## THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2015

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA3 Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are at the end of this form [pages i-viii].

| FOR COPYRIGHT OFFICE USE ONLY |                      |  |  |  |  |
|-------------------------------|----------------------|--|--|--|--|
| DATE RECEIVED                 | AMOUNT               |  |  |  |  |
| 02/27/2018                    | \$ ALLOCATION NUMBER |  |  |  |  |

Return to: Library of Congress Copyright Office Licensing Division 101 Independence Ave. SE Washington, DC 20557-6400 (202) 707-8150

For courier deliveries, see page ii of the general instructions.

| A                    | ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (Check one of the boxes and fill in the year date.)   |  |  |  |  |  |  |  |
|----------------------|--|--|--|--|--|--|--|--|
| Accounting<br>Period | ☐ January 1–June 30 [■ July 1  | -December 31 .2017 (Year)  |  |  |  |  |  |  |
| B<br>Owner           | INSTRUCTIONS:  Give the full legal name of the owner of the cable system in line 1. If the owner corporate title of the subsidiary, not that of the parent corporation.  In line 2, list any other names under which the owner conducts the busines if there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID not be accounted by the conduction of the owner of the cable system. | ss of the cable system. on the last day of the accounting period should submit |  |  |  |  |  |  |
|                      | BLEDSOE TELEPHONE COOP CATV DIV  | 3314   |  |  |  |  |  |  |
|                      | 2 BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFEREN   | NT):   |  |  |  |  |  |  |
| С                    | 3 MAILING ADDRESS OF OWNER OF CABLE SYSTEM:  338 CUMBERLAND AVE., P.O. BOX 609 (Number, street, rural route, apartment, or suite number) PIKEVILLE, TN 37367 (City, town, state, zip)  INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.  |  |  |  |  |  |  |  |
| System               | 1 IDENTIFICATION OF CABLE SYSTEM:  |  |  |  |  |  |  |  |
|                      | MAILING ADDRESS OF CABLE SYSTEM:  (Number, street, rural route, apartment, or suite number)  (City, town, state, zip code)   |  |  |  |  |  |  |  |
| D<br>Area            | <b>Instructions:</b> For complete space D instructions, see page 1b. Identify only the all communities.  | first community served below and relist on page 1b with                        |  |  |  |  |  |  |
| Served               | CITY OR TOWN   | STATE  |  |  |  |  |  |  |
| First ►<br>Community | Below is a sample for reporting communities if you report multiple channel line-   | ups in Space G.  |  |  |  |  |  |  |
|                      | CITY OR TOWN (SAMPLE)  | STATE CH LINE UP SUB GRP#  |  |  |  |  |  |  |
| Sample <b>▶</b>      | CITY OR TOWN (SAMPLE)         STATE         CH LINE UP         SUB GRP#           Alda         MD         A         1           Alliance         MD         B         2           Gering         MD         B         3  |  |  |  |  |  |  |  |

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

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  |  |  |  | A1             |  |  |  |
|---|--|--|--|----------------|--|--|--|
| BLEDSOE TELEPHONE COOP CATV DIV   |  | 33                                       | 314  | Name           |  |  |  |
| Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.   |  |  |  |                |  |  |  |
| <b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile the identified city or town.   | home parks sh  | ould be reported in                      | n parentheses below  | Served         |  |  |  |
| 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-channel line-up designated by an alpha-letter(s) (based on your Space G reporting (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns.  | ig) and a subs                                       | sis, associate eac<br>criber group desig | h community with a<br>gnated by a number   |                |  |  |  |
| CITY OR TOWN  | STATE  | CH LINE UP                               | SUB GRP#   |                |  |  |  |
| PIKEVILLE CITY  | TN   | Α  | 1  | <b>⋖</b> First |  |  |  |
| 0.00.00.000.000.000.000.000.000.000.000.000.0000  | TN   | Δ  | 1  | Community      |  |  |  |
| BLEDSOE COUNTY  | All a man deposit man on and the first amount of the | ^  | A  | Community      |  |  |  |
| DUNLAP CITY   | TN   | Α  | J  |                |  |  |  |
| SEQUATCHIE COUNTY   | .TN  | A  | 1  |                |  |  |  |
| VAN BUREN COUNTY  | TN   | Α  | 1  |                |  |  |  |
| SOUTHERN PORTION OF CUMBERLAND COUNTY   | TN   | Α  | 1  |                |  |  |  |
| HAMILTON COUNTY   | TN   | Α  | 1  |                |  |  |  |
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Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

