if the station according to its over-the-air designation. For example, report multi-sesociated with a station according to its over-the-air designation. For example, report multi-security is secondary to the station of the station of the station.  The recomplex will be reported in column 1 (list each stream separately; for example channel number the FCC has assigned to the television station for broadcasting over-the-air in For example, will be station in each case whether the station is a network station, an independent station, or a noncommercine from the channel term carried the station.  The recomplex will be station in a network station, an independent station, or a noncommercinatering the letter "N" (for network), "N-M" (for network multicast). "I" (for independent), "I-M" (for network), "S-M" (for network) and the paper SA3 form.  The recomplex will be station as a network station in solution to the paper sha	S: TELEVISION  identify every television station (including translator stations and low power television stations) stem during the accounting period, except (1) stations carried only on a part-time basis under is in effect on June 24, 1981, permitting the carriage of certain network programs [sections in sin effect on June 24, 1981, permitting the carriage of certain network programs [sections in televisions]. The sex plained in the next paragraph.  Interest on June 24, 1981, permitting the carriage of certain network programs [sections in televisions]. The sex plained in the next paragraph.  Interest on June 24, 1981, permitting the carriage of certain network program carried on a substitute program trules, regulations, or authorizations:  Interest on June 24, 1981, permitting the carriage of vertain station as substitute program trules, regulations, or authorizations:  Interest on Substitute basis.  In a substitute basis.  In a substitute basis.  In a substitute basis.  In a substitute basis station was carried both on a substitute basis and also on some other rimation concerning substitute basis stations, see page (v) of the general instructions located in a station of some substitute basis station according to its over-the-air designation. For example, report multi-gr. Simulcast streams must be reported in column 1 (list each stream separately; for example channel number the FCC has assigned to the television station for broadcasting over-the-air in For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel term carried the station.  In each case whether the station is a network station, an independent station, or a noncommercial netring the letter "N" (for network), "N-M" (for network multicast), "I (for independent), "I-M" styl., "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). e terms, see page (v) of the general instructions located in the paper SA3 form.  In each case, see page (v) of the general instructions located in the paper SA3

FORM SA3E. PAGE 3.					CVCTEM ID#		
CABLE ONE, IN					SYSTEM ID# 25206	Name	
PRIMARY TRANSMITTE							
In General: In space (carried by your cable s	G, identify every	television state	period, except	(1) stations carried	and low power television stations) I only on a part-time basis under in network programs [sections	G	
substitute program bas	sis, as explaine	d in the next p	oaragraph.	. , , , , , , , , , , , , , , , , , , ,	nd (2) certain stations carried on a	Primary Transmitters:	
basis under specifc FC	Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program asis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the						
station was carried	only on a subst	itute basis.	. ,		ζ ,		
	formation conc				te basis and also on some other the general instructions located		
Column 1: List eac	h station's call	-			s such as HBO, ESPN, etc. Identify		
			•	•	ion. For example, report multi- stream separately; for example		
Column 2: Give the					on for broadcasting over-the-air in nay be different from the channel		
	in each case w	hether the sta			pendent station, or a noncommercial		
					nst), "I" (for independent), "I-M" mmercial educational multicast).		
For the meaning of the Column 4: If the st					e paper SA3 form. s". If not, enter "No". For an ex-		
olanation of local servi					paper SA3 form. tating the basis on which your		
· · · · · · · · · · · · · · · · · · ·	ne distant statio	n during the a	accounting perio	od. Indicate by ente	ering "LAC" if your cable system		
For the retransmiss	ion of a distant	multicast stre	am that is not s	ubject to a royalty	payment because it is the subject		
the cable system and a	a primary transr	nitter or an as	sociation repres	senting the primar	tem or an association representing y transmitter, enter the designa-		
					ner basis, enter "O." For a further d in the paper SA3 form.		
					to which the station is licensed by the which the station is identified.		
<b>Note:</b> If you are utilizin				•			
	T	CHANN	EL LINE-UP	AG			
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)			
	HOMBER	- CITATION		(ii Biotaint)			
				***************************************			

FORM SA3E. PAGE	3.					ING FERIOD. 2022
	WNER OF CABLE SY , INC. d/b/a SP		r		SYSTEM ID# 25206	Name
PRIMARY TRANSMI						
carried by your cab	le system during t	he accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G
•				•	iin network programs [sections nd (2) certain stations carried on a	Primary
substitute program	basis, as explaine	d in the next	paragraph.	. , , , , , , , , , , , , , , ,	, ,	Transmitters:
Substitute Basi basis under specifo				carried by your ca	able system on a substitute program	Television
<ul> <li>Do not list the stat</li> </ul>	ion here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the	
<ul> <li>List the station he</li> </ul>		ace I, if the sta			ute basis and also on some other the general instructions located	
in the paper SA3		sian Do not r	enort origination	n nrogram services	s such as HBO, ESPN, etc. Identify	
		-			ion. For example, report multi-	
cast stream as "WE WETA-simulcast).	TA-2". Simulcast	streams must	be reported in o	column 1 (list each	stream separately; for example	
	the channel numb	per the FCC h	as assigned to t	he television station	on for broadcasting over-the-air in	
ts community of lice on which your cable	•		annel 4 in Wash	ington, D.C. This r	may be different from the channel	
			ation is a netwo	rk station, an inde <sub>l</sub>	pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M" mmercial educational multicast).	
Tor independent mi For the meaning of	,, ,		,,	`	,	
			•	,	s". If not, enter "No". For an ex-	
olanation of local se Column 5: If you					paper SA3 form. stating the basis on which your	
•		•	٠.	•	ering "LAC" if your cable system	
carried the distant s For the retransm	•				payment because it is the subject	
of a written agreem	ent entered into or	n or before Ju	ine 30, 2009, be	tween a cable sys	tem or an association representing	
					y transmitter, enter the designa- ner basis, enter "O." For a further	
explanation of these	e three categories	, see page (v)	of the general i	nstructions located	d in the paper SA3 form.	
					to which the station is licensed by the which the station is identified.	
<b>Note:</b> If you are util				•		
		CHANN	IEL LINE-UP	AH		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
		······		<b>†</b>		
		<b> </b>				
		<b> </b>		<b></b>		
		ļ				

FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name			
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT			25206	Name			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network) multicast), "I" (for independent), "I-M" (for in									
explanation of these th	ree categories,	, see page (v)	of the general in	nstructions located	in the paper SA3 form.				
	anadian statio	ns, if any, give	e the name of th	e community with	which the station is identifed.				
Note: If you are utilizen	g munipic chai	• •	EL LINE-UP	•	лаппот пто-чр.				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION				
	NUMBER	STATION		(If Distant)					
					ļ				
		ļ							
		ļ							

FORM SA3E. PAGE 3.						ACCOUNTI	NG PERIOD: 2022/2
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYS	STEM ID#	Name
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	•			25206	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried of List the station here, as basis. For further interest in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multice For the meaning of the Column 4: If the sta planation of local servic Column 5: If you had cable system carried the carried the distant stati For the retransmiss of a written agreement the cable system and at tion "E" (exempt). For se explanation of these th	G, identify every ystem during the ons in effect or .61(e)(2) and (6:sis, as explained tations: With respect to rules, regular here in space only on a substand also in spatformation concern.  In station's call associated with regular associated with regular associated with regular associated with in each case we entering the least), "E" (for not se terms, see pation is outside ce area, see pation is outside con on a part-tire ion of a distant entered into or a primary transistimulcasts, also ree categories,	r television state accounting a June 24, 198 (4), or 76.63 (4), or 76.63 (4), or 76.63 (4), or authors, or authors	period, except (al., permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its over be reported in contact as assigned to the tion is a network (al.), "N-M" (freducational), or expensed instruction is a network (al., "digeneral instruction in its a network (al., "digeneral instruction in its a network (al	(1) stations carried e carriage of certa (e)(2) and (4))]; all carried by your carried by a substitute, see page (v) of a program services er-the-air designation of the television static ington, D.C. This result is the television static ington, and independent in the television static ington, and in the television	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	a am y	G Primary Transmitters: Television
Note: If you are utilizing				-	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AJ			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.						Accountin	NG PERIOD: 2022
LEGAL NAME OF OWNE					SYS	TEM ID#	Name
CABLE ONE, INC						25206	
PRIMARY TRANSMITTER							
carried by your cable sy: FCC rules and regulation 76.59(d)(2) and (4), 76.6 substitute program basis <b>Substitute Basis St</b> : basis under specifc FCC • Do not list the station hastation was carried oi • List the station here, at basis. For further informing in the paper SA3 form Column 1: List each each multicast stream a cast stream as "WETA-2"	stem during the ns in effect on 61(e)(2) and (4 s, as explained ations: With recording to a substitution of also in space or mation concern.  station's call subscitution of a substitution of a	te accounting June 24, 198 June 24, 198 June 26, 198 June	period, except (81, permitting the eferring to 76.61 paragraph. distant stations prizations: it in space I (the tion was carried ute basis station eport origination pording to its over be reported in continuous continuous continuous continuous except origination continuous continuous continuous except origination continuous continuous continuous except origination continuous continuous except origination continuous continuous except origination continuous except of the exce	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your case Special Statemes both on a substitute, see page (v) of a program services er-the-air designationum 1 (list each	and low power television stations) only on a part-time basis under in network programs [sections and (2) certain stations carried on a able system on a substitute program and Program Log)—if the ute basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in	m	Primary Transmitters: Television
on which your cable sys  Column 3: Indicate in educational station, by e (for independent multica For the meaning of thes  Column 4: If the stat planation of local service  Column 5: If you hav cable system carried the carried the distant statio For the retransmissic of a written agreement e the cable system and a tion "E" (exempt). For sin explanation of these thre  Column 6: Give the	tem carried then each case wentering the let ast), "E" (for note terms, see pation is outside e area, see pawe entered "Ye e distant station on a part-timent on of a distant tentered into on primary transmulcasts, also ee categories, location of each anadian station	e station.  whether the stater "N" (for near the local services" in column in during the an ebasis becamulticast stream or before Junitter or an assection of the local services	ation is a network twork), "N-M" (freducational), or general instructional instruction	k station, an inder or network multica r "E-M" (for noncor- tions located in the istant"), enter "Ye- ons located in the nplete column 5, s d. Indicate by enter ctivated channel or ubject to a royalty tween a cable syst senting the primary channel on any oth instructions located ist the community e community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject em or an association representing transmitter, enter the designater basis, enter "O." For a further I in the paper SA3 form. to which the station is licensed by which the station is identifed.	1	
		CHANN	EL LINE-UP	AK			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN			<del></del>		SYSTEM II	Name			
CABLE ONE, IN	C. d/b/a SP	ARKLIGHT			2520	06			
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
carried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76. substitute program bas	ystem during thons in effect on .61(e)(2) and (4 is, as explained	e accounting June 24, 198 l), or 76.63 (re d in the next p	period, except ( 81, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	G Primary Transmitters: Television			
basis under specifc FC  • Do not list the station	basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the								
1	and also in spa	ce I, if the sta			ite basis and also on some other the general instructions located				
each multicast stream a cast stream as "WETA- WETA-simulcast).	n station's call sassociated with -2". Simulcast s	a station acc streams must	cording to its over be reported in c	er-the-air designati column 1 (list each	such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example on for broadcasting over-the-air in				
its community of license on which your cable sys	e. For example stem carried th	, WRC is Cha e station.	ınnel 4 in Washi	ington, D.C. This n	nay be different from the channel				
Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servic Column 5: If you had cable system carried the carried the distant static. For the retransmissi of a written agreement the cable system and ation "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or C Note: If you are utilizing	in each case we entering the let ast), "E" (for no se terms, see pation is outside the area, see pation is outside the distant station on on a part-tin on of a distant entered into or a primary transmirmulcasts, also ree categories, location of each anadian station	whether the stater "N" (for ne commercial page (v) of the content of the local servinge (v) of the local servinge (v) of the station. For the line-ups, until the line-ups, until l	etwork), "N-M" (for educational), or enducational), or enducational), or enducational instructional enducational enducatio	or network multicar "E-M" (for noncortions located in the istant"), enter "Yesons located in the nplete column 5, s.d. Indicate by entectivated channel cubject to a royalty tween a cable syst senting the primary channel on any other tructions located ist the community ecommunity with space G for each of	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject em or an association representing y transmitter, enter the designater basis, enter "O." For a further I in the paper SA3 form. to which the station is licensed by the which the station is identifed.				

FORM SA3E. PAGE 3.						ACCOUNTI	NG PERIOD: 2022/
LEGAL NAME OF OWN			-		SYS	STEM ID# 25206	Name
-							
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For	G, identify every eystem during the ions in effect on 6.61(e)(2) and (4 sis, as explained stations: With record only on a substand also in spanformation concurrent.  The station's call associated with associated with a casociated with a casociated with a in each case we entering the legislation is outside the distant static ion on a part-tire ion of a distant a entered into or a primary transis simulcasts, also	r television starte accounting a June 24, 198 4), or 76.63 (not of in the next prespect to any tions, or authors, or a station accounting substitute basis.  The station accounting the form of the station accounting the station.  The station accounting the station or before Junitter or an associated accounting the station or before Junitter or an associated accounting the station or before Junitter or an associated accounting the station or before Junitter or an associated accounting the station or before Junitter or an associated accounting the station accounting t	period, except and period, except and permitting the ferring to 76.6° paragraph. If distant stations orizations: It it in space I (the station was carried ute basis station eport origination cording to its own be reported in compart of the station is a network attion is a network etwork), "N-M" (for educational), or expeneral instruction of the station is a network of the station is a network of example of lack of a station is a network of the station is a network of the station is a network of example of lack of a station is an example of lack of a station is an example of lack of a station is an example of lack of a station is not some 30, 2009, be sociation representation of the station is an example of lack of a station of the station of the station is an example of lack of a station of the station of	(1) stations carried e carriage of certa (e)(2) and (4))]; a carried by your cast of carried by on a program services er-the-air designate column 1 (list each carried by the television static ington, D.C. This ratk station, an independent of the carried by carried in the first of carried in the inplete column 5, so do Indicate by entry tween a cable system on any other carried in the primar channel on any other carried in the carried in the carried carried in the carried in th	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	i im y	Primary Transmitters: Television
	Canadian statio	ns, if any, give	e the name of th	e community with	to which the station is licensed by which the station is identifed. channel line-up.	the	
		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		

	WNER OF CABLE SY		_		SYSTEM ID	Name
CABLE ONE	, INC. d/b/a SP	ARKLIGHT			25206	5
PRIMARY TRANSMI	TTERS: TELEVISIO	N				
carried by your cab	le system during the	he accounting	period, except (	(1) stations carried	and low power television stations) I only on a part-time basis under in network programs [sections	G
substitute program	basis, as explaine	d in the next	oaragraph.		nd (2) certain stations carried on a	Primary Transmitters: Television
	ion here in space	G—but do list		e Special Stateme	ent and Program Log)—if the	
<ul> <li>List the station he basis. For furthe</li> </ul>	r information conc	ace I, if the sta			ute basis and also on some other the general instructions located	
in the paper SA3 Column 1: List 6		sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify	
cast stream as "WE			-	-	ion. For example, report multi- stream separately; for example	
			•		on for broadcasting over-the-air in	
on which your cable	•		annei 4 in wasni	ington, D.C. This r	nay be different from the channel	
Column 3: Indic	até in each case v	whether the st			pendent station, or a noncommercial	
,	, ,	,	,,		ust), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of	these terms, see	page (v) of the	e general instruc	ctions located in th	e paper SA3 form.	
Column 4: If the planation of local se			•	,	s". If not, enter "No". For an ex- naper SA3 form	
					tating the basis on which your	
•		•	٠.	•	ering "LAC" if your cable system	
carried the distant s For the retransm	•				apacity. payment because it is the subject	
					tem or an association representing	
•			•	• •	y transmitter, enter the designa-	
, , ,			•	•	ner basis, enter "O." For a further d in the paper SA3 form.	
Column 6: Give	the location of ea	ch station. Fo	r U.S. stations, I	list the community	to which the station is licensed by the	
FCC. For Mexican o <b>Note:</b> If you are util		, ,, ,		,	which the station is identifed.	
- you are un	izing multiple char	• •	EL LINE-UP	•	лаппо шо-чр.	
4.0011	2. B'CAST	3. TYPE	1		6. LOCATION OF STATION	1
1. CALL SIGN	2. B CAST	OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
01014	NUMBER	STATION	(103 01 140)	(If Distant)		
	TOMBER	CITTION		(ii Biotant)		1

FORM SA3E. PAGE 3.							,		
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM		Name		
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	•		25	206	Humo		
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program bas	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
basis under specifc FC  Do not list the station	C rules, regula here in space	tions, or autho G—but do list	orizations:		nt and Program Log)—if the		Television		
basis. For further in	and also in spa formation conc	ce I, if the sta			ute basis and also on some other the general instructions located				
each multicast stream	h station's call : associated with	a station acc	ording to its over	er-the-air designat	such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example				
					on for broadcasting over-the-air in				
on which your cable sy	stem carried th	e station.		-	nay be different from the channel pendent station, or a noncommercial				
(for independent multic For the meaning of the <b>Column 4:</b> If the sta	east), "E" (for no se terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), or e general instructice area, (i.e. "d	r "E-M" (for noncor tions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-				
cable system carried th	ave entered "Ye ne distant statio	es" in column on during the a	4, you must con	nplete column 5, s d. Indicate by ente	tating the basis on which your ering "LAC" if your cable system				
carried the distant stati	•				apacity. payment because it is the subject				
•				•	em or an association representing  / transmitter, enter the designa-				
tion "E" (exempt). For s	simulcasts, also	enter "E". If	you carried the o	channel on any oth	ner basis, enter "O." For a further				
Column 6: Give the	location of each	ch station. Fo	r U.S. stations, I	ist the community	I in the paper SA3 form. to which the station is licensed by the				
					which the station is identifed.				
Note: If you are utilizing	g multiple chan		•		лаппет ше-ир.				
	1	CHANN	EL LINE-UP	AO					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)					
	NOMBER	OTATION		(II Distant)					

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN					SYSTEM ID#	Name		
CABLE ONE, IN	C. d/b/a SP	ARKLIGHT	•		25206			
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis								
station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example								
WETA-simulcast).  Column 2: Give the	channel numb	er the FCC ha	as assigned to t	he television statio	on for broadcasting over-the-air in			
on which your cable sys	stem carried th	e station.			nay be different from the channel pendent station, or a noncommercial			
Column 3: Indicate educational station, by (for independent multic For the meaning of the: Column 4: If the staplanation of local servic Column 5: If you ha cable system carried the carried the distant static For the retransmissiof a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the	in each case we entering the letast), "E" (for no se terms, see pation is outside the entered "Ye are distant station on of a distant entered into or a part-timon of the entered into or a primary transminulcasts, also ree categories, location of each anadian station	whether the stater "N" (for ne concommercial page (v) of the the local servinge (v) of the concommercial page (v) of the conco	etwork), "N-M" (f educational), or e general instruc- ice area, (i.e. "d general instructi 4, you must con accounting perio- use of lack of a sam that is not s are 30, 2009, bet pou carried the co- of the general in r U.S. stations, I e the name of th	or network multicar "E-M" (for noncortions located in the listant"), enter "Yesons located in the nplete column 5, std. Indicate by entectivated channel cubject to a royalty tween a cable systeenting the primary channel on any other tructions located ist the community ecommunity with space G for each of	st), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject em or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further I in the paper SA3 form. to which the station is licensed by the which the station is identifed.			