BLEDSOE TELEPHONE COOP CATV DIV

3314

## E

Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

| BLOCK  | [1                    |          | BLOCK 2                              |  |  |  |  |
|--|-----------------------|----------|--------------------------------------|--|--|--|--|
| CATEGORY OF SERVICE  | NO. OF<br>SUBSCRIBERS | RATE     | CATEGORY OF SERVICE SUBSCRIBERS RATE |  |  |  |  |
| Residential:  Service to first set  Service to additional set(s) | 2,572                 | \$20.95  |                                      |  |  |  |  |
| •FM radio (if separate rate)  Motel, hotel  Commercial           | 46                    |          |                                      |  |  |  |  |
| Converter  Residential   |                       | \$144.95 |                                      |  |  |  |  |
| · Non-residential  |                       |          |                                      |  |  |  |  |

F

Services
Other Than
Secondary
Transmissions:
Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

|  | BLO   | CK 1                          |  | BLOCK 2             |         |
|--|---|-------------------------------|--|---------------------|---------|
| CATEGORY OF SERVICE  | RATE  | CATEGORY OF SERVICE           | RATE   | CATEGORY OF SERVICE | RATE    |
| Continuing Services:  Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) Converter | \$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$250,000<br>\$25 | Installation: Non-residential | \$55.00<br>\$55.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$20.00<br>\$20.00<br>\$55.00<br>\$45.00 | WIRED NOT WIRED     | \$55.00 |

| FORM SA3. PAGE  | 3.   |  |  |  |   |                                    |
|---|--|--|--|--|---|------------------------------------|
| LEGAL NAME OF OWN   | IER OF CABLE SYSTEM:   |  |  |  |   | Name                               |
| BLEDSOE TEL   | EPHONE COOP  | CATV DIV   |  |  | 3314  |                                    |
| In General: In s carried by your FCC rules and 76.59(d)(2) and substitute programmer Substitute B basis under sperage Do not list the station was continued basis. For fur Column 1: Li each multicast cast stream as WETA-simulcase Column 2: Golumn | cable system du regulations in eff (4), 76.61(e)(2) a ram basis, as expasis Stations: We ecific FCC rules, he station here in carried only on a con here, and also other information st each station's stream associate "WETA-2". Simulative the channel regulation of the channel regulation is the channel regulation.                     | every television s<br>ring the accounti<br>fect on June 24,<br>nd (4), or 76.63 (<br>plained in the new<br>fith respect to any<br>regulations, or au<br>space G—but of<br>substitute basis.<br>in space I, if the s<br>concerning subs<br>call sign. Do not<br>ed with a station<br>cast streams multipumber the ECC   | ng period, except<br>1981, permitting<br>referring to 76.6<br>ext paragraph.<br>distant stations<br>withorizations:<br>do list it in space<br>station was carriestitute basis stati<br>report origination<br>according to its<br>list be reported in   | of (1) stations can the carriage of (1) the carriage of (1) the carriage of (1); a carried by your ca the I (the Special S ed both on a subs ons, see page (v) n program service over-the-air desi n column 1 (list e  | s and low power television stations) ried only on a part-time basis under certain network programs [sections and (2) certain stations carried on a able system on a substitute program tatement and Program Log)—if the stitute basis and also on some other of the general instructions. es such as HBO, ESPN, etc. Identify ignation. For example, report multiach stream separately; for example tion for broadcasting over-the-air in a may be different from the channel | G Primary Transmitters: Television |
| on which your of Column 3: In educational state (for independer For the meaning Column 4: If planation of loc Column 5: If cable system of a written agree the cable system tion "E" (exemple explanation of the Column 6: G  | cable system car dicate in each ca tion, by entering at multicast), "E" g of these terms, is the station is out all service area, so f you have entered arried the distant ant station on a pasmission of a dispendent entered in and a primary ot). For simulcast, these three categive the location of can or Canadian equilizing multiple | ried the station. se whether the st the letter "N" (for noncommerc, see page (v) of the distribution of the letter "n" (for noncommerc, see page (v) of the distribution of the distribution of the letter of the le | ation is a network r network), "N-M sial educational), the general instruction at the general instruction at the general instruction at the accounting period accounting the general accounting the general accounting the state of the general accounting the general accounting the state of the general accounting the state of the general accounting the | k station, an indep " (for network me or "E-M" (for nor uctions. "distant"), enter to stions. complete column riod. Indicate by f activated chan subject to a royal stween a cable sy resenting the prile channel on any l instructions. It the community to | ty payment because it is the subject istem or an association representing mary transmitter, enter the designather basis, enter "O." For a further to which the station is licensed by the with which the station is identified.   | Channel<br>Line-Up                 |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |                                    |
| WRCB  | 3  | N  | N  |  | CHATTANOOGA, TN   |                                    |
| WTCI  | 45   | E  | N  |  | CHATTANOOGA, TN   |                                    |
| WDSI  | 61   | t  | N  |  | CHATTANOOGA, TN   |                                    |
| WTVC  | 9  | N  | N  |  | CHATTANOOGA, TN   |                                    |
| WDEF  | 12   | N  | N  |  | CHATTANOOGA,TN  |                                    |
| WFLI  | 24   | 1  | N  |  | CLEVELAND, TN   |                                    |
|   |  |  |  |  |   |                                    |