FORM SA3E. PAGE 3.  LEGAL NAME OF OWNE	ER OF CABLE SY	STEM:			SYSTEM ID#	:	
CABLE ONE, IN			•		25206	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable sy	stem during th	ne accounting	period, except	(1) stations carried	and low power television stations) I only on a part-time basis under	G	
•				•	in network programs [sections nd (2) certain stations carried on a	Primary	
substitute program bas Substitute Basis St	bstitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program						
basis under specifc FC  Do not list the station station was carried of	here in space	G—but do list		e Special Stateme	nt and Program Log)—if the		
List the station here, a	and also in spa formation conc	ce I, if the sta			ute basis and also on some other the general instructions located		
Column 1: List each	n station's call	-			such as HBO, ESPN, etc. Identify		
cast stream as "WETA-			•	•	ion. For example, report multi- stream separately; for example		
					on for broadcasting over-the-air in nay be different from the channel		
on which your cable sys <b>Column 3:</b> Indicate	stem carried th in each case v	e station. whether the st	ation is a netwo	rk station, an inde	pendent station, or a noncommercial		
					st), "I" (for independent), "I-M" mmercial educational multicast).		
For the meaning of the	se terms, see p	page (v) of the	e general instruc	ctions located in th	e paper SA3 form.		
Column 4: If the sta planation of local service			•	,	s". If not, enter "No". For an ex- paper SA3 form.		
Column 5: If you ha	ve entered "Ye	es" in column	4, you must cor	nplete column 5, s	tating the basis on which your		
•	ble system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system rried the distant station on a part-time basis because of lack of activated channel capacity.						
For the retransmissi	For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject						
•				•	tem or an association representing y transmitter, enter the designa-		
tion "E" (exempt). For s	imulcasts, also	enter "E". If	you carried the	channel on any oth	ner basis, enter "O." For a further		
					I in the paper SA3 form. to which the station is licensed by the		
					which the station is identifed.		
Note: If you are utilizing	g multiple chan	nel line-ups,	use a separate s	space G for each o	channel line-up.		
		CHANN	EL LINE-UP	AQ			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)		-	
						_	
						_	
						1	
						-	
						-	
						1	
				<b>†</b>	<u> </u>	1	
		ļ		<b>-</b>	<del> </del>		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID	Name	
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT			25206	5	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76, substitute program bas	ystem during thons in effect on .61(e)(2) and (4 is, as explained	ne accounting June 24, 198 I), or 76.63 (red in the next p	period, except ( 81, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) I only on a part-time basis under in network programs [sections and (2) certain stations carried on a	Primary Transmitters: Television	
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute 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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located							
in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in							
its community of licenson which your cable sys	e. For example stem carried th	, WRC is Cha e station.	nnel 4 in Washi	ington, D.C. This n	nay be different from the channel		
Column 3: Indicate educational station, by (for independent multic For the meaning of the: Column 4: If the staplanation of local servic Column 5: If you ha cable system carried the carried the distant static For the retransmissiof a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the	in each case we entering the let ast), "E" (for no se terms, see pation is outside ce area, see pawe entered "Ye de distant statio on on a part-tinion of a distant entered into or a primary transmissimulcasts, also ree categories, a location of each anadian station	whether the stater "N" (for ne concommercial page (v) of the concommercial page (v) page (	etwork), "N-M" (freducational), or general instructional, it is a general instructional, it is a general instructional, you must contact outside of lack of a general instructional in the sam that is not some 30, 2009, between 30, 2009, between 30, 2009, between 30, 2009, it is a general in the same of the general in	or network multica r "E-M" (for noncor- tions located in the istant"), enter "Yes- ons located in the nplete column 5, si d. Indicate by ente- ctivated channel c- ubject to a royalty tween a cable syst senting the primary channel on any oth- nstructions locatec- ist the community e community with space G for each c	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
						<mark>.</mark> 	
						] ]	

FORM SA3E. PAGE 3.  LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#		
CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	=		25206	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	ystem during th	ne accounting	period, except	(1) stations carried	and low power television stations) I only on a part-time basis under	G	
•				•	in network programs [sections nd (2) certain stations carried on a	Primary	
Substitute Basis S	bstitute program basis, as explained in the next paragraph. <b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program as substitute prog						
•	here in space	G—but do list		e Special Stateme	nt and Program Log)—if the		
	formation conc				ute basis and also on some other the general instructions located		
Column 1: List each each multicast stream	n station's call associated with	a station acc	cording to its over	er-the-air designat	such as HBO, ESPN, etc. Identify ion. For example, report multi-		
WETA-simulcast).			·	•	stream separately; for example on for broadcasting over-the-air in		
its community of licens on which your cable sy	e. For example stem carried th	, WRC is Cha e station.	annel 4 in Wash	ington, D.C. This r	nay be different from the channel		
educational station, by	entering the le	tter "N" (for ne	etwork), "N-M" (f	or network multica	pendent station, or a noncommercial st), "I" (for independent), "I-M" mmercial educational multicast).		
For the meaning of the	se terms, see p	page (v) of the	e general instruc	tions located in th	,		
•	ve entered "Ye	es" in column	4, you must con	nplete column 5, s	tating the basis on which your		
carried the distant stati	able system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system arried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject						
of a written agreement	entered into or	or before Ju	ne 30, 2009, be	tween a cable syst	tem or an association representing y transmitter, enter the designa-		
explanation of these th	ree categories,	see page (v)	of the general i	nstructions located	ner basis, enter "O." For a further I in the paper SA3 form.		
	anadian statio	ns, if any, give	e the name of th	e community with	to which the station is licensed by the which the station is identifed.		
		CHANN	EL LINE-UP	AS	·		
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)	U. EGGATION OF STATION		
	TTOMBET	01711011		(ii Biotain)			

ACABLE ONE, INC. diba SPARKLIGHT  REMARY TRANSMITTERS: TELEVISION  In General: In space C, identify every television station (including translator stations and low power television stations) amend by your cable system during the accounting period, except (1) stations carried only on a partitime basis under Code (1) and (1) a	FORM SA3E. PAGE 3.  LEGAL NAME OF OWN			_		SYS	STEM ID#	Name
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 rCC. Unles and regulations in effect on June 24, 1981, permitting the carriage of certain network programs Jescilons (6.59(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, and also in space (- Hi the station was carried both on a substitute basis. List the station here, and also in space (- Hi the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-assat stream as "WETA-2" is multicast 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 stream that is understant to the station. Column 4: If the station is custometrical educationally, or "E-M" (for necommercial educational), or "E-M" (for necommercial educational), or "E-M" (for noncommercial educational). Or the example were substituted to the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes" in Or, enter "No". For an exaliant station of possible the local service area, see page (v) of th	CABLE ONE, IN	IC. d/b/a SP	ARKLIGHT	-			25206	
CC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  To 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.  For further information concerning substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify seach multicast stream associated with a station according to its over-the-air designation. For example, report multi-asst streams "WETA-2". Simulcast streams must be reported in column 1 (list each strating over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 2: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I"."  For time meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered "Yes" in column 4, you must complete								
Primary Ended (A) 7.6.61(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, and also in space — but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as succiated 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 tso community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). "For the meaning of these terms, see page (y) 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-biotantion o	carried by your cable s	ystem during th	ne accounting	period, except (	(1) stations carried	only on a part-time basis under		G
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-basis streams and swTETA-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 the community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educational), or "Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an exablanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station on a part-time basis be							1	Primary
Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify seach multicast stream associated with a station according to its over-the-air designation. For example, report multi-asat 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 the scommunity of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an exalanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not su	Substitute Basis S	Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program						
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-last 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 some community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For othe 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 exalianation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the saiss on which your sable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system arried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a	Do not list the station	here in space	G—but do list		e Special Stateme	nt and Program Log)—if the		
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which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your stable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community with which the station is licensed by the incertion of the categories, see page (v) of the general instructions located in the paper SA3 form.  Channel Line-up AT  1. CALL  2. B'CAST  3. TYPE  4. DISTANT?  5. BASIS OF  6. LOCATION OF STATION				-				
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Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the effect. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.  In call 1. Call 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE								
sable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation of the payment. For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the ercc. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.  Mote: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.  CHANNEL LINE-UP  AT  1. CALL  2. B'CAST  3. TYPE  4. DISTANT?  (Yes or No)  CARRIAGE  6. LOCATION OF STATION  CARRIAGE	lanation of local service	ce area, see pa	ge (v) of the	general instructi	ons located in the	paper SA3 form.		
For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.  Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.  CHANNEL LINE-UP  AT  1. CALL  2. B'CAST  3. TYPE  4. DISTANT?  5. BASIS OF  6. LOCATION OF STATION  CARRIAGE	•			•	•	•		
of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.  Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.  CHANNEL LINE-UP  AT  1. CALL  2. B'CAST  3. TYPE  4. DISTANT?  5. BASIS OF  6. LOCATION OF STATION  CARRIAGE	arried the distant stati							
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explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.  Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.  CHANNEL LINE-UP  AT  1. CALL  2. B'CAST  3. TYPE  4. DISTANT?  5. BASIS OF  6. LOCATION OF STATION  CHANNEL  (Yes or No)  CARRIAGE	he cable system and a	primary transr	mitter or an as	ssociation repres	senting the primar	y transmitter, enter the designa-	,	
Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.  Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.  CHANNEL LINE-UP  AT  1. CALL  2. B'CAST  3. TYPE  4. DISTANT?  5. BASIS OF  6. LOCATION OF STATION  CHANNEL  (Yes or No)  CARRIAGE				•	•			
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1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION (Yes or No) CARRIAGE	vote. II you are utilizing	y multiple chan		•		лаппетше-ир.		
SIGN CHANNEL OF (Yes or No) CARRIAGE	4.041	O DICACT		1		C LOCATION OF STATION		
		_				6. LOCATION OF STATION		
	S.G.N		_	(100 0.110)				
					, , ,			
					<b>†</b>			

FORM SA3E. PAGE 3.						ING FERIOD. 2022	
CABLE ONE, IN			<u>-</u>		SYSTEM ID# 25206	Name	
PRIMARY TRANSMITTE							
carried by your cable s	ystem during th	ne accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G	
•				•	iin network programs [sections nd (2) certain stations carried on a	Primary	
substitute program bas	stitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program						
basis under specifc FC				carried by your ca	able system on a substitute program	Television	
<ul> <li>Do not list the station</li> </ul>	here in space	G—but do list		e Special Stateme	ent and Program Log)—if the		
basis. For further in	and also in spa formation conc	ce I, if the sta			ute basis and also on some other the general instructions located		
in the paper SA3 for Column 1: List each		sian. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify		
each multicast stream	associated with	n a station acc	cording to its over	er-the-air designat	ion. For example, report multi-		
cast stream as "WETA NETA-simulcast).	-2". Simulcast :	streams must	be reported in o	column 1 (list each	stream separately; for example		
Column 2: Give the					on for broadcasting over-the-air in		
ts community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This r	may be different from the channel		
Column 3: Indicate	in each case v	vhether the st			pendent station, or a noncommercial		
					ast), "I" (for independent), "I-M" mmercial educational multicast).		
For the meaning of the							
column 4: If the sta				,.	s". If not, enter "No". For an ex- paper SA3 form.		
•			•	•	stating the basis on which your		
•	e system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system ied the distant station on a part-time basis because of lack of activated channel capacity.						
	For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject						
•	written agreement entered into on or before June 30, 2009, between a cable system or an association representing cable system and a primary transmitter or an association representing the primary transmitter, enter the designa-						
tion "E" (exempt). For s	E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further						
					d in the paper SA3 form. to which the station is licensed by the		
FCC. For Mexican or C <b>Note:</b> If you are utilizin				•	which the station is identifed.		
Note. If you are utilizing	y multiple chan	• •	EL LINE-UP		лаппе ше-ир.		
4.0011	a D'CACT				C LOCATION OF STATION		
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION	(**************************************	(If Distant)			
				<b>†</b>			
				<b>†</b>			
	<b></b>				1		

CABLE ONE	SWITER OF GABLE OF	STEM:			SYSTEM ID#	Name	
	, INC. d/b/a SP	ARKLIGHT			25206	Name	
PRIMARY TRANSMI	ITTERS: TELEVISIO	)N					
carried by your cab	le system during the	ne accounting	period, except	(1) stations carried	and low power television stations) I only on a part-time basis under	G	
					in network programs [sections nd (2) certain stations carried on a	Primary	
Substitute Bas	bstitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program						
		G—but do list		e Special Stateme	nt and Program Log)—if the		
<ul> <li>List the station he</li> </ul>	ere, and also in spa er information cond	ice I, if the sta			ute basis and also on some other the general instructions located		
		sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify		
			•	•	ion. For example, report multi- stream separately; for example		
WETA-simulcast).			·	,	on for broadcasting over-the-air in		
					may be different from the channel		
on which your cable			ation is a netwo	rk station an inde	pendent station, or a noncommercial		
					ist), "I" (for independent), "I-M"		
(for independent m For the meaning of	,. ,		, .	,	mmercial educational multicast).		
					s". If not, enter "No". For an ex-		
planation of local s					paper SA3 form. tating the basis on which your		
· · · · · · · · · · · · · · · · · · ·			-	•	ering "LAC" if your cable system		
carried the distant	•						
	For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject written agreement entered into on or before June 30, 2009, between a cable system or an association representing						
the cable system a				tween a cable sys	tem or an association representing		
		mitter or an as	ssociation repre	senting the primar	y transmitter, enter the designa-		
	For simulcasts, also	mitter or an as o enter "E". If	ssociation repre you carried the	senting the primar channel on any otl	y transmitter, enter the designa- ner basis, enter "O." For a further		
explanation of thes Column 6: Give	For simulcasts, also e three categories e the location of ea	mitter or an as o enter "E". If , see page (v) ch station. Fo	ssociation repre- you carried the o of the general in U.S. stations,	senting the primar channel on any otl nstructions located list the community	y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the		
explanation of thes <b>Column 6:</b> Give  FCC. For Mexican	For simulcasts, also e three categories e the location of ea or Canadian statio	mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give	ssociation repre- you carried the of the general in tr U.S. stations, le the name of the	senting the primar channel on any oth nstructions located list the community le community with	y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
explanation of thes <b>Column 6:</b> Give  FCC. For Mexican	For simulcasts, also e three categories e the location of ea or Canadian statio	mitter or an as o enter "E". If , see page (v) ch station. Fo ns, if any, give nnel line-ups,	ssociation repre- you carried the of the general in tr U.S. stations, le the name of the	senting the primar channel on any oth nstructions located list the community the community with space G for each of	y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.		
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FORM SA3E. PAGE 3.						ACCOUNTIN	NG PERIOD: 2022
LEGAL NAME OF OWN					SY	STEM ID#	Name
CABLE ONE, IN						25206	
PRIMARY TRANSMITTE							
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here; basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	ystem during the ons in effect on .61(e)(2) and (4 sis, as explained tations: With records only on a substand also in spate formation concurred.  h station's call associated with .2". Simulcast sechannel number. For example	ne accounting June 24, 198 I), or 76.63 (red in the next pespect to any tions, or authors G—but do list itute basis. ce I, if the sta erning substite sign. Do not red a station account er the FCC he by WRC is Cha	period, except (81, permitting the eferring to 76.61 paragraph. distant stations prizations:  It in space I (the tion was carried ute basis station eport origination cording to its owe be reported in cas assigned to t	(1) stations carried e carriage of certa (e)(2) and (4))]; and (e)(2) and (f)(e); and (f)(e)(2) and (f)(e)(2) and (f)(e)(2) and (f)(e)(e)(e)(e)(e)(e)(e)(e)(e)(e)(e)(e)(e)	and low power television stations only on a part-time basis under in network programs [sections and (2) certain stations carried on able system on a substitute programt and Program Log)—if the ate basis and also on some other the general instructions located such as HBO, ESPN, etc. Idention. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel	a am fy	G Primary Transmitters: Television
educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried the carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	entering the letast), "E" (for no see terms, see pation is outside ce area, see paure entered "Ye ne distant static ion on a part-tirion of a distant entered into or a primary transr simulcasts, also ree categories, e location of eaccanadian station	tter "N" (for ne concommercial page (v) of the the local servinge (v) of the ges" in column in during the ame basis becamulticast stee or before Jumitter or an aspect of the column term of the column ter	etwork), "N-M" (f educational), on e general instruc- rice area, (i.e. "d general instructi 4, you must con accounting perio- use of lack of a eam that is not s an 30, 2009, bei possociation repres you carried the of of the general in r U.S. stations, I e the name of th	or network multicar "E-M" (for noncortions located in the distant"), enter "Yerons located in the nplete column 5, sod. Indicate by entectivated channel couplect to a royalty tween a cable systemating the primary channel on any other networks the community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subjectem or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. to which the station is licensed by which the station is identifed.	ct ng	
· · · · · · · · · · · · · · · · · · ·		CHANN	EL LINE-UP	AW			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION		(If Distant)			
				***************************************			
				<b>†</b>			

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 4.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC. d/b/a SPARKLIGHT

SYSTEM ID#

25206

# Н

#### PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.

Primary Transmitters: Radio 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
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FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2022/2
LEGAL NAME OF OWNER OF (CABLE ONE, INC. d/b/a					S	SYSTEM ID# 25206	Name
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	IT AND PROGRAM LOG	i			
In General: In space I, identi substitute basis during the ac explanation of the programmi  1. SPECIAL STATEMENT  • During the accounting peri	counting pering that mus	riod, under spec t be included in NING SUBST	cific present and former FCC this log, see page (v) of the ITUTE CARRIAGE	C rules, regula general instru	itions, or authorizations. Fuctions located in the pape	or a further er SA3 form.	Substitute Carriage: Special
broadcast by a distant stat  Note: If your answer is "No" log in block 2.	ion?			-	☐ Yes	X No	Statement and Program Log
period, was broadcast by a under certain FCC rules, reg SA3 form for futher informat titles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broat the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please a of every nor distant stati gulations, or tion. Do nor ucy" or "NB n was broad sign of the s dcast statio adian statio th and day "e "5/7." se when the Example: a er "R" if the nd regulatic ogramming	m on a separa attach additional network televion and that your authorizations to use general cast live, enter tation broadcan's location (thins, if any, the cowhen your syst substitute program carried listed program ons in effect du	al pages. sion program (substitute pur cable system substitute pur cable system substituteds. See page (vi) of the generategories like "movies", or 76ers vs. Bulls."  "Yes." Otherwise enter "N sting the substitute programe community to which the sommunity with which the sem carried the substitute purposed by a system from 6:01:10 was substituted for programing the accounting period.	rogram) that, a for the progeral instruction "basketball".  o." m. station is licentation is identation is identation is identation. Use table system. 5 p.m. to 6:2 mming that year enter the let	during the accounting ramming of another stations located in the paper List specific program nsed by the FCC or, in tified). numerals, with the month List the times accurately 8:30 p.m. should be our system was required ter "P" if the listed pro	th /	
,		TE DDOODAN			EN SUBSTITUTE	7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	IAGE OCCURRED  6. TIMES  FROM — TO	FOR DELETION	
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ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 25206 CABLE ONE. INC. d/b/a SPARKLIGHT

# J

### Part-Time Carriage Log

### **PART-TIME CARRIAGE LOG**

**CALL SIGN** 

In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.

Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.

Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.

- · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."
- · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app."
- You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m."

#### WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED CALL SIGN HOURS

DATES AND HOURS OF PART-TIME CARRIAGE

HOURS

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DATE		TO		DATE	FROM		TO
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LEG	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
CA	BLE ONE, INC. d/b/a SPARKLIGHT		25206	
Inst all a (as	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount y mounts (gross receipts) paid to your cable system by subscribers for the system's secon identified in space E) during the accounting period. For a further explanation of how to col e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	dary transmission se	ervice	<b>K</b> Gross Receipts
IMF	during the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 1,	,590,068.95 receipts)	
• Cor • Cor • If your fee • If your	TRIGHT ROYALTY FEE  ctions: Use the blocks in this space L to determine the royalty fee you owe:  nplete block 1, showing your minimum fee.  nplete block 2, showing whether your system carried any distant television stations.  bur system did not carry any distant television stations, leave block 3 blank. Enter the ame  from block 1 on line 1 of block 4, and calculate the total royalty fee.  bur system did carry any distant television stations, you must complete the applicable par  companying this form and attach the schedule to your statement of account.		ule	L Copyright Royalty Fee
	art 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		
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be er elow.	ntered on line 2 in blo	ck	
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be entered on line		
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K	is 1.064 percent of th		
	Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.			
	This is your minimum fee.	\$	16,918.33	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.  No—Leave block 3 below blank and control to the property of the prop	n 4, you must check		
Block 3	Line 1. <b>BASE RATE FEE</b> : 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	<u>\$</u>	6,982.07	
	Line 2. <b>3.75 Fee:</b> 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	\$	6,982.07	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$	16,918.33	Cable systems
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> 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 deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)		0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$	17,643.33	appropriate form for submitting the
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form for more information.)	ee page (i) of the		additional fees.

ACCOUNTING PERIOD: 2022/2
FORM SA3F\_PAGE 8

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 25206
	CABLE ONE, INC. d/b/a SPARKLIGHT	23200
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
	1. Enter the total number of channels on which the cable system carried television broadcast stations	
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name JENAE HECK Telephone 602-364-6092	<b></b>
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)	
	PHOENIX, AZ 85012 (City, town, state, zip)	
	Email JENAE.HECK@CABLEONE.BIZ Fax (optional) 602-364-6013	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.	∍m
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ Quynh Tran	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.  (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press th button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	e "F2"
	Typed or printed name: QUYNH TRAN	
	Title: VICE PRESIDENT & TREASURER  (Title of official position held in corporation or partnership)	
	Date: February 23, 2023	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CABLE ONE, INC. d/b/a SPARKLIGHT	25206	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 additional lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the service of providing secondary transmissions of primary broadcast transmitters, the system shall not scribers and amounts collected from subscribers receiving secondary transmissions pursuant to secondary transmissions.	he basic include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form.	ns in the	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary train made by satellite carriers to satellite dish owners?	nsmissions	Excidence
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Name		
Mailing Address  Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or uncomplete this worksheet for those royalty payments submitted as a result of a late payment or uncomplete this worksheet for those royalty payments submitted as a result of a late payment or uncomplete this worksheet for those royalty payments submitted as a result of a late payment or uncomplete this worksheet for those royalty payments submitted as a result of a late payment or uncomplete.		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
xx		
Line 2 Multiply line 1 by the interest rate* and enter the sum here	<u> </u>	
x	days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-	
	0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	-	
	rest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assist contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ance 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 Copyright O please list below the owner, address, first community served, accounting period, and ID number as given in filing.		
Owner Address		
First community served		
Accounting period		
ID number		

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

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE. PAGE 10.

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs.	

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

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

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

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

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

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

#### **TOTAL OF DSEs**

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

### THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

 1.064% of gross receipts
 Each of the second, third, and fourth DSEs
 0.701% of gross receipts

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

0.330% of gross receipts

· If any of the stations were partially distant:

The fifth and each additional DSE

- 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 question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

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

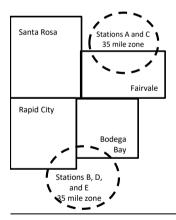
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

### **EXAMPLE**:

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

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



Distant Stations Carr	ied	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600.000.00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

	First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
(Santa Rosa)		(Rapid City and Bodega Bay) (		(Fairvale)			
	0	<b>#040 000 00</b>	0	<b>#470 000 00</b>	0	<b>#</b> 400 000 00	
	Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00	
	DSEs	2.472	DSEs	1.083	DSEs	1.389	
	Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	
	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80	
	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23	
	Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	

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

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

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
1	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>*</sup>	Γ			25206				
	SUM OF DSEs OF CATEGOR	Y "O" STATION	IS:							
	<ul> <li>Add the DSEs of each station.</li> </ul>	dd the DSEs of each station. ter the sum here and in line 1 of part 5 of this schedule.								
	Enter the sum here and in line	of part 5 of this	schedule.		0.25					
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5									
	of space G (page 3).	igii . list tile call	i signs of all distant stations i	dentified by the	e letter O III columni 3					
Computation	In the column headed "DSE":			as "1.0"; for e	ach network or noncom-					
Category "O"	O" CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Stations	KSDK	0.250	CALL GIGIT	DOL	OALL SIGN	DOL				
	KSDK	0.250								
Add rows as						<u> </u>				
necessary.						 				
Remember to copy all										
formula into new										
rows.										
						Ī				

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
I I	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>1</sup>	Γ			25206				
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station.									
	Enter the sum here and in line	of part 5 of this	schedule.	ļ	0.25					
	Instructions:									
2	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-									
Computation of DSEs for	mercial educational station, give	tor each indepe	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-					
Category "O"	mercial educational station, give	e the DOL as .2	CATEGORY "O" STATION	S: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122		07.122 0.0.1					
Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
I I	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>1</sup>	Γ			25206				
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station.									
	Enter the sum here and in line	of part 5 of this	schedule.	ļ	0.25					
	Instructions:									
2	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-									
Computation of DSEs for	mercial educational station, give	tor each indepe	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-					
Category "O"	mercial educational station, give	e the DOL as .2	CATEGORY "O" STATION	S: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122		07.122 0.0.1					
Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
I I	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>1</sup>	Γ			25206				
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station.									
	Enter the sum here and in line	of part 5 of this	schedule.	ļ	0.25					
	Instructions:									
2	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-									
Computation of DSEs for	mercial educational station, give	tor each indepe	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-					
Category "O"	mercial educational station, give	e the DOL as .2	CATEGORY "O" STATION	S: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122		07.122 0.0.1					
Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
I I	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>1</sup>	Γ			25206				
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station.									
	Enter the sum here and in line	of part 5 of this	schedule.	ļ	0.25					
	Instructions:									
2	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-									
Computation of DSEs for	mercial educational station, give	tor each indepe	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-					
Category "O"	mercial educational station, give	e the DOL as .2	CATEGORY "O" STATION	S: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122		07.122 0.0.1					
Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
1	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>*</sup>	Γ			25206				
	SUM OF DSEs OF CATEGOR	Y "O" STATION	IS:							
	<ul> <li>Add the DSEs of each station.</li> </ul>	dd the DSEs of each station. ter the sum here and in line 1 of part 5 of this schedule.								
	Enter the sum here and in line	of part 5 of this	schedule.		0.25					
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5									
	of space G (page 3).	igii . list tile call	i signs of all distant stations i	dentified by the	e letter O III columni 3					
Computation	In the column headed "DSE":			as "1.0"; for e	ach network or noncom-					
Category "O"	O" CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Stations	KSDK	0.250	CALL GIGIT	DOL	OALL SIGN	DOL				
	KSDK	0.250								
Add rows as						<u> </u>				
necessary.						 				
Remember to copy all										
formula into new										
rows.										
						Ī				

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
I I	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>1</sup>	Γ			25206				
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station.									
	Enter the sum here and in line	of part 5 of this	schedule.	ļ	0.25					
	Instructions:									
2	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-									
Computation of DSEs for	mercial educational station, give	tor each indepe	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-					
Category "O"	mercial educational station, give	e the DOL as .2	CATEGORY "O" STATION	S: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122		07.122 0.0.1					
Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										

DSE SCHEDULE. PAGE	11. (CONTINUED)									
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#				
I I	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>1</sup>	Γ			25206				
	SUM OF DSEs OF CATEGORY "O" STATIONS:									
	Add the DSEs of each station.									
	Enter the sum here and in line	of part 5 of this	schedule.	ļ	0.25					
	Instructions:									
2	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-									
Computation of DSEs for	mercial educational station, give	tor each indepe	ndent station, give the DSE a	as "1.0"; for ea	ach network or noncom-					
Category "O"	mercial educational station, give	e the DOL as .2	CATEGORY "O" STATION	S: DSFs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KETC	0.250	0.122		07.122 0.0.1					
Add rows as										
necessary.										
Remember to copy all										
formula into new										
rows.										

DSE SCHEDULE. PAGE 11. (CONTINUED)

DSE SCHEDULE. PAGE	LEGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM										
1 1	CABLE ONE, INC. d/b/a		г		J	25206					
	·					23200					
	SUM OF DSEs OF CATEGOR  • Add the DSEs of each station.		is:								
	Enter the sum here and in line		schedule.		0.00						
						<u> </u>					
2	Instructions: In the column headed "Call S	ian": list the call	Loigno of all distant stations i	dentified by the	lottor "O" in column 5						
	of space G (page 3).	igii . list tile call	i signs of all distant stations i	dentified by the	eletter O in column 5						
Computation	In the column headed "DSE":	for each indepe	endent station, give the DSE	as "1.0"; for ea	ch network or noncom-						
of DSEs for	mercial educational station, give	e the DSE as ".2									
Category "O"			CATEGORY "O" STATION	IS: DSEs	-						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as											
necessary.											
Remember to copy all											
formula into new											
rows.											
				<b></b>							
				<b>†</b>							
				<del> </del>							
				<del> </del>							
						<b></b>					
Í		<b> </b>				L					

DSE SCHEDULE. PAGE	11. (CONTINUED)					
1	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S	YSTEM ID#
I	CABLE ONE, INC. d/b/a	SPARKLIGH <sup>1</sup>	Γ			25206
	SUM OF DSEs OF CATEGOR	Y "O" STATION	IS:			
	<ul> <li>Add the DSEs of each station.</li> </ul>					
	Enter the sum here and in line 1	of part 5 of this	schedule.		6.75	
2	Instructions:	5 17 - 1: - 4 41 11		-1 1:E:1 l 1l-	- I-# "O" il 5	
_	In the column headed "Call S of space G (page 3).	ign": list the call	i signs of all distant stations i	dentified by the	e letter "O" in column 5	
Computation	In the column headed "DSE":	for each indepe	endent station, give the DSE	as "1.0"; for e	ach network or noncom-	
of DSEs for	mercial educational station, give	e the DSE as ".2	5."	•		
Category "O"			CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	KDNL	0.250				
	KDNL-DT2	1.000				
	KMOV	0.250				
	KETC	0.250				
	WRBU	1.000				
Add rows as	KDNL-DT3	1.000		<b></b>		
necessary.	KDNL-DT4	1.000				<b></b>
Remember to copy all	KMOV-DT2	1.000				
formula into new	<b>}</b>					
rows.	KMOV-DT3	1.000				
		***************************************				
				<b></b>		<b></b>
				•		

Name		L NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID#  BLE ONE, INC. d/b/a SPARKLIGHT  25206											
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-v	st the call sign of all distants: For each station, give the correspond with the information and the station, give the control of the station, give the station of the station at least to the third decines for each independent station.	ne number of hours y nation given in space ne total number of homn 2 by the figure in nal point. This is the 'station, give the "type num 4 by the figure i	our cable system of a J. Calculate only ours that the station column 3, and given basis of carriage versions as "1.0." For column 5, and given column 5, and given column 5, and given basis of carriage versions as "1.0." For column 5, and given basis of carriage versions and given basis of carriage versions are column 5, and given basis of carriage versions are column 5, and given basis of carriage versions are column 5, and given basis of carriage versions are column 5, and given basis of carriage versions are carriage ver	carried the station one DSE for each a broadcast over the the result in decivalue" for the station each network over the result in co	during the accounting per station. the air during the account cimals in column 4. This from the column 5 in column 6. Round to no less olumn 6. Round to no less	ing period. gure must onal station,						
Capacity			CATEGORY LAG	C STATIONS:	COMPUTATIO	ON OF DSEs							
	1. CALL SIGN	2. NUMBE OF HOI CARRIE SYSTE	ER 3. N JRS O ED BY S	UMBER F HOURS TATION N AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE	6. DS	iΕ					
			<u>+</u>			x x							
						x x							
			÷	=		x x	=						
						x							
			÷ ÷	=		x x	=						
	Add the DSEs	OF CATEGORY LAC Sof each station. Im here and in line 2 of page				0.00							
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations are space I).     Column 2: at your option.     Column 3: Column 4: I	e the call sign of each stall by your system in substituted on October 19, 1976 (and or more live, nonnetwoner or more live, nonnetwoner or each station give the This figure should correst Enter the number of days Divide the figure in column This is the station's DSE (	tution for a program to as shown by the lette ork programs during to number of live, nonn pond with the information the calendar year n 2 by the figure in contact.	that your system war "P" in column 7 chat optional carriage etwork programs cation in space I. 365, except in a lolumn 3, and give	as permitted to de if space I); and ie (as shown by the carried in substitut eap year. the result in colum	elete under FCC rules an e word "Yes" in column 2 o ion for programs that wer nn 4. Round to no less th	e deleted an the third						
		SI	JBSTITUTE-BAS	SIS STATIONS	S: COMPUTAT	TION OF DSEs							
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE					
			÷	=		÷		=					
			÷	=		÷		=					
			÷	=		÷		=					
			÷	=		÷		=					
	Add the DSEs	oF SUBSTITUTE-BASI of each station. Im here and in line 3 of pa				0.00							
<b>5</b> Total Number	number of DSEs	ER OF DSEs: Give the ams applicable to your system of DSEs from part 2 •		in parts 2, 3, and 4	of this schedule a	and add them to provide th	ne total <b>0.25</b>						
of DSEs		of DSEs from part 3 ●					0.00						
	3. Number	of DSEs from part 4 ●			<b>&gt;</b>		0.00						
	TOTAL NUMBE	R OF DSEs						0.25					