|                                   |  |  |         |                     |           |          |     | FORM SA3. PAGE   |
|-----------------------------------|--|--|---------|---------------------|-----------|----------|-----|--|
| Name                              | LEGAL NAME OF  | OWNER OF CABL  | E SYSTE | M:                  |           |          |     |  |
|                                   | BLEDSOE T  | ELEPHONE   | coo     | P CATV DIV          |           |          |     | 3314   |
| Н                                 | In General: L  | PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FN all-band basis whose signals were "generally receivable" by your cable system during the acc |         |                     |           |          |     |  |
| Primary<br>Transmitters:<br>Radio | Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generated receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be experient the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated interfor detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instruct 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 disciplinal, 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 car Mexican or Canadian stations, if any, the community with which the station is identified). |  |         |                     |           |          |     | and (2) it can be expected, ing certain stated intervals. of the general instructions.  as a separate and discrete |
|                                   | CALL SIGN  | AM or FM   | S/D     | LOCATION OF STATION | CALL SIGN | AM or FM | S/D | LOCATION OF STATION  |
|                                   |  |  |         |                     |           |          |     |  |
|                                   |  |  |         |                     |           |          |     |  |
|                                   |  |  |         |                     |           |          |     |  |
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| ORM SA3. PAGE 5.  |  |  |   |   |   |   |   |
|---|--|--|---|---|---|---|---|
| LEGAL NAME OF OWNER OF CABLE SYSTE  | M:   |  |   |   |   |   | Nome                                    |
| BLEDSOE TELEPHONE COC   | P CATV D   | )IV  |   |   | 3314  |   | Name                                    |
| SUBSTITUTE CARRIAGE:<br>In General: In space I, identify e<br>carried on a substitute basis du<br>authorizations. For a further exp<br>instructions.  | every nonne<br>Iring the ac  | etwork televisio<br>counting perio   | <i>n program</i> broadcast by<br>od, under specific prese   | / a <i>distant</i> s <sup>.</sup><br>nt and form  | er FCC rules, reg   | ulations, or  | Substitute<br>Carriage:                 |
| <ol> <li>SPECIAL STATEMENT COINT OF During the accounting period broadcast by a distant station Note: If your answer is "No", let log in block 2.</li> </ol>  | d, did your<br>on?   | cable system o   | carry, on a substitute ba   |   | ∐ Yes   | : 🖭 No  | Special<br>Statement and<br>Program Log |
| 2. LOG OF SUBSTITUTE PRO In General: List each substitut clear. If you need more space, Column 1: Give the title of period, was broadcast by a di station under certain FCC rule information. Do not use generat Love Lucy" or "NBA Basketbat Column 2: If the program w Column 3: Give the call sign Column 4: Give the broadcat the case of Mexican or Canadi Column 5: Give the month a first. Example: for May 7 give " Column 6: State the times w to the nearest five minutes. Es stated as "6:00–6:30 p.m." Column 7: Enter the letter "It to delete under FCC rules and gram was substituted for prog effect on October 19, 1976. | te program please atta every nonrestant stations, regulation and the state of the s | ach additional network televis on and that yo ions, or author es like "movie. Bulls." ast live, enter tition broadcas's location (the s, if any, the coen your system bestitute program carrieted program wis in effect duri | pages. sion program (substitute our cable system substitute rizations. See page (vi) s" or "basketball." List "Yes." Otherwise enter ting the substitute programmunity to which to mainly with which the carried the substitute am was carried by your ed by a system from 6 as substituted for program the accounting period | e program) ituted for t of the ger specific pro "No." Iram. he station is program. U cable syste :01:15 p.m ramming the | that, during the and programming the programming the programming the program titles, for each of the program titles, for each of the program titles, with the program titles, with the times at your system was lefter "P" if the | accounting of another for further example, "I FCC or, in the month accurately should be as required listed pro- |   |
| SUE   | BSTITUTE   | PROGRAM  |   |   | SUBSTITUTE<br>GE OCCURRED   | 7. REASON   |   |
| 1. TITLE OF PROGRAM   | 2. LIVE?<br>Yes or No  | 3. STATION'S<br>CALL SIGN  | 4. STATION'S LOCATION   | 5. MONTH<br>AND DAY   | 6. TIMES<br>FROM — TO   | FOR<br>DELETION   |   |
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LEGAL NAME OF OWNER OF CABLE SYSTEM:

#### BLEDSOE TELEPHONE COOP CATV DIV

3314

## J

Part-Time Carriage Log

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

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

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

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

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

#### DATES AND HOURS OF PART-TIME CARRIAGE

| L                              | WHEN CA                                 | RRIAGE OCCURRED                        |                 | WHEN CA                                 | RRIAGE OCCURRED                        |
|--------------------------------|---|--|-----------------|---|--|
| CALL SIGN                      | DATE                                    | HOURS<br>FROM TO                       | CALL SIGN       | DATE                                    | HOURS<br>FROM                          |
|                                |   |  |                 |   |  |
|                                |   | 2 annument                             |                 |   |  |
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| FORM :                                 | SA3. PAGE 7,   |   |
|--|--|---|
| LEGAL                                  | NAME OF OWNER OF CABLE SYSTEM:   | Nama  |
| BLE                                    | DSOE TELEPHONE COOP CATV DIV 3314  | Name  |
| Instru<br>all an<br>(as id             | DSS RECEIPTS ructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of mounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service dentified in space E) during the accounting period. For a further explanation of how to compute this amount, see   | K<br>Gross Receipts   |
| Gı                                     | e (vii) of the general instructions.  Pross receipts from subscribers for secondary transmission service(s)  Puring the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.  \$ 1,309,157.48  (Amount of gross receipts)   |   |
| Instr<br>• Co<br>• Co<br>• If y<br>fee | PYRIGHT ROYALTY AND FILING FEES ructions: Use the blocks in this space L to determine the royalty fee you owe: complete block 1, showing your minimum fee. complete block 2, showing whether your system carried any distant television stations. your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum e from block 1 on line 1 of block 4, and calculate the total royalty fee. your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. | Copyright<br>Royalty Fee  |
| ► If                                   | part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of lock 3 below.   |   |
| 3                                      | part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block below.  part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line  |   |
|  | in block 4 below.  |   |
| 1                                      | MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K  Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.  This is your minimum fee.  \$1,309,157.45  |   |
| Block<br>2                             | DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.   |   |
| Block<br>3                             | Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero   |   |
| Block<br>4                             | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee/3.75 fee from block 3, line 3, whichever is larger  |   |
|  | Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.  Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)  Line 4. FILING FEE:  TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add Lines 1, 2, 3 and 4 of block 4 and enter total here.  | Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing Division for the appropriate form for submitting the additional fees. |
|  | Remit this amount via <i>electronic payment</i> payable to <i>Register of Copyrights</i> . (See page (i) of the general instructions for more information.)  |   |