LEGAL NAME OF O							S	YSTEM ID# 25206	Name
Instructions: Block In block A:  • If your answer if 'schedule.	·		rt 6 and part 7	of the DSE schedu	ıle blank and	complete part 8	3, (page 16) of the		6
If your answer if '	'No," complete blo			TELEVISION MA	ARKETS				Computation of
	1981?	utside of all ma	ajor and smalle		ed under sect		C rules and regula	tions in	3.75 Fee
		BI O	CK B: CARR	IAGE OF PERM	MITTED DS	:Fs			
Column 1: CALL SIGN Column 2: BASIS OF PERMITTED CARRIAGE	FCC rules and reinstructions for the Satellite Television.  Enter the appropion (Note the FCC rule)  A Stations carried 76.61(b)(c)]  B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursual *F A station preinstruction	of distant stargulations prior to DSE Sched on Extension a riate letter indules and regulated pursuant to on as defined all educational distation (76.6 or DSE scheduant to individuziously carried JHF station wi	titions listed in part to June 25, 1 lule. (Note: The and Localism A icating the bas ations cited belothe FCC markin 76.5(kk) (76 l station [76.59 5) (see paragralle). al waiver of FCd on a part-time thin grade-B cotto to the cotto listed in grade-B cotto listed in grad	part 2, 3, and 4 of the 981. For further exit eletter M below refuct of 2010.) is on which you care ow pertain to those cet quota rules [76. 5.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subsector of 2010 consubstitute basis ontour, [76.59(d)(5)	ris schedule t planation of p ers to an exer rried a permitt e in effect on 5 57, 76.59(b), (1), 76.63(a) r B(a) referring t stitution of gra	hat your systemermitted station mpt multicast station. June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered station	ns, see the tream as set forth  63(a) referring to 61(e)(1)  tions in the	in the	
Column 3:		e stations iden	ntified by the let	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	1 of	
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KSDK	D	0.25							
						II		0.25	
		Е	BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from բ	part 5 of this s	schedule					
Line 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve					
Line 3: Subtract (If zero, l				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter sui	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line 3	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	ıd enter here	and on line 2	2, block 3, space	L (page 7)			0.00	

CABLE ONE, I							S	YSTEM ID# 25206	Name
Instructions: Bloc In block A: • If your answer if "schedule. • If your answer if "	'Yes," leave the rer	mainder of pa	•	of the DSE schedu	lle blank and o	complete part 8	3, (page 16) of the		6
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee
=	1981?	schedule—D	•	er markets as defin			C rules and regula	tions in	3.731 66
		BLO	CK B: CARR	IAGE OF PERI	/IITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations price e DSE Scheo	ations listed in por to June 25, 1	part 2, 3, and 4 of the 981. For further ex eletter M below ref	nis schedule the	hat your systen ermitted statior	ns, see the	,	
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.  (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]  B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)  C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]  D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 1981  G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]  M Retransmission of a distant multicast stream.									
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	l							0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE		<u> </u>	<u> </u>	
Line 1: Enter the	total number of								
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
Line 3: Subtract (If zero, le				of DSEs subject 7 of this schedule		ate.	,		
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

CABLE ONE, I							S	YSTEM ID# 25206	Name
Instructions: Bloc In block A: • If your answer if "schedule. • If your answer if "	'Yes," leave the rer	mainder of pa	•	of the DSE schedu	lle blank and o	complete part 8	3, (page 16) of the		6
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee
=	1981?	schedule—D	•	er markets as defin			C rules and regula	tions in	3.731 66
		BLO	CK B: CARR	IAGE OF PERI	/IITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations price e DSE Scheo	ations listed in por to June 25, 1	part 2, 3, and 4 of the 981. For further ex eletter M below ref	nis schedule the	hat your systen ermitted statior	ns, see the	,	
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.  (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]  B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)  C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]  D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 1981  G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]  M Retransmission of a distant multicast stream.									
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	l							0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE		<u> </u>	<u> </u>	
Line 1: Enter the	total number of								
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
Line 3: Subtract (If zero, le				of DSEs subject 7 of this schedule		ate.	,		
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF O							S	YSTEM ID# 25206	Name
Instructions: Block In block A: • If your answer if 'schedule.	'Yes," leave the re	mainder of pa	•	of the DSE schedu	ıle blank and	complete part 8	3, (page 16) of the		6
If your answer if '	'No," complete blo			ELEVISION MA	ARKETS				Computation of
_	1981?	utside of all ma	ajor and smalle		ed under sect		C rules and regula	tions in	3.75 Fee
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN Column 2: BASIS OF PERMITTED CARRIAGE	FCC rules and reinstructions for the Satellite Television.  Enter the appropion (Note the FCC rule)  A Stations carried 76.61(b)(c)]  B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursual *F A station preinstruction	of distant state of distant state expension and regulation arriate letter indules and regulated pursuant to as defined all educational station (76.6 or DSE schedulant to individuiviously carried of the station will be stat	tions listed in part to June 25, 1 lule. (Note: The and Localism A icating the bas ations cited belothe FCC markin 76.5(kk) (76 I station [76.59 5) (see paragralle). al waiver of FCd on a part-time thin grade-B cotto to the part to the station [76.59 the station grade-B cotto [76.59 the	part 2, 3, and 4 of the 1981. For further exit eletter M below refuct of 2010.) is on which you care ow pertain to those ket quota rules [76. 1.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subsector of the 1981 consubstitute basis ontour, [76.59(d)(5)	nis schedule t planation of p ers to an exer rried a permitt e in effect on 5 57, 76.59(b), (1), 76.63(a) r B(a) referring t stitution of gra	hat your syster ermitted station mpt multicast s ted station. June 24, 1981.; 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered stat	ns, see the tream as set forth  63(a) referring to 61(e)(1)  tions in the	in the	
Column 3:		e stations iden	ntified by the let	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	1 of	
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KETC	С	0.25							
						II		0.25	
		Е	BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from բ	oart 5 of this s	schedule					
Line 2: Enter the	sum of permitte	d DSEs from	n block B abov	ve					
Line 3: Subtract (If zero, l				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter sui	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line 3	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	ıd enter here	and on line 2	2, block 3, space	L (page 7)			0.00	

CABLE ONE, I							S	YSTEM ID# 25206	Name
Instructions: Bloc In block A: • If your answer if "schedule. • If your answer if "	'Yes," leave the rer	mainder of pa	•	of the DSE schedu	lle blank and o	complete part 8	3, (page 16) of the		6
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee
=	1981?	schedule—D	•	er markets as defin			C rules and regula	tions in	3.731 66
		BLO	CK B: CARR	IAGE OF PERI	/IITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations price e DSE Scheo	ations listed in por to June 25, 1	part 2, 3, and 4 of the 981. For further ex eletter M below ref	nis schedule the	hat your systen ermitted statior	ns, see the	,	
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.  (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]  B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)  C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]  D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 1981  G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]  M Retransmission of a distant multicast stream.									
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	l							0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE		<u> </u>	<u> </u>	
Line 1: Enter the	total number of								
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
Line 3: Subtract (If zero, le				of DSEs subject 7 of this schedule		ate.	,		
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF O							S	YSTEM ID# 25206	Name
Instructions: Block In block A:  • If your answer if 'schedule.	·		rt 6 and part 7	of the DSE schedu	ıle blank and	complete part 8	3, (page 16) of the		6
If your answer if '	'No," complete blo			TELEVISION MA	ARKETS				Computation of
	1981?	utside of all ma	ajor and smalle		ed under sect		C rules and regula	tions in	3.75 Fee
		BI O	CK B: CARR	IAGE OF PERM	MITTED DS	:Fs			
Column 1: CALL SIGN Column 2: BASIS OF PERMITTED CARRIAGE	FCC rules and reinstructions for the Satellite Television.  Enter the appropion (Note the FCC rule)  A Stations carried 76.61(b)(c)]  B Specialty static C Noncommeric D Grandfathered instructions for E Carried pursual *F A station preinstruction	of distant stargulations prior to DSE Sched on Extension a riate letter indules and regulated pursuant to on as defined all educational distation (76.6 or DSE scheduant to individuziously carried JHF station wi	titions listed in part to June 25, 1 lule. (Note: The and Localism A icating the bas ations cited belothe FCC markin 76.5(kk) (76 l station [76.59 5) (see paragralle). al waiver of FCd on a part-time thin grade-B cotto to the cotto listed in grade-B cotto listed in grad	part 2, 3, and 4 of the 981. For further exit eletter M below refuct of 2010.) is on which you care ow pertain to those cet quota rules [76. 5.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subsector of 2010 consubstitute basis ontour, [76.59(d)(5)	ris schedule t planation of p ers to an exer rried a permitt e in effect on 5 57, 76.59(b), (1), 76.63(a) r B(a) referring t stitution of gra	hat your systemermitted station mpt multicast station. June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered station	ns, see the tream as set forth  63(a) referring to 61(e)(1)  tions in the	in the	
Column 3:		e stations iden	ntified by the let	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	1 of	
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KSDK	D	0.25							
						II		0.25	
		Е	BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from բ	part 5 of this s	schedule					
Line 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve					
Line 3: Subtract (If zero, l				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter sui	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line 3	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	ıd enter here	and on line 2	2, block 3, space	L (page 7)			0.00	

CABLE ONE, I							S	YSTEM ID# 25206	Name
Instructions: Bloc In block A: • If your answer if "schedule. • If your answer if "	'Yes," leave the rer	mainder of pa	•	of the DSE schedu	lle blank and o	complete part 8	3, (page 16) of the		6
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee
=	1981?	schedule—D	•	er markets as defin			C rules and regula	tions in	3.731 66
		BLO	CK B: CARR	IAGE OF PERI	/IITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations price e DSE Scheo	ations listed in por to June 25, 1	part 2, 3, and 4 of the 981. For further ex eletter M below ref	nis schedule the	hat your systen ermitted statior	ns, see the	,	
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.  (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]  B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)  C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]  D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 1981  G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]  M Retransmission of a distant multicast stream.									
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	l							0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE		<u> </u>	<u> </u>	
Line 1: Enter the	total number of								
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
Line 3: Subtract (If zero, le				of DSEs subject 7 of this schedule		ate.	,		
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

CABLE ONE, I							S	YSTEM ID# 25206	Name
Instructions: Bloc In block A: • If your answer if "schedule. • If your answer if "	'Yes," leave the rer	mainder of pa	•	of the DSE schedu	lle blank and o	complete part 8	3, (page 16) of the		6
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee
=	1981?	schedule—D	•	er markets as defin			C rules and regula	tions in	3.731 66
		BLO	CK B: CARR	IAGE OF PERI	/IITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations price e DSE Scheo	ations listed in por to June 25, 1	part 2, 3, and 4 of the 981. For further ex eletter M below ref	nis schedule the	hat your systen ermitted statior	ns, see the	,	
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.  (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]  B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)  C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]  D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).  E Carried pursuant to individual waiver of FCC rules (76.7)  *F A station previously carried on a part-time or substitute basis prior to June 25, 1981  G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]  M Retransmission of a distant multicast stream.									
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	l							0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE		<u> </u>	<u> </u>	
Line 1: Enter the	total number of								
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
Line 3: Subtract (If zero, le				of DSEs subject 7 of this schedule		ate.	,		
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF O							S	YSTEM ID# 25206	Name
Instructions: Block In block A:  • If your answer if 'schedule.	·		ort 6 and part 7	of the DSE schedu	ıle blank and	complete part 8	3, (page 16) of the		6
If your answer if '	'No," complete blo	cks B and C b		TELEVISION MA	ADVETS				Computation of
	1981?	schedule—D0	ajor and smalle		ed under sect		C rules and regula	tions in	3.75 Fee
<u> </u>			014.5.04.55		######################################				
Column 1: CALL SIGN Column 2: BASIS OF PERMITTED CARRIAGE	FCC rules and reinstructions for the Satellite Television.  Enter the appropion (Note the FCC rule)  A Stations carrier 76.61(b)(c)]  B Specialty station C Noncommeric D Grandfathered instructions for E Carried pursual *F A station preinstruction	of distant stagulations price DSE Scheon Extension ariate letter indiles and reguled pursuant to as defined all educational station (76.6 or DSE scheduant to individuationsly carried THF station wiegulations price of the station wiegularity of the station wiegularity in the station wiegular	titions listed in part to June 25, 1 dule. (Note: The and Localism A icating the bas ations cited belothe FCC markin 76.5(kk) (76 I station [76.59 5) (see paragraule). al waiver of FCd on a part-time thin grade-B cotton (19.5) to the following the second of the following the follow	is on which you car ow pertain to those ket quota rules [76. .59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subs C rules (76.7) e or substitute basis ontour, [76.59(d)(5)	ris schedule t planation of p ers to an exer rried a permitt e in effect on 5 57, 76.59(b), (1), 76.63(a) r B(a) referring t stitution of gra	that your systen ermitted station mpt multicast sied station. Ilune 24, 1981.) 76.61(b)(c), 76 referring to 76.6 o 76.61(d)] and fathered station.	ns, see the tream as set forth  .63(a) referring to 61(e)(1)  tions in the	in the	
Column 3:		e stations ider	ntified by the let	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	‡ of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
<u></u>									
								0.00	
		E	BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the									
Line 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve					
Line 3: Subtract (If zero, l				of DSEs subject 7 of this schedule		ate. 			
Line 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

CABLE ONE, I							S	YSTEM ID# 25206	Name	
Instructions: Bloc In block A: • If your answer if "schedule. • If your answer if "	'Yes," leave the rer	mainder of pa	•	of the DSE schedu	lle blank and o	complete part 8	3, (page 16) of the		6	
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
=	1981?	schedule—D	•	er markets as defin			C rules and regula	tions in	3.731 66	
	BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1:  CALL SIGN  List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)										
Column 2: BASIS OF PERMITTED CARRIAGE	Satellite Television Extension and Localism Act of 2010.)  Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.  (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to									
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE		
								0.00		
		F	BLOCK C: CC	MPUTATION OF	3.75 FFF		•			
Line 1: Enter the	total number of						,			
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve						
Line 3: Subtract (If zero, le				of DSEs subject 7 of this schedule		ate.	,			
Line 4: Enter gro	ss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially	
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter su	m here				x		permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	s from line	3						carriage? If yes, see part 9 instructions.	
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00		

	OF OWNER OF CABLE						S'	YSTEM ID# 25206	Name
1. CALL	2. PERMITTED		A: TELEVI	SION MARKETS 2. PERMITTED	3. DSE	UED) 1. CALL	2. PERMITTED	3. DSE	6
SIGN	BASIS	0. 202	SIGN	BASIS	0. 502	SIGN	BASIS	0. 202	
									Computation of 3.75 Fee
					l				
					<u></u>				
					<u></u>				
		<b>-</b>							
					l				
		I	П			II .	1	<u> </u>	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. d/b/a SPARKLIGHT 25206 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. the DSE Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Schedule for Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B. column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 6. PERMITTED 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT SIGN DSE **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? No—Proceed to part 8 Yes—Complete blocks B and C . BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Was any station listed in block B of part 7 carried in any commu-Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 **TOTAL DSEs** TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC. d/b/a SPARKLIGHT	25206	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,590,068.95	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  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		
Section	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.		
4a	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		

Name		ne of owner of cable system:  CABLE ONE, INC. d/b/a SPARKLIGHT	25206
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	40	A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Exclusivity 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.	
		Syndicated Exclusivity Surcharge.	······································
8 Computation of Base Rate Fee	6 was of In blo In blo If you blank. What if were local	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.  ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  It answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  It answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	N
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did yo	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.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7) ▶\$	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes,"  use the total number of DSEs from part 5.).	
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , 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)	0.00
		Base Rate Fee	

DSE SCH	EDU	LE. PAGE 17.				ACCOUNTING	G PERIOD: 2022/2
		OF OWNER OF CABLE SYSTEM:  ONE, INC. d/b/a SPARKLIGHT				SYSTEM ID# 25206	Name
Section 4	If the	e figure in section 2 is <b>more than 4.000</b> , compute your base	rate fee here a	nd leave section 3 l	blank.		•
7	Α.	Enter 0.01064 of gross receipts					8
		(the amount in section 1)		▶\$			
	В.	Enter 0.00701 of gross receipts (the amount in section 1)					Computation of
	C.	Multiply line B by 3.000 and enter here					Base Rate Fee
	D.	Enter 0.00330 of gross receipts (the amount in section 1)	<b>▶</b> \$				
	E.	Subtract 4.000 from total DSEs (the figure in section 2) and enter here	<b></b>				
	F.	Multiply line D by line E and enter here			<u></u> ▶ <u></u> \$		
	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			<b>&gt;</b> \$	0.00	
	be r	IT: It is no longer necessary to report television signals reported on a community-by-community basis (subscri	•		•	•	9
receipts	s froi	If any of the stations you carried were partially distant m subscribers located within the station's local service		•	,		Computation of

First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.

NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.

### How to Identify a Subscriber Group for Partially Distant Stations

Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.

Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)

Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.

Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.

In each section:

- Identify the communities/areas represented by each subscriber group.
- · Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.
- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- · Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- · Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- · Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

**Base Rate Fee** and Syndicated **Exclusivity** Surcharge for **Partially** Distant Stations, and for Partially Permitted Stations

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 25206 CABLE ONE, INC. d/b/a SPARKLIGHT Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

	ABLE ONE, INC. d/b/a SPARKLIGHT  25206									
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP				
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	JP	•		
COMMUNITY/ AREA	CHRIST	ΓΙΑΝ, SHELBY, Μ	OULTRIE	COMMUNITY/ AREA	MONTG	OMERY CO WE	ST	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
KSDK	0.25			KETC	0.25			Base Rate Fee		
								and Syndicated Exclusivity		
								Surcharge for Partially Distant		
								Stations		
							0.05			
Total DSEs			0.25	Total DSEs			0.25			
Gross Receipts First G	roup	\$ 413	,566.36	Gross Receipts Secon	d Group	\$	132,055.71			
Base Rate Fee First G		<u> </u>	,100.09	Base Rate Fee Secon		\$	351.27			
		SUBSCRIBER GROU	IP			SUBSCRIBER GRO				
COMMUNITY/ AREA	FAYET	TE CO.		COMMUNITY/ AREA	MONTG	OMERY CO N,C	C & MACOU			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
KETC	0.25			KETC	0.25					
	<mark></mark>									
	<del></del>		<u></u>		<u> </u>					
			<u>.</u>							
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	<del></del>		<del>-</del>		<del></del>					
Total DSEs	1		0.25	Total DSEs			0.25			
Gross Receipts Third G	Group	\$ 346	,042.78	Gross Receipts Fourth	Group	\$	194,637.97			
Base Rate Fee Third Group \$ 920.47		Base Rate Fee Fourth Group \$ 517.74								
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes at	oove.	\$	6,982.07			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC. d/b/a SPARKLIGHT  25206										
				ATE FEES FOR EAC						
OMMUNITY/ AREA		SUBSCRIBER GRO	UP	COMMUNITY/ AREA		SUBSCRIBER GRO	UP	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computati of		
ETC	0.25	OALL GIGIN	DOL	KSDK	0.25	OALL GIGIN	DOL	Base Rate		
								and		
								Syndicate		
								Exclusivi		
								Surcharg		
								for		
			<u></u>					Partially Distant		
	····		····					Stations		
	····		<u></u>	-						
otal DSEs			0.25	Total DSEs			0.25			
ross Receipts First C	Group	\$ 166	6,087.29	Gross Receipts Sec	ond Group	\$	181,820.23			
ase Rate Fee First 0	Group	\$	441.79	Base Rate Fee Sec	ond Group	\$	483.64			
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GRO	UP			
OMMUNITY/ AREA	BOND (	20.		COMMUNITY/ ARE	A GREENE	CO.				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
ETC	0.25			KETC	0.25					
		-								
				-						
			0.25				0.25			
otal DSEs			0.25	Total DSEs			0.25			
otal DSEs	Group	\$ 16	0.25	Total DSEs Gross Receipts Fou	rth Group	\$	0.25 54,643.77			

	EGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC. d/b/a SPARKLIGHT  25206										
B		SUBSCRIBER GRO		ATE FEES FOR EAU	TENTH	SUBSCRIBER GRO	UP	9			
OCIVIII I 7 7 II LE 7 C	0=::0=							Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
				KDNL	0.25			Base Rate Fe			
				KDNL-DT2	1.00			and			
				KMOV	0.25 0.25			Syndicated			
			<u></u>	WRBU	1.00			Exclusivity Surcharge			
			<u>-</u>	KDNL-DT3	1.00			for			
				KDNL-DT4	1.00			Partially			
				KMOV-DT2	1.00			Distant			
				KMOV-DT3	1.00			Stations			
			<u></u>								
			<del>.</del>								
Total DSEs			0.00	Total DSEs	1	·	6.75				
Gross Receipts First Gr	oup	<u>\$ 11</u>	,298.72	Gross Receipts Sec	ond Group	\$	73,061.44				
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	2,976.89				
E	LEVENTH	SUBSCRIBER GRO	JP		TWELVTH	SUBSCRIBER GRO	UP				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	<u></u>		<del></del>			H					
		-									
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00				
<b>Base Rate Fee</b> Third G	roup	\$	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	above.	\$					

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC. d/b/a SPARKLIGHT  25206								
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		Ti .		I SUBSCRIBER GROU	JP	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.22 0.0.1	202	5,122 5.511	202	37.122.5.5.1	202	37.22 3.3.1	332	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
				-				for
								Partially
								Distant
			<u></u>					Stations
			····					
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	FIFTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			···		·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	<u>\$</u>	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in block			riber group	as shown in the boxes a	above.	\$		
						L		

		IBER GROUP	SUBSCRI	TE LES FOR EACH	F BASE RA	COMPUTATION O	LOCK A: (	В	
	JP	SUBSCRIBER GROU				SUBSCRIBER GRO			
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
Computa	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate	DOL	CALL GIGIT	DOL	OALE GIGIT	DOL	OALL GIOIN	DOL	CALL GIOIN	
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Syndica									
Exclusiv									
Surchar			<mark></mark>			-			
Partiall							·		
Distan			<u>"</u>		••••••••••				
Station									
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	0.00			Total DSEs	0.00			otal DSEs	
	0.00					Total DSEs 0.00			
		\$	d Group		0.00	\$	oun	iross Receipts First Gr	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr	
	0.00			Gross Receipts Secon		\$			
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	dase Rate Fee First Gro	
	0.00 0.00		d Group	Gross Receipts Secon  Base Rate Fee Secon	<b>0.00</b>	\$ SUBSCRIBER GROUNDS	oup	iase Rate Fee First Gro	
-	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	NIN	
=	0.00 0.00	\$ SUBSCRIBER GROU	d Group WENTIETH	Gross Receipts Secon  Base Rate Fee Secon  T  COMMUNITY/ AREA	0.00 UP	SUBSCRIBER GRO	oup NTEENTH	ase Rate Fee First Gro NIN OMMUNITY/ AREA	
-	0.00 0.00	\$	d Group	Gross Receipts Secon  Base Rate Fee Secon	<b>0.00</b>	\$	oup	ase Rate Fee First Gro NIN OMMUNITY/ AREA	
-	0.00 0.00	\$ SUBSCRIBER GROU	d Group WENTIETH	Gross Receipts Secon  Base Rate Fee Secon  T  COMMUNITY/ AREA	0.00 UP	SUBSCRIBER GRO	oup NTEENTH	iase Rate Fee First Gro NIN COMMUNITY/ AREA	
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group WENTIETH	Gross Receipts Secon  Base Rate Fee Secon  T  COMMUNITY/ AREA	0.00 UP	SUBSCRIBER GRO	oup NTEENTH	iase Rate Fee First Gro NIN COMMUNITY/ AREA	
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group WENTIETH	Gross Receipts Secon  Base Rate Fee Secon  T  COMMUNITY/ AREA	0.00 UP	SUBSCRIBER GRO	oup NTEENTH	Base Rate Fee First Gro NIN COMMUNITY/ AREA	
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group WENTIETH	Gross Receipts Secon  Base Rate Fee Secon  T  COMMUNITY/ AREA	0.00 UP	SUBSCRIBER GRO	oup NTEENTH	NIN COMMUNITY/ AREA  CALL SIGN	
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	d Group  WENTIETH  DSE	Gross Receipts Secon  Base Rate Fee Secon  T COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  UP	SUBSCRIBER GROUND CALL SIGN	DSE	NIN COMMUNITY/ AREA	
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	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	d Group  WENTIETH  DSE  Group	Gross Receipts Secon  Base Rate Fee Secon  T COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  UP	SUBSCRIBER GROUND CALL SIGN	DSE	COMMUNITY/ AREA	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CABLE ONE, INC. d/b/a SPARKLIGHT  25206								
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	NTY-FIRST	SUBSCRIBER GROU		11	Y-SECOND	SUBSCRIBER GROU	Р	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.0.0.1		07.122.01.01.1		5.122 515.1	202	07.22 0.0.1	332	Base Rate Fee
								and
					<mark></mark>			Syndicated
		-				<del>                                     </del>		Exclusivity Surcharge
		<del> </del>			<del></del>			for
								Partially
			<u> </u>					Distant
	<u></u>				<mark></mark>			Stations
	<del></del>				<del></del>			
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWEN	ITY-THIRD	SUBSCRIBER GROU	JP	TWENT	Y-FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
		+			<del></del>	<del>                                     </del>		
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
			iber group	as shown in the boxes a	bove.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
TH SUBSCRIBER GROUP TWENTY-SIXTH SUBSCRIBER GROUP	1 _
0 COMMUNITY/ AREA 0	9
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	Computa of
	Base Rate
	and
	Syndica
	Exclusiv
	Surchar
	for
	Partial Distan
	Station
	-
0.00	
\$ 0.00 Gross Receipts Second Group \$ 0.00	
\$ 0.00   Gross Receipts Second Group \$ 0.00	
\$ 0.00 Gross Receipts Second Group \$ 0.00  \$ 0.00 Base Rate Fee Second Group \$ 0.00	
\$ 0.00 Base Rate Fee Second Group \$ 0.00	=
\$ 0.00 Base Rate Fee Second Group \$ 0.00  TH SUBSCRIBER GROUP TWENTY-EIGHTH SUBSCRIBER GROUP	= -
\$ 0.00 Base Rate Fee Second Group \$ 0.00	=
\$ 0.00 Base Rate Fee Second Group \$ 0.00  TH SUBSCRIBER GROUP  TWENTY-EIGHTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0	- - -
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Base Rate Fee Second Group  TH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE	
\$ 0.00 Base Rate Fee Second Group \$ 0.00  TH SUBSCRIBER GROUP  TWENTY-EIGHTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0	
Base Rate Fee Second Group  TH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE	
S 0.00  Base Rate Fee Second Group  TH SUBSCRIBER GROUP  O COMMUNITY/ AREA  O CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  O COMMUNITY/ AREA  O	
S 0.00  Base Rate Fee Second Group  TH SUBSCRIBER GROUP  O COMMUNITY/ AREA  O CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  O COMMUNITY/ AREA  O	

BI OCK A: C	COMPUTATION OF	BASF R	ATE FEES FOR EAC	H SUBSCR	RIBER GROUP	
	SUBSCRIBER GROU				SUBSCRIBER GROU	JP
IMUNITY/ AREA		0	COMMUNITY/ AREA			0
		T = -=		T = -=	II	
LL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
				••••		
		<b>-</b>				
			-			
DSEs _		0.00	Total DSEs			0.00
s Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
Γ						
Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
THIRTY-FIRST S	\$ GUBSCRIBER GROU	JP	THIR	TY-SECOND	SUBSCRIBER GROU	JP
· •	\$ SUBSCRIBER GROU			TY-SECOND	<u> </u>	•
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S	SUBSCRIBER GROU	JP	THIR	TY-SECOND	<u> </u>	JP
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S IMUNITY/ AREA  LL SIGN DSE		DSE	THIR COMMUNITY/ AREA  CALL SIGN	TY-SECONE	) SUBSCRIBER GROU	JP 0 DSE
THIRTY-FIRST S		JP 0	THIR COMMUNITY/ AREA	TY-SECONE	) SUBSCRIBER GROU	JP <b>0</b>
THIRTY-FIRST S IMUNITY/ AREA  LL SIGN DSE  DSE  DSE  DSEs		DSE	THIR COMMUNITY/ AREA  CALL SIGN	DSE	) SUBSCRIBER GROU	JP 0 DSE
THIRTY-FIRST S IMUNITY/ AREA  LL SIGN DSE  DSE  DSE  DSEs	CALL SIGN	DSE DSE	THIR' COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE DSE D.00
THIRTY-FIRST S IMUNITY/ AREA  LL SIGN DSE  DSE  DSE  DSEs	CALL SIGN	DSE DSE	THIR' COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE	CALL SIGN	DSE DSE D.00

EACH SUBSCRIBER GROUP THIRTY-FOURTH SUBSCRIBER GROUP REA  0		TE FEES FOR EACH	BASE RA	COMPLITATION OF		
		III.				
	Y-FOURTE	THIRT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	K (Y-THIRD	THIF COMMUNITY/ AREA
Computatio						
DSE CALL SIGN DSE of Base Rate F-	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and	····					
Syndicated						
Exclusivity						
Surcharge for	····					
Partially						
Distant						
Stations	····					
	····					
0.00		Total DSEs	0.00			otal DSEs
Second Group \$ 0.00	nd Group	Gross Receipts Secon	0.00	\$	iroup	Gross Receipts First G
		Base Rate Fee Secon	0.00	\$	-	Base Rate Fee First G
THIRTY-SIXTH SUBSCRIBER GROUP REA 0	IRTY-SIXTH	İ	JP <b>0</b>	SUBSCRIBER GROU	RTY-FIFTH	
REA U		COMMUNITY/ AREA				COMMUNITY/ AREA
DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	····					
	····					
0.00		Total DSTa	0.00			Total DSCs
0.00		Total DSEs	0.00		-	Total DSEs
Fourth Group \$ 0.00	n Group	Gross Receipts Fourth	0.00	\$	∍roup	Gross Receipts Third (
Fourth Group \$ 0.00	n Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third (

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
				ATE FEES FOR EACH				
THIRTY-S COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GROU	JP <b>0</b>	THIR' COMMUNITY/ AREA	ΓΥ-EIGHTH	SUBSCRIBER GROU	P <b>0</b>	9
COMMONT I/ AREA				COMMONITY AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
					<del></del>			Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
					<u></u>			
Total DSEs			0.00	Total DSEs		11	0.00	
						_		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIR'	TY-NINTH	SUBSCRIBER GROU	JP		FORTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	1	1	0.00	Total DSEs	1	11	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
, , , , ,	•				•	_		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				**				
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes al	oove.	\$		

CABLE ONE, INC						5	25206	Name
F(		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP  SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
					<b></b>			Exclusivity
					<u></u>			Surcharge for
								Partially
					<b></b>			Distant Stations
								Otations
					<b></b>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE.	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$		

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LEGAL NAME OF OWNER CABLE ONE, INC. (						S	YSTEM ID# 25206	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
		SUBSCRIBER GROU		III		SUBSCRIBER GROU	Р	^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	<b></b>				<b></b>			
	-							
	<del> </del>					H		
	<del> </del>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FORTY-S	SEVENTH	SUBSCRIBER GROU	IP	FORT	Y-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<del> </del>		
	<u> </u>							
	ļ		ļ					
	<b></b>				<b></b>			
	<b> </b>							
Total DSEs			0.00	Total DSEs	1		0.00	
Total DSEs			0.00	Total DSEs			-	
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	as shown in the boxes ab	ove.	\$		

		IBER GROUP	SUBSCRI			COMPUTATION O	LOCK A: (	В
	IP	SUBSCRIBER GROU				SUBSCRIBER GRO		
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndica								
Exclusiv						-		
Surchar for								
Partial					<u> </u>			
Distar								
Station								
							·	
	0.00			Total DSEs	0.00			otal DSEs
	0.00			I I Ulai DOES				
	0.00	<b>e</b>	d Group			¢	oun	ross Pacaints First Gr
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gro
	0.00			Gross Receipts Secon	0.00	\$		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	lase Rate Fee First Gro
	0.00 0.00		d Group	Gross Receipts Secon  Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	oup	lase Rate Fee First Gro
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	dase Rate Fee First Gro
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$	d Group	Gross Receipts Secon  Base Rate Fee Secon	0.00 0.00	\$	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	FIF:
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	FIF:
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	ase Rate Fee First Gro FIF OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	dase Rate Fee First Gro
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	FIF:
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	Base Rate Fee First Gro FIF COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon FIFT COMMUNITY/ AREA	0.00 0.00	SUBSCRIBER GRO	oup	Base Rate Fee First Gro FIF COMMUNITY/ AREA
	0.00  0.00  DSE	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA  CALL SIGN	0.00  0.00  UP  0  DSE	SUBSCRIBER GRO	oup	FIF COMMUNITY/ AREA
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  UP  0  0.00  0.00	SUBSCRIBER GRO	DSE DSE	FIFE COMMUNITY/ AREA  CALL SIGN  Total DSEs
	0.00  0.00  DSE	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA  CALL SIGN	0.00  0.00  UP  0  DSE	SUBSCRIBER GRO	DSE DSE	FIFE COMMUNITY/ AREA  CALL SIGN  Total DSEs
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  FIFT  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  UP  0  0.00  0.00	SUBSCRIBER GRO	DSE DSE	COMMUNITY/ AREA

CABLE ONE, INC						S	25206	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
F	FIFTY-THIRD	SUBSCRIBER GRO	UP	FIF	TY-FOURTH	I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	٠		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0,122 0.011	232	07.22 0.0.1	332	07.122.01011	332	07.22 0.011	332	Base Rate Fee
								and
								Syndicated
			····					Exclusivity Surcharge
		-						for
								Partially
		-						Distant
								Stations
							2.22	
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	
	FIFTY-FIFTH	SUBSCRIBER GRO	UP		FIFTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
			<u>.</u>					
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		
	, ,-	,						

CABLE ONE, IN						S	25206	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
FIFT	Y-SEVENTH	SUBSCRIBER GRO	UP	FI	FTY-EIGHTH	I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	٩		0	COMMUNITY/ AREA	٠		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122 0.011	202	07.122 0.0.1	332	07.122.01011	332	07.22 0.011	332	Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
			···					for
								Partially
								Distant
								Stations
			····		·····			
							2.22	
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	
	FIFTY-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				**				
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		
	• •	0 /						

LEGAL NAME OF OW CABLE ONE, IN						8	25206	Name
<del>-</del>				ATE FEES FOR EAC			ID.	
COMMUNITY/ ARE		SUBSCRIBER GRO	<b>0</b>	COMMUNITY/ ARE		) SUBSCRIBER GROU	0 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computa of
								Base Rate
								and
		1						Syndica Exclusiv
								Surchar
								for
								Partial
		<u> </u>						Distan Station
								Otatioi
		1						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ ARE		SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	)P 0	
COMMUNITY AREA				COMMONT 17 ARE	A			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				<u> </u>				
			criber group	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
				ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	TY-FIFTH	SUBSCRIBER GROU			XTY-SIXTH	SUBSCRIBER GROUI		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<mark></mark>			and
					<del>.</del>			Syndicated Exclusivity
								Surcharge
		-						for
								Partially Distant
								Stations
			<u> </u>				<u></u>	
					<u>.</u>		····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
	•							
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SIXTY-S	SEVENTH	SUBSCRIBER GROU	IP	SIXT	Y-EIGHTH	SUBSCRIBER GROUI	<b>D</b>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-			<mark></mark>			
					<u>.</u>		····	
					<mark></mark>			
			<u> </u>		<u>.</u>		<u></u>	
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	
Daso Rate Lee Hill Gi	Зир	\$	0.00	Susc Rate Fee Fourth	Отоир	\$	0.00	
			_					
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		

BLOCK A	A: COMPUTATION C	OF BASE RA	ATE FEES FOR EACH	SUBSCR	RIBER GROUP		
	H SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	_
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computa of
					0.122		Base Rate
							and
							Syndica
							Exclusiv
							Surchar
				····			for Partial
							Distan
				····			Station
otal DSEs	H	0.00	Total DSEs			0.00	
DIAI DOES		0.00	TOTAL DOES			_	
ross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Secon		\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ase Rate Fee First Group SEVENTY-FIRS	\$ \$ ST SUBSCRIBER GRO	<b>0.00</b>	Base Rate Fee Secon	nd Group		0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ase Rate Fee First Group SEVENTY-FIRS	\$	<b>0.00</b>	Base Rate Fee Secon	nd Group	\$	0.00	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00  DSE	Base Rate Fee Second SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	DSE	
SEVENTY-FIRS	\$ SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	Y-SECONE	\$ D SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIRST OMMUNITY/ AREA  CALL SIGN DSE	\$ SUBSCRIBER GRO	0.00  DSE	Base Rate Fee Second SEVENT COMMUNITY/ AREA	TY-SECOND DSE	\$ D SUBSCRIBER GROU	DSE	
SEVENTY-FIRST DMMUNITY/ AREA  CALL SIGN DSE  Datal DSEs	ST SUBSCRIBER GRO	0.00  DSE  0.00	Base Rate Fee Second SEVENT COMMUNITY/ AREA CALL SIGN	TY-SECOND DSE	SUBSCRIBER GROU	0.00  JP	
SEVENTY-FIRST DMMUNITY/ AREA  CALL SIGN DSE  Datal DSEs	ST SUBSCRIBER GRO	0.00  DSE  0.00	Base Rate Fee Second SEVENT COMMUNITY/ AREA CALL SIGN	DSE ORDER	SUBSCRIBER GROU	0.00  JP	

BLOCK /	A: COMPUTATION C	OF BASE RA	ATE FEES FOR EAC	H SUBSCR	RIBER GROUP		
	D SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computa of
OALE GIGIN DOL	OALL GIGIN	DOL	CALL GIGIN	DOL	OALL GIGIT	DOL	Base Rate
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							Distan
							Station
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otal DSEs		0.00	Total DSEs			0.00	
	•						
iross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
	\$	0.00	Gross Receipts Seco		\$	0.00	
dase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
Sase Rate Fee First Group SEVENTY-FIFT	\$ \$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group ENTY-SIXTH		0.00	
sase Rate Fee First Group SEVENTY-FIFT	\$	0.00	Base Rate Fee Seco	nd Group ENTY-SIXTH	\$	<b>0.00</b>	
SEVENTY-FIFT	\$	0.00 DUP	Base Rate Fee Seco	nd Group ENTY-SIXTH	\$	<b>0.00</b>	
ase Rate Fee First Group  SEVENTY-FIFT  OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
ase Rate Fee First Group  SEVENTY-FIFT  OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
ase Rate Fee First Group  SEVENTY-FIFT  OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
Sase Rate Fee First Group  SEVENTY-FIFT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
Sase Rate Fee First Group  SEVENTY-FIFT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
Sase Rate Fee First Group  SEVENTY-FIFT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT COMMUNITY/ AREA  CALL SIGN  DSE	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Seco	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SEVENTY-FIFT COMMUNITY/ AREA  CALL SIGN  DSE  Otal DSEs	\$ H SUBSCRIBER GRO	0.00  DSE	Base Rate Fee Second SEVI COMMUNITY/ AREA	DSE	\$ I SUBSCRIBER GROU	DSE	
SEVENTY-FIFT COMMUNITY/ AREA  CALL SIGN DSE	S H SUBSCRIBER GRO	0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN	DSE	\$ CALL SIGN	0.00  JP	
COMMUNITY/ AREA	S H SUBSCRIBER GRO	0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN	DSE	\$ CALL SIGN	0.00  JP	

CABLE ONE, INC.						S	25206	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			•					and
								Syndicated
								Exclusivity
								Surcharge
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								Partially
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								Stations
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	<u>-</u>				<u>-</u>	†		
T-4-1 DOF-			0.00	T. A. I. DOE	1		0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SEVEN <sup>-</sup>	TY-NINTH	SUBSCRIBER GROU	JP	I	EIGHTIETH	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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	<b>-</b>							
Total DSEs			0.00	Total DSEs			0.00	
Cross Bossints Third C	rour	•		Cross Bassints Facility	Craun	•	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 a	as shown in the boxes al	bove.	\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
B	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
EIGH	ITY-FIRST	SUBSCRIBER GROU	JP	EIGHT	Y-SECOND	SUBSCRIBER GROU	Р	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.01011	202	07.122.01011	202	07.22 070.T	302	07.122 0.10.1	332	Base Rate Fee
								and
		-						Syndicated
		-						Exclusivity Surcharge
					<u></u>			for
								Partially
								Distant
								Stations
				-				
				-	<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GROU			Y-FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<del></del>	<del>                                     </del>		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group	as shown in the boxes al	bove.	\$		

N								
				TE FEES FOR EAC				
	0	SUBSCRIBER GROU	HIY-SIXIH	COMMUNITY/ AREA	<b>0</b>	SUBSCRIBER GROU	IIY-FIFIH	COMMUNITY/ AREA
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	0.00			T-4-1 DOE-	0.00			Satal DOF-
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	oup	ross Receipts First Gr
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	oup	<b>ase Rate Fee</b> First Gr
=	•	\$ SUBSCRIBER GROU			-	\$ SUBSCRIBER GROU		
-	•	ļ			-	SUBSCRIBER GROU		EIGHTY-S
	P	ļ		EIGH	JP	SUBSCRIBER GROU		EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S OMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S OMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	COMMUNITY/ AREA
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P 0	SUBSCRIBER GROU	TY-EIGHTH	EIGH COMMUNITY/ AREA	JP <b>0</b>		SEVENTH	EIGHTY-S
	P O DSE	SUBSCRIBER GROU	DSE DSE	EIGH COMMUNITY/ AREA  CALL SIGN	JP 0		DSE	EIGHTY-S OMMUNITY/ AREA  CALL SIGN  otal DSEs
	DSE	SUBSCRIBER GROU	DSE DSE	EIGH COMMUNITY/ AREA CALL SIGN  Total DSEs	DSE O.00	CALL SIGN	DSE	EIGHTY-S COMMUNITY/ AREA  CALL SIGN

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

BLOCK	A: COMPUTATION (	OF BASE RA	ATE FEES FOR EAC	H SUBSCR	RIBER GROUP		
	TH SUBSCRIBER GRO				1 SUBSCRIBER GROU	JP	
MMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computa of
	07.22 0.0.1		07.122.070.1	202	07.22 0.0.1	332	Base Rate
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tal DSEs		0.00	Total DSEs			0.00	İ
an BOLS			Total BOES			_	İ
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oss Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	<u>*</u>		ļ
oss Receipts First Group	<u>\$</u>	0.00	Gross Receipts Seco	nd Group			
oss Receipts First Group	\$	0.00	Gross Receipts Seco		\$	0.00	
se Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
se Rate Fee First Group  NINETY-FIR	\$ \$ \$ ST SUBSCRIBER GRO	0.00	Base Rate Fee Seco	nd Group		0.00	
se Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	<b>0.00</b>	
se Rate Fee First Group  NINETY-FIR	\$ ST SUBSCRIBER GRO	0.00	Base Rate Fee Seco	nd Group	\$	<b>0.00</b>	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	nd Group	\$ D SUBSCRIBER GROU	0.00 JP 0	
NINETY-FIR  NMMUNITY/ AREA  CALL SIGN  DSE	\$ ST SUBSCRIBER GRO	0.00  OUP  O DSE	Base Rate Fee Second NINE COMMUNITY/ AREA CALL SIGN	nd Group	\$ D SUBSCRIBER GROU	JP 0 DSE	
se Rate Fee First Group  NINETY-FIR  MMUNITY/ AREA	\$ ST SUBSCRIBER GRO	O.00	Base Rate Fee Second NINE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	\$ D SUBSCRIBER GROU	0.00  JP	
NINETY-FIR  NMMUNITY/ AREA  CALL SIGN  DSE	\$ ST SUBSCRIBER GRO	0.00  OUP  O DSE	Base Rate Fee Second NINE COMMUNITY/ AREA CALL SIGN	DSE	\$ D SUBSCRIBER GROU	JP 0 DSE	
NINETY-FIR DMMUNITY/ AREA CALL SIGN DSE tal DSEs	ST SUBSCRIBER GRO	O.00	Base Rate Fee Second NINE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	0.00  JP	
NINETY-FIR DMMUNITY/ AREA CALL SIGN DSE tal DSEs	ST SUBSCRIBER GRO	O.00	Base Rate Fee Second NINE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROU	0.00  JP	

		IBER GROUP	SUBSURI		_,	COMPUTATION O	LOCK A: (	Б
] _	IP	SUBSCRIBER GROU				SUBSCRIBER GRO		
.	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN
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- - -		\$	d Group			\$	oup	ross Receipts First Gr
-	0.00			Gross Receipts Secon	0.00	\$		
- - - -	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	l <b>ase Rate Fee</b> First Gro
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	ase Rate Fee First Gro NINE OMMUNITY/ AREA
-	0.00 0.00	\$	d Group	Gross Receipts Secon  Base Rate Fee Secon	0.00 0.00	\$	oup	ase Rate Fee First Gro NINE OMMUNITY/ AREA
- - - - - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	ase Rate Fee First Gro NINE OMMUNITY/ AREA
-	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	ase Rate Fee First Gro NINE OMMUNITY/ AREA
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	ase Rate Fee First Gro NINE OMMUNITY/ AREA
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	ase Rate Fee First Gro NINE OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	iase Rate Fee First Gro NINE
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	ase Rate Fee First Gro NINE
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	ase Rate Fee First Gro NINE
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	iase Rate Fee First Gro NINE
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 0.00	\$ SUBSCRIBER GRO	TY-FIFTH	NINE COMMUNITY/ AREA  CALL SIGN
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	d Group  ETY-SIXTH  DSE	Gross Receipts Secon  Base Rate Fee Secon  NIN  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  UP  0  0.00  0.00	SUBSCRIBER GRO  CALL SIGN	DSE DSE	NINE OMMUNITY/ AREA  CALL SIGN  otal DSEs
	0.00  0.00  DSE	\$ SUBSCRIBER GROU	d Group  ETY-SIXTH  DSE	Gross Receipts Secon  Base Rate Fee Secon  NIN  COMMUNITY/ AREA  CALL SIGN	0.00  0.00  UP  0  DSE	\$ SUBSCRIBER GRO	DSE DSE	NINE COMMUNITY/ AREA  CALL SIGN  Total DSEs
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	d Group  ETY-SIXTH  DSE	Gross Receipts Secon  Base Rate Fee Secon  NIN  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  UP  0  0.00  0.00	SUBSCRIBER GRO  CALL SIGN	DSE DSE	COMMUNITY/ AREA

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
NINETY-	SEVENTH	SUBSCRIBER GROU	Р	NINET	Y-EIGHTH	SUBSCRIBER GROU	Р	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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		-				<u> </u>		Syndicated
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					<u> </u>			Partially
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								Stations
					<u> </u>	<u>                                     </u>		
	·				<u>-</u>	-		
					<u> </u>	1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
·								
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GROU	Р	ONE HU	NDREDTH	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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						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				**				
Base Rate Fee: Add the Enter here and in block			ber group	as shown in the boxes ab	ove.	\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
ONE HUNDR		COMPUTATION OF SUBSCRIBER GROU	IP	11		BER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
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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 Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	D THIRD	SUBSCRIBER GROU		1	D FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
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Base Rate Fee Third G	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				··				
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP				11		COMPUTATION	LOCK A.	
IDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP			HUNDRED SIX	(				
A COMMUNITY/ AREA 0			AREA	0 COMMUN				OMMUNITY/ AREA
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t Group \$ 0.00 Gross Receipts Second Group \$ 0.00  t Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  ED SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP	0.0	p <b>\$</b>	Second Group	Base Rate	0.0	\$	oup	ase Rate Fee First Gro
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CABLE ONE, INC.						S	YSTEM ID# 25206	Name
				ATE FEES FOR EACH				
ONE HUNDRE COMMUNITY/ AREA	ED NINTH	SUBSCRIBER GROU	1P 0	ONE HUNDR COMMUNITY/ AREA	ED TENTH	SUBSCRIBER GROU	0	9
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED EI	EVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	TWELVTH	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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			l		<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
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Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes at	oove.	\$		

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ase Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	\$	0.00	Base Rate Fee Secon	nd Group		0.00	
ase Rate Fee First Group  ONE HUNDRED FIFTEENT	\$	<b>0.00</b>	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFTEENT OMMUNITY/ AREA	\$	<b>0.00</b>	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFTEENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
ONE HUNDRED FIFTEENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
ONE HUNDRED FIFTEENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
ONE HUNDRED FIFTEENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
ONE HUNDRED FIFTEENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
ONE HUNDRED FIFTEENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
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ONE HUNDRED FIFTEENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
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- - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	oross Receipts First Grasse Rate Fee First Grasse Rate Fee First Grasse ONE HUNDRED NIN
- - - - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	oross Receipts First Grasse Rate Fee First Grasse Rate Fee First Grasse ONE HUNDRED NIN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	oross Receipts First Grasse Rate Fee First Grasse Rate Fee First Grasse ONE HUNDRED NIN
- - - - - - - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	oross Receipts First Grasse Rate Fee First Grasse Rate Fee First Grasse ONE HUNDRED NIN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	oross Receipts First Grasse Rate Fee First Grasse Rate Fee First Grasse ONE HUNDRED NIN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	oross Receipts First Grasse Rate Fee First Grasse Rate Fee First Grasse ONE HUNDRED NIN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	Gross Receipts First Gross Rate Fee First Groone HUNDRED NINGER OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	Gross Receipts First Gross Rate Fee First Groone HUNDRED NINGER OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	Gross Receipts First Gross Rate Fee First Gro
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	Gross Receipts First Gross Rate Fee First Groone HUNDRED NIN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	oross Receipts First Grasse Rate Fee First Grasse Rate Fee First Grasse ONE HUNDRED NIN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRC	oup	Gross Receipts First Gross Rate Fee First Groone HUNDRED NIN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA	0.00  0.00  JP  0 DSE	\$ SUBSCRIBER GRC	oup	ONE HUNDRED NIN COMMUNITY/ AREA  CALL SIGN
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	DSE	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  0.00  DSE  0.00	SUBSCRIBER GRO	OUP  NTEENTH  DSE	Gross Receipts First Gross Rate Fee First Gross Rat
	0.00  0.00  DSE	\$ SUBSCRIBER GROU	DSE	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA  CALL SIGN	0.00  0.00  JP  0 DSE	\$ SUBSCRIBER GRC	OUP  NTEENTH  DSE	Gross Receipts First Gross Rate Fee First Gross Rat
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	DSE	Gross Receipts Secon  Base Rate Fee Secon  ONE HUNDRED T  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  0.00  DSE  0.00	SUBSCRIBER GRO	OUP  NTEENTH  DSE	Gross Receipts First Gross Rate Fee First Groon ONE HUNDRED NINCOMMUNITY/ AREA

BI OCK A	: COMPUTATION C	OF BASE R	ATE FEES FOR EACI	H SUBSCR	RIBER GROUP	l	
ONE HUNDRED TWENTY-FIRS					SUBSCRIBER GROUP		_
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
044 0104	II carr cion		0.414 0.004	T 505	TI OALL OLON		Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate
							and
							Syndicat
							Exclusiv
							Surchar
							for
							Partiall
				····			Distant Station
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otal DSEs		0.00	Total DSEs		-	0.00	
					¢	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	<del>y</del>	0.00	
	\$	0.00	Gross Receipts Seco		\$	0.00	
Gross Receipts First Group  Base Rate Fee First Group  ONE HUNDRED TWENTY-THIR	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	\$	0.00	Base Rate Fee Seco	nd Group		0.00	
Gase Rate Fee First Group  ONE HUNDRED TWENTY-THIR	\$	<b>0.00</b>	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TWENTY-THIR	\$	<b>0.00</b>	Base Rate Fee Seco	nd Group	\$	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ONE HUNDRED TWENTY-THIR	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ase Rate Fee First Group  ONE HUNDRED TWENTY-THIR  OMMUNITY/ AREA	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ONE HUNDRED TWENTY-THIR	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ONE HUNDRED TWENTY-THIR	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ONE HUNDRED TWENTY-THIR	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ONE HUNDRED TWENTY-THIR	\$ D SUBSCRIBER GROU	0.00 JP 0	Base Rate Fee Seco ONE HUNDRED TWEI COMMUNITY/ AREA	nd Group	\$ H SUBSCRIBER GROUP	0.00	
ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN  DSE	\$ D SUBSCRIBER GROU	0.00	Base Rate Fee Seco  ONE HUNDRED TWEI  COMMUNITY/ AREA  CALL SIGN	nd Group	\$ H SUBSCRIBER GROUP	0.00 DSE	
ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN DSE  Total DSEs	SUBSCRIBER GROU	0.00  DSE  0.00	Base Rate Fee Seco  ONE HUNDRED TWEI  COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	\$ CALL SIGN	0.00 DSE	
ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN  DSE	\$ D SUBSCRIBER GROU	0.00	Base Rate Fee Seco  ONE HUNDRED TWEI  COMMUNITY/ AREA  CALL SIGN	DSE	\$ H SUBSCRIBER GROUP	0.00 DSE	
ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN DSE  Total DSEs	SUBSCRIBER GROU	0.00  DSE  0.00	Base Rate Fee Seco  ONE HUNDRED TWEI  COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	\$ CALL SIGN	0.00 DSE	
ONE HUNDRED TWENTY-THIR COMMUNITY/ AREA  CALL SIGN DSE  Total DSEs	SUBSCRIBER GROU	0.00  DSE  0.00	Base Rate Fee Seco  ONE HUNDRED TWEI  COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	\$ CALL SIGN	0.00 DSE	

CALL SIGN   DSE   CALL SIGN	EGAL NAME OF OWNER OF CABLE ONE, INC. d/b/a SF					S	25206	Name
CALL SIGN   DSE   CALL SIGN			BASE RA	П				
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE BIS CALL SIGN DSE CALL SIGN DS		SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
CALL SIGN   DSE   CALL SIGN	JOMMUNITY/ AREA		U	COMMUNITY/ AREA			<u>U</u>	Computat
Total DSEs  Total DSEs  Gross Receipts First Group  S  O.00  Gross Receipts Second Group  S  O.00  Base Rate Fee First Group  S  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE  CALL SIGN  D	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Fotal DSEs  O.00 Gross Receipts First Group  Base Rate Fee First Group  Sase Rate Fee First Group  COMMUNITY/ AREA  O  CALL SIGN  DSE  CALL SI								Base Rate
Fotal DSEs  O.00 Gross Receipts First Group  Base Rate Fee First Group  Sase Rate Fee First Group  COMMUNITY/ AREA  O  CALL SIGN  DSE  CALL SI								and Syndicate
Fotal DSEs  Total								Exclusivi
Gross Receipts First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee Second Group  Sase Rate Fee Second Group  Sase Rate Fee Second Group  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  OCMMUNITY/ AREA								Surcharg
Gross Receipts First Group  Base Rate Fee First Group  Sommunitry/ AREA  O  CALL SIGN  DSE  CA								for
Gross Receipts First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sommunity/ AREA  OCOMMUNITY/ AREA								Partially Distant
ase Rate Fee First Group  S  O.00  Base Rate Fee Second Group  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  OCHMUNITY/ AREA								Stations
ase Rate Fee First Group  S  O.00  Base Rate Fee Second Group  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  OCHMUNITY/ AREA								
ase Rate Fee First Group  S  O.00  Base Rate Fee Second Group  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  OCHMUNITY/ AREA								
ase Rate Fee First Group  S  O.00  Base Rate Fee Second Group  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  OCHMUNITY/ AREA								
Gross Receipts First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee Second Group  Sase Ra								
Gross Receipts First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee First Group  Sase Rate Fee Second Group  Sase Ra				-				
Base Rate Fee First Group  Base Rate Fee Second Group  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE  CALL S	otal DSEs		0.00	Total DSEs			0.00	
Base Rate Fee First Group  Base Rate Fee Second Group  ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE  CALL S	Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	<b>\$</b>	0.00	
ME HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP  OMMUNITY/ AREA  O  CALL SIGN  DSE	, , ,				,	·		
OMMUNITY/ AREA  O COMMUNITY/ ARE	ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	NE HUNDRED TWENTY-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP		
	OMMUNITY/ AREA		0	COMMUNITY/ ARE	4		0	
	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
100 Tables								
0.00 T-141 DOE:								
otal DSEs	otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
sase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	ase Rate Fee Third Group	\$	0.00	Base Rate Fee Foun	th Group	\$	0.00	

CABLE ONE, INC.						S	25206	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
ONE HUNDRED TWEN	ITY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	THIRTIETH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u>.</u>			Syndicated
					<mark></mark>			Exclusivity
					<mark></mark>			Surcharge for
					<u>.                                    </u>			Partially
					<u>-</u>			Distant
								Stations
		-	<b>.</b>					
	<b> </b>		<b></b>		<u> </u>	-		
					<mark></mark>			
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 Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED THIS	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>	-		
					<del>"</del>	<del> </del>		
		-						
					<mark></mark>			
					<mark></mark>			
					······································			
			<b>.</b>					
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.	\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> 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
								Otations
	<b> </b>							
			······					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	¢	0.00	Gross Receipts Second	d Group	<b>c</b>	0.00	
Gioss Receipts Filst Gi	oup	\$	0.00	Gioss Receipts Second	a Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED THI	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	IRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•					
	<u>-</u>							
			•					
	<u>-</u>							
	<del> </del>				<b>.</b>			
	<b> </b>		l					
	<b> </b>		l					
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Baca Data Eas Third O	roup		0.00	Raca Data Eco Foundle	Group		0.00	
Base Rate Fee Third G	ιουμ	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Raco Data Eac. Add 4L	hace "c*	fore for each subsection	her group	ae chown in the house	oove.			
Enter here and in block			nei group a	as shown in the boxes ab	ove.	\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
ONE HUNDRED THIRTY				Ti .		IBER GROUP  SUBSCRIBER GROUP	_	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
						1		
						1		
Total DSEs			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	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	RTY-NINTH	SUBSCRIBER GROUP		ii	FORTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				Ш				
Base Rate Fee: Add th Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
ONE HUNDRED FO		COMPUTATION OF SUBSCRIBER GROUP		Ti .		IBER GROUP SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
						<del>                                     </del>		Distant
								Stations
			<u> </u>			H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	RTY-THIRD	SUBSCRIBER GROUP		11	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						<del>                                     </del>		
		-						
					<u></u>	 		
			<u> </u>					
						-		
Total DSEs			0.00	Total DSEs			0.00	
	Danson				O	•	-	
Gross Receipts Third (	∍roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th	ne <b>hase r</b> ate	e fees for each subser	iber aroun	as shown in the boxes al	oove			
Enter here and in block			o. 5. oap	boxes u		\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	<u> </u>							
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	<del> </del>		l					
	<del> </del>		l					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FORTY	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•••••					
	<u> </u>							
	<mark></mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Enter here and in block			ber group a	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.						S	7STEM ID# 25206	Name
				ATE FEES FOR EACH				
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU		11	FIFTIETH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-		-				Base Rate Fee
								and Syndicated
					<u> </u>			Exclusivity
								Surcharge
								for Partially
					<u>.</u>		···	Distant
								Stations
					<mark></mark>			
					<mark></mark>			
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 Gre	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED FIFT	Y-SECOND	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	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
							<del></del>	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.						S	YSTEM ID# 25206	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED FIF	ΓY-THIRD	SUBSCRIBER GROU	IP	ONE HUNDRED FIFT	Y-FOURTH	SUBSCRIBER GROU	Р	^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
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								Stations
						H		
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 Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GROU	IP	ONE HUNDRED FI	TY-SIXTH	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	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
,	•			,	ı			
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 ab	oove.	\$		

			ATE FEES FOR EAC			<u>,                                      </u>
ONE HUNDRED FIFTY-SEVEN OMMUNITY/ AREA	IN SUBSCRIBER GROU	0	COMMUNITY/ AREA		1 SUBSCRIBER GROUF	0
			COMMONT IT AREA			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
						·····
		•••••				
		0.00				0.00
otal DSEs	-	0.00	Total DSEs		-	0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
ONE HUNDRED FIETY NIN						
	TH CHRCCDIDED CDOL	ID	ONE HUNDI	DED CIVTIETI	1 CLIDECDIDED CDOLLE	,
	TH SUBSCRIBER GROU		<del>fi</del>		1 SUBSCRIBER GROUF	
OMMUNITY/ AREA	TH SUBSCRIBER GROU	JP <b>0</b>	ONE HUNDI COMMUNITY/ AREA		1 SUBSCRIBER GROUF	0
OMMUNITY/ AREA	П		COMMUNITY/ AREA			
OMMUNITY/ AREA	CALL SIGN	0	<del>fi</del>	A	SUBSCRIBER GROUF	0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
OMMUNITY/ AREA	П	DSE	COMMUNITY/ AREA	A		DSE
OMMUNITY/ AREA	П	0	COMMUNITY/ AREA	A		0
CALL SIGN DSE	П	DSE	COMMUNITY/ AREA	DSE		DSE
CALL SIGN DSE	CALL SIGN	0 DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	0 DSE
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CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE B	CABLE ONE, INC.							25206	Nan
COMMUNITY AREA CHRISTIAN, SHELBY, MOULTRII  CALL SIGN DSE	E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE		FIRST	SUBSCRIBER GRO	DUP		SECOND	SUBSCRIBER GROU	JP	^
CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE	COMMUNITY/ AREA	CHRIS	TIAN, SHELBY, I	MOULTRI	COMMUNITY/ AREA	MONTG	OMERY CO WE	ST	9 Comput
Total DSEs	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
Total DSEs  O.00  Total DSEs  O.00  Gross Receipts First Group  Total DSEs  O.00  Total DSEs  O.00  Total DSEs  O.00  Base Rate Fee Second Group  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA  FAYETTE CO.  CALL SIGN  DSE  CALL S									Base Rate
Total DSEs  O.00  Gross Receipts First Group  THIRD SUBSCRIBER GROUP  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA  FAYETTE CO.  CALL SIGN  DSE  CA									and
Total DSEs  O.00  Gross Recelpts First Group  THIRD SUBSCRIBER GROUP  THIRD SUBSCRIBER GROUP  CALL SIGN  DSE									Syndica
Stross Receipts First Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group									Exclusiv
Stross Receipts First Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group									Surchar
Stross Receipts First Group  \$ 413,566.36  Stross Receipts Second Group  \$ 132,055.71  State Rate Fee First Group  \$ 0.00  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA FAYETTE CO.  CALL SIGN  DSE									for
Stross Receipts First Group  \$ 413,566.36  Stross Receipts Second Group  \$ 132,055.71  State Rate Fee First Group  \$ 0.00  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA FAYETTE CO.  CALL SIGN  DSE									Partial
Stross Receipts First Group  \$ 413,566.36  Stross Receipts Second Group  \$ 132,055.71  State Rate Fee First Group  \$ 0.00  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA FAYETTE CO.  CALL SIGN  DSE									Distan
Siross Receipts First Group  Since Rate Fee First Group  Since Rate Fee First Group  Since Rate Fee First Group  Since Rate Fee First Group  Since Rate Fee First Group  Since Rate Fee First Group  Since Rate Fee First Group  Since Rate Fee Second Group  Since Rate Fee Since Rate Fee Second Group  Since Rate Fee Second Group  Since Ra		••••		••••					Station
Stross Receipts First Group  \$ 413,566.36  Stross Receipts Second Group  \$ 132,055.71  State Rate Fee First Group  \$ 0.00  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA FAYETTE CO.  CALL SIGN  DSE		••••••••••							
Stross Receipts First Group  \$ 413,566.36  Stross Receipts Second Group  \$ 132,055.71  State Rate Fee First Group  \$ 0.00  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA FAYETTE CO.  CALL SIGN  DSE		···		····		···			
Stross Receipts First Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group		····		••••		····			
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Gross Receipts First Group  Sase Rate Fee First Group  THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA  FAYETTE CO.  CALL SIGN  DSE  C								<del></del>	
Stross Receipts First Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group  Stross Receipts Fourth Group									
Base Rate Fee First Group  THIRD SUBSCRIBER GROUP  TOMMUNITY/ AREA FAYETTE CO.  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE	Total DSEs			0.00	Total DSEs			0.00	
Base Rate Fee First Group  THIRD SUBSCRIBER GROUP  TOMMUNITY/ AREA FAYETTE CO.  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  COMMUNITY/ AREA MONTGOMERY CO N,C & MACOU  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE CALL SIGN DSE  TOTAL SIGN DSE	Gross Pacaints First G	roun	¢ /11	3 566 36	Gross Pacaints Secon	nd Group	•	132 055 71	
THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA  FAYETTE CO.  COMMUNITY/ AREA  MONTGOMERY CO N,C & MACOU  CALL SIGN  DSE  CALL SIGN	orosa receipta i irat G	loup	4 71	3,300.30	Gloss Neceipis Secoi	iu Group	Ψ	132,033.71	
THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA  FAYETTE CO.  COMMUNITY/ AREA  MONTGOMERY CO N,C & MACOU  CALL SIGN  DSE  CALL SIGN									
COMMUNITY/ AREA FAYETTE CO.  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CA	Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
COMMUNITY/ AREA FAYETTE CO.  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CA			-	-			<u> </u>	•	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  Total DSEs  Total DSEs  Total DSEs  Total DSEs  Total DSEs  Gross Receipts Third Group  \$ 346,042.78  Gross Receipts Fourth Group  \$ 194,637.97		THIRD	SUBSCRIBER GRO	DUP		FOURTH	SUBSCRIBER GROU	JP	
Total DSEs	COMMUNITY/ AREA	FAYET	TE CO.		COMMUNITY/ AREA	MONTG	OMERY CO N,C	& MACOU	
Gross Receipts Third Group \$ 346,042.78 Gross Receipts Fourth Group \$ 194,637.97	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Gross Receipts Third Group \$ 346,042.78 Gross Receipts Fourth Group \$ 194,637.97									
Gross Receipts Third Group \$ 346,042.78 Gross Receipts Fourth Group \$ 194,637.97									
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Gross Receipts Third Group \$ 346,042.78 Gross Receipts Fourth Group \$ 194,637.97									
Gross Receipts Third Group \$ 346,042.78 Gross Receipts Fourth Group \$ 194,637.97	otal DSEs			0.00	Total DSEs			0.00	
			. 24		5	•		104 627 07	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	oss Receipts Third G	oroup	₹ 34	0,U4Z./ ŏ	Gross Receipts Fourth	ı Group	<b>a</b>	34,037.97	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00									
3.55 mile 3.54 (4 3.55)	Base Rate Fee Third G	Group	¢	0 00	Base Rate Fee Fourth	n Group	¢	0.00	
"	-use rate ree rima e	oup	4	0.00	Bust Rate Fee Fourti	. Oroup	4	0.00	
					Ш				
							-		
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.				criber group a	as shown in the boxes a	bove.			
Enter here and in block 3, line 1, space L (page 7)	nter here and in block	3, line 1, s	pace L (page 7)				\$	0.00	

	SLOCK A:	COMPLITATION C	E BASE D	ATE FEES FOR EACH	SUBSCPI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA		JPON CO SE	<u> </u>	COMMUNITY/ AREA			-	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	
ross Receipts First G	roup	s 160	6,087.29	Gross Receipts Second	d Group	\$	181,820.23	
			-,			-		
ase Rate Fee First G		i .						
	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
		SUBSCRIBER GRO		Base Rate Fee Second		<b>-</b>	•	
	SEVENTH	SUBSCRIBER GRO			EIGHTH	SUBSCRIBER GRO	•	
				Base Rate Fee Second COMMUNITY/ AREA		SUBSCRIBER GRO	•	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH				EIGHTH	SUBSCRIBER GRO	•	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA  CALL SIGN	SEVENTH BOND	CO.	)UP	COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GRO	DUP	
OMMUNITY/ AREA  CALL SIGN  otal DSEs	BOND O	CALL SIGN	DUP  DSE  OUD  OUD  OUD  OUD  OUD  OUD  OUD  OU	COMMUNITY/ AREA  CALL SIGN	DSE	SUBSCRIBER GRO	DUP	
CALL SIGN  CALL SIGN  Otal DSEs	BOND O	CALL SIGN	DUP	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	SUBSCRIBER GROE CO.	DUP  DSE  0.00	
CALL SIGN  CALL SIGN  Cotal DSEs  Gross Receipts Third G	BOND	CALL SIGN	0.00 6,854.68	COMMUNITY/ AREA  CALL SIGN  Total DSEs  Gross Receipts Fourth	DSE	SUBSCRIBER GROE CO.  CALL SIGN  \$	0.00 54,643.77	
OMMUNITY/ AREA  CALL SIGN  otal DSEs	BOND	CALL SIGN	DUP  DSE  OUD  OUD  OUD  OUD  OUD  OUD  OUD  OU	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	SUBSCRIBER GROE CO.	DUP  DSE  0.00	

CABLE ONE, INC.	R OF CABL d/b/a SP					·	25206
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP	
	NINTH	SUBSCRIBER GRO	)UP		TENTH	SUBSCRIBER GRO	UP
COMMUNITY/ AREA	JERSE	Y CO.		COMMUNITY/ AREA	SCOTT	CO.	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		H					
	<del></del>						
	<del></del>						
otal DSEs			0.00	Total DSEs			0.00
ross Receipts First G	roup	\$ 1	1,298.72	Gross Receipts Seco	nd Group	\$	73,061.44
							<del></del>
<b>5.4 5 5 4.0</b>			_ 1				
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
		SUBSCRIBER GRO		Base Rate Fee Seco		SUBSCRIBER GRO	•
E		SUBSCRIBER GRO		Base Rate Fee Seco	TWELVTH		•
E MMUNITY/ AREA		SUBSCRIBER GRO	DUP		TWELVTH		UP
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E DMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E OMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
EOMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
E OMMUNITY/ AREA	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
CALL SIGN	LEVENTH		0 0	COMMUNITY/ AREA	TWELVTH	I SUBSCRIBER GRO	UP <b>0</b>
DMMUNITY/ AREA  CALL SIGN  tal DSEs	DSE	CALL SIGN	DUP  O  DSE  O  O  O  O  O  O  O  O  O  O  O  O  O	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE
E OMMUNITY/ AREA	DSE		DUP 0	COMMUNITY/ AREA	DSE	I SUBSCRIBER GRO	DSE

	I/b/a SP	ARKLIGHT					25206
				ATE FEES FOR EAC			
	TEENTH	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
			••••				
			····	-			
tal DSEs			0.00	Total DSEs			0.00
oss Receipts First Gro	up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
se Rate Fee First Gro		\$	0.00	Base Rate Fee Sec		\$	0.00
	TEENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	_
MMUNITY/ AREA			0	COMMUNITY/ ARE	٩		0
LL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
EL OIOIT							DOL
LE GIOIT							562
LE GION							302
							502
TE GOT							
WEL GION							
VEC GION							
			0.00	Total DSEs			0.00
otal DSEs					rth Group		0.00
otal DSEs ross Receipts Third Gr		\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	

## Nonpermitted 3.75 Stations

K A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
NTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP	
0 COMMUNITY/ AREA	0
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI	DSE Comp
	Base R
	aı
	Synd
	Exclu
	Surc
	fe
	Part
	Dis
	Stat
0.00 Total DSEs 0.0	0.00
\$ 0.00 Gross Receipts Second Group \$ 0.0	0.00
\$ 0.00 Base Rate Fee Second Group \$ 0.0	0.00
NTH SUBSCRIBER GROUP TWENTIETH SUBSCRIBER GROUP	
0 COMMUNITY/ AREA	0
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI	
	DSE
0.00 Total DSEs 0.00	0.00
	0.00
\$ 0.00 Gross Receipts Fourth Group \$ 0.0	0.00

	d/b/a SP	ARKLIGHT					25206
				ATE FEES FOR EAC			
	TY-FIRST	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
			<u> </u>				
		-					
		-					
			<u></u>				
tal DSEs			0.00	Total DSEs			0.00
ross Receipts First Gro	าเมา	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
, , , , , , , , , , , , , , , , , , ,	p				0.046		
e Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
				<del>-  </del>	•	•	•
	Y-THIRD	SUBSCRIBER GRO			TY-FOURTH	SUBSCRIBER GROU	JP
	Y-THIRD	SUBSCRIBER GRO	0 0	TWEN' COMMUNITY/ AREA	TY-FOURTH	1 SUBSCRIBER GROU	JP <b>0</b>
MUNITY/ AREA	Y-THIRD DSE	SUBSCRIBER GRO			TY-FOURTH	1 SUBSCRIBER GROU	_
MUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
//MUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
DMMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
MMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
DMMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
DMMUNITY/ AREA			0	COMMUNITY/ AREA	TY-FOURTH		0
TWENT DMMUNITY/ AREA CALL SIGN  tal DSEs oss Receipts Third Gr	DSE		DSE	CALL SIGN	DSE		DSE

LE ONE, INC. d/b/a SPARKLIGH	<u> </u>				25206	
BLOCK A: COMPUTA						
TWENTY-FIFTH SUBSCRIB		Ħ		SUBSCRIBER GROU		9
MUNITY/ AREA	0	COMMUNITY/ ARE	4		0	Computati
L SIGN DSE CALL SIG	GN DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						Base Rate
						and
						Syndicate
						Exclusivi
						Surcharg
						for
				+		Partially Distant
						Stations
				<del> </del>		otatione
DSEs	0.00	Total DSEs			0.00	
Receipts First Group \$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Rate Fee First Group \$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWENTY-SEVENTH SUBSCRIB	ER GROUP	TWE	NTV-EIGHTL	SUBSCRIBER GRO	UP	
ALINUTY/ ADE A		+	INT I-LIGITII			
MUNITY/ AREA	0	COMMUNITY/ ARE			0	
L SIGN DSE CALL SIG		ii		CALL SIGN		
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
		COMMUNITY/ ARE	Α		0	
L SIGN DSE CALL SIG	GN DSE	CALL SIGN	Α		DSE	
		COMMUNITY/ ARE	Α		0	
L SIGN DSE CALL SIG	GN DSE	CALL SIGN	DSE		DSE	
L SIGN DSE CALL SIGN	0.00	COMMUNITY/ ARE  CALL SIGN  Total DSEs	DSE	CALL SIGN	0 DSE	
L SIGN DSE CALL SIGN	0.00	COMMUNITY/ ARE  CALL SIGN  Total DSEs	DSE	CALL SIGN	0 DSE	

CABLE ONE, IN							25206	Name
				ATE FEES FOR EAC			ID.	
I W COMMUNITY/ ARE		SUBSCRIBER GRO	<u> 0</u>	COMMUNITY/ ARE		H SUBSCRIBER GRO	<b>0</b>	9
COMMUNITY AREA			U	COMMUNITY ARE	A			Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
		-						Syndicate
		-						Exclusivi
		-						Surcharg for
		H						Partially
								Distant
								Stations
					<mark></mark>		<u></u>	
		-			<mark></mark>			
		<del> </del>			<mark></mark>			
		<u> </u>						
otal DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First	Croup	¢	0.00	Gross Receipts Sec	and Croup	<b>*</b>	0.00	
oloss Receipts Filsi	Gloup	\$	0.00	Gloss Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TI	IRTY-FIRST	SUBSCRIBER GRO	OUP	THIF	RTY-SECONE	O SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	1		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		<u> </u>						
		-			<mark></mark>			
		H			<mark></mark>			
		<u> </u>		-	······			
			0.00	Total DSEs			0.00	
otal DSEs		\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	l Group	T	0.00	1.1		<del></del>		
	d Group	<u>*</u>	0.00					
otal DSEs Gross Receipts Thir	·	•		Raco Pato Foo Foo	rth Group	¢	0.00	
	·	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

## Nonpermitted 3.75 Stations

		RIBER GROUP	1 SUBSCR		I DAOLIV	COMPUTATION O	BLOCK A:	
	JP	H SUBSCRIBER GROU	Y-FOURTH	THIF	UP	SUBSCRIBER GRO	RTY-THIRD	THIR
Co	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Comp	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base F	BOL	ONEE CICIY	BOL	ONLE GIGIT	DOL	CALL SIGIT	DOL	O/ LEE GIGIT
а								
Synd								
Exclu								
Surc								
fo								
Part Dis								
Stat			····					
-			···		···			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	nd Group	Gross Receipts Sec	0.00	\$	Group	ross Receipts First G
	0.00	\$	nd Group		0.00			
	0.00		iu Group	Base Rate Fee Sec	0.00	\$	Group	ase Rate Fee First Gr
	-	•			-			
	JP	1 SUBSCRIBER GROU		T	UP	SUBSCRIBER GRO		THIF
	-	•			-			THIF
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP	•		T	UP			THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	JP <b>0</b>	1 SUBSCRIBER GROU	IRTY-SIXTH	TI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	RTY-FIFTH	THIF OMMUNITY/ AREA
	DSE	1 SUBSCRIBER GROU	IRTY-SIXTH	CALL SIGN	DSE	SUBSCRIBER GRO	RTY-FIFTH	THIF COMMUNITY/ AREA  CALL SIGN
	DSE DSE O.00	CALL SIGN	DSE	CALL SIGN  CALL SIGN  Total DSEs	DSE DSE O.000	SUBSCRIBER GRO  CALL SIGN	DSE	THIF COMMUNITY/ AREA  CALL SIGN  otal DSEs
	DSE	1 SUBSCRIBER GROU	DSE	CALL SIGN	DSE	SUBSCRIBER GRO	DSE	THIF COMMUNITY/ AREA  CALL SIGN  Call SIGN  Cotal DSEs
	DSE DSE O.00	CALL SIGN	DSE	CALL SIGN  CALL SIGN  Total DSEs	DSE DSE O.000	SUBSCRIBER GRO  CALL SIGN	DSE	COMMUNITY/ AREA

25206 Nam						u/b/a 3F/	CABLE ONE, INC.
			TE FEES FOR EAC				
<u> </u>	BSCRIBER GROUP	Y-EIGHTH			SUBSCRIBER GROL	SEVENTH	
0 Comput			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE of	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Ra							
and							
Syndic							
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Surcha							
for							
Partia Dista							
Statio							
- Ctatic							
0.00			Total DSEs	0.00			otal DSEs
0.00		d Group	Gross Receipts Seco	0.00	\$	oup	Fross Receipts First Gro
0.00		d Group					
		. Огоар	Base Rate Fee Seco	0.00	\$	oup	ase Rate Fee First Gro
	BSCRIBER GROUP		Base Rate Fee Seco		SUBSCRIBER GROU		
0	BSCRIBER GROUP		COMMUNITY/ AREA		SUBSCRIBER GROU		THIRT
0	BSCRIBER GROUP			JP	SUBSCRIBER GROU		THIRT
O DSE	BSCRIBER GROUP  CALL SIGN			JP	SUBSCRIBER GROU		THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
		FORTIETH	COMMUNITY/ AREA	JP <b>0</b>		ΓΥ-NINTH	THIRT
DSE		FORTIETH	COMMUNITY/ AREA  CALL SIGN	DSE		ΓΥ-NINTH	THIRT COMMUNITY/ AREA  CALL SIGN
DSE		DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE		DSE	THIRT COMMUNITY/ AREA  CALL SIGN  Cotal DSEs
DSE		DSE	COMMUNITY/ AREA  CALL SIGN	DSE		DSE	THIRT COMMUNITY/ AREA  CALL SIGN  Total DSEs
DSE		DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE	CALL SIGN	DSE	COMMUNITY/ AREA
DSE		DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE	CALL SIGN	DSE	THIRT COMMUNITY/ AREA  CALL SIGN  Total DSEs

CABLE ONE, IN							25206	
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO		9
COMMUNITY/ ARE	·		0	COMMUNITY/ ARE	Α		0	Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
O/ LEE O/O/1	BOL	O/ IEE O/O/V	BOL	OF ILL STOTA	DOL	CALL GIGIT	562	Base Rate
								and
								Syndicate
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								Surcharg
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								Partially
								Distant
								Stations
							······	
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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	ond Group	\$	0.00	
F.	DRTY-THIRD	SUBSCRIBER GRO	OUP	FO	RTY-FOURTH	SUBSCRIBER GRO	UP	
OMMUNITY/ ARE			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					·····		·······	
		H						
otal DSEs			0.00	Total DSEs			0.00	
	l Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
otal DSEs	l Group	\$			rth Group	\$		
Gross Receipts Thir	·	<u>\$</u>	0.00	Gross Receipts Fou			0.00	
	·	\$				\$		

	-			TE FEES FOR EAC				
9	JP <b>0</b>	I SUBSCRIBER GROU	RTY-SIXTH	COMMUNITY/ AREA	UP <b>0</b>	SUBSCRIBER GRO	RTY-FIFTH	FOR COMMUNITY/ AREA
Comput				OOMMONT 1774 (E7				SOMMONT 17 AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rat								
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	oup	Gross Receipts First Gr
	_							•
								·
	0.00	\$		Base Rate Fee Seco	0.00	\$	oup	Base Rate Fee First Gr
	JP	\$ SUBSCRIBER GROU		FOF	UP	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr
	•				-	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gr
	JP			FOF	UP	SUBSCRIBER GRO	oup	Base Rate Fee First Gr
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	FORTY-SOMMUNITY/ AREA
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S COMMUNITY/ AREA
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S COMMUNITY/ AREA
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S COMMUNITY/ AREA
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	Base Rate Fee First Gr FORTY-S
	JP <b>0</b>	I SUBSCRIBER GROU	TY-EIGHTH	FOF COMMUNITY/ AREA	UP <b>0</b>		SEVENTH	FORTY-SCOMMUNITY/ AREA  CALL SIGN
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ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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CABLE ONE, INC						;	SYSTEM ID# 25206	Name
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BLOCK A: COMPUTATION OF BASE ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP  DMMUNITY/ AREA  CALL SIGN DSE CALL SIGN DS	ONE HUNDRED  O COMMUNITY/ ARE	EIGHTEENTH	CALL SIGN	DSE	<b>9</b> Computat
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ase Rate Fee Third Group   \$ 0.0	<u></u>	r	, <del>-</del>		

ACCOUNTING	PERIOD:	2022	/2
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SPARKLIGHT	25206		
( A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIB			
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BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  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  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSE	GAL NAME OF OWNER OF OBJECT OF CORRECT ONE, INC. d/b/a		
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and Syndica Exclusive Surchar for Partial Distant	ONE HUNDRED THIRTY-S			F BASE RA	ATE FEES FOR EAC	H SUBSCR	RIBER GROUP		
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CALL SIGN   DSE   CALL SIGN	CALL SIGN	II Y/ AREA U COMMUNITY/ AREA O					_		
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CABLE ONE, INC. d/b/a	SPARKLIGHT					25206
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ase Rate Fee First Group  ONE HUNDRED FORTY-TH	\$	0.00	Base Rate Fee Seco	ond Group RTY-FOURTH	\$	•
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## Nonpermitted 3.75 Stations

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] _	JP	SUBSCRIBER GROU						ONE HUNDRED FIF
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				ATE FEES FOR EAC				
ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP  ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP  ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP						9		
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ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GRO	N.ID	ONE LILINDO				
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CALL SIGN	DSE	CALL SIGN	DSE  DSE	COMMUNITY/ AREA	DSE	CALL SIGN	0 DSE	

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 25206 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 9 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 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 Syndicated 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant 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. 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 this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First 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 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. d/b/a SPARKLIGHT 25206 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 9 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 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 Syndicated 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 **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant 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. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First 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 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 Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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Radio

Accepted

C	Ca. Wo	ble rksheet	Total amount of remittance	Number of SAs rec'd		Initials	
			Date of remittance	Check	EFT	FIL	ING FEES
Cable ID #						Amount	Initials
Examined by		Reviewed by	Date examination completed	Allocation	number		
Space A Accounting Period							
	Janı	uary 1 - June 30, 2017		July 1 - Decemb	er 31, 2017		
	Lett	er sent	]	Information rece	eived		
	☐ Acc	epted	[	Phone call/Date/	'Contact		
Space B Owner							
	Lett	er sent		Information rece	eived		
	Acc	epted		Phone call/Date/	'Contact		
Space D Area Served							
	Lett	er sent		Information rece	eived		
	Acc	epted		Phone call/Date/	'Contact		
Space E Secondary Transission							
Service Subscribers:	Lett	er sent	]	Information rece	eived		
and Rates	Acc	epted	[	Phone call/Date/	'Contact		
Space G Primary Transmitters:							
Television	Lett	er sent		Information rec	eived		
	☐ Acc	epted	[	Phone call/Date	/Contact		
Space H Primary Transmitters:							

Phone call/Date/Contact

		Space I Substitute Carriage
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space J Part-time Carriage Log
✓ Letter sent	☐ Information received	(SA3 only)
Accepted	Phone call/Date/Contact	
		Space K Gross Receipts
Letter sent	☐ Information received	
Letter sent	Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fees
Royalty Fee should be	Refund request to fiscal	1
Letter sent	☐ Information received	1
Accepted	Phoe call/Date/Contact	1
		Space M Channels
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space O Certification
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	1
		Space P Statement of Gross Receipts
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	1
		Space Q Interest Assessment
Letter sent	☐ Info/add'l fee received	
Accepted	Phone call/Date/Contact	