|  | LEGAL NAME OF OWNER OF CABLE SYSTEM:   |                             | Name                                   |
|--|--|-----------------------------|--|
| Name                                       | BLEDSOE TELEPHONE COOP CATV DIV  | 3314                        |  |
| M<br>Channels                              | CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried televito its subscribers and (2) the cable system's total number of activated channels, during the activated total number of channels on which the cable system carried television broadcast stations  2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services | counting pe                 | ast stations priod,                    |
| N<br>Individual to                         | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)  |                             |  |
| Be Contacted<br>for Further<br>Information | J. ROBBIN ROTHWELL Name  | 423-447-212<br>rea code)    | 21                                     |
|  | 338 CUMBERLAND AVE., P.O. BOX 609 Address(Number, street, rural route, apartment, or suite number)   |                             |  |
|  | PIKEVILLE, TN 37367<br>(City, town, state, zip)  |                             |  |
|  | Email (optional) Fax (optional)  |                             |  |
| 0  | <b>CERTIFICATION</b> (This statement of account must be certified and signed in accordance wit lations, as explained in the general instructions.)   | h Copyright                 | Office regu-                           |
| Certification                              | 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 id of space B; or  | lentified in li             | ne 1                                   |
|  | (Agent of owner other than corporation or partnership) I am the duly authorized agent the cable system as identified in line 1 of space B and that the owner is not a corporation  | of the owne<br>or partnersh | r of<br>ip; or                         |
|  | (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legowner of the cable system in line 1 of space B.  |                             |  |
|  | I have examined the statement of account and hereby declare under penalty of law that all contained herein are true, complete, and correct to the best of my knowledge, information made in good faith. [18 U.S.C. sec. 1001]  Handwritten signature:  Handwritten signature:  | i, and belief,              | of fact<br>and are                     |
|  | Handwritten signature: CHARLES H BORING  Typed or printed name:  |                             | ************                           |
|  | Typed of printed flame.  |                             | **********                             |
|  | Title: GENERAL MANAGER  (Title of official position held in corporation or par   |                             | 6.6.6.6.6.6.6.6.6.6.6.6.6.6.6.6.6.6.6. |
|  | Date: 2/33/2018  | e de en tomberen            |  |

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

| Of the Office of |  | 7Y   |
|--|--|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:   |  | Name   |
| BLEDSOE TELEPHONE COOP CATV DIV  | 3314   |  |
| SPECIAL STATEMENT CONCERNING GROSS REC The Satellite Home Viewer Act of 1988 amended Title 17, se lowing sentence:  "In determining the total number of subscribers and the service of providing secondary transmissions of primary b scribers and amounts collected from subscribers receiving For more information on when to exclude these amounts, so During the accounting period did the cable system exclude a made by satellite carriers to satellite dish owners?  NO  YES. Enter the total here and list the satellite carrier(s) b  | gross amounts paid to the cable system for the basic broadcast transmitters, the system shall not include subning secondary transmissions pursuant to section 119."  ee the note on page (vii) of the general instructions.  any amounts of gross receipts for secondary transmissions | Special<br>Statement<br>Concerning<br>Gross Receipts<br>Exclusions |
| Name -   | Name   |  |
| Mailing address  | Mailing address  |  |
|  |  |  |
|  |  |  |
| INTEREST ASSESSMENT  You must complete this worksheet for those royalty payment For an explanation of interest assessment, see page (viii) of  | f the general instructions.  | Q<br>Interest<br>Assessment  |
| Line 1 Enter the amount of late payment or underpaymen   | nt vaccourse results and a second  |  |
| Line 2 Multiply line 1 by the interest rate* and enter the state.  Line 3 Multiply line 2 by the number of days late and enter   | x%  um here x days  er the sum here x 0.00274  |  |
| Line 4 Multiply line 3 by 0.00274** enter here and on line space L, (page 7)   | 3, block 4,  (interest charge)  ov/licensing/interest-rate.pdf. For further assistance please  |  |
| contact the Licensing Division at (202) 707-8150 or <i>licen</i>   | sing@loc.gov.  |  |
| ** This is the decimal equivalent of 1/365, which is the inte  | erest assessment for one day late.   |  |
| NOTE: If you are filing this worksheet covering a statement please list below the owner, address, first community served filing.   | d, accounting period, and ID number as given in the original   |  |
| Owner  |  |  |
| / National   |  |  |
|  |  |  |
| Accounting period  ID number   |  | :  |

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

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

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

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

Each of the second, third, and fourth DSEs
The fifth and each additional DSE

0.701% of gross receipts
0.330% of gross receipts

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

- If any of the stations were partially distant:
- 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.
- For each subscriber group, calculate the total number of DSEs of that group's complement of stations.
- If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule: or

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

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

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

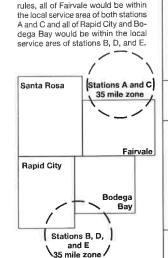
Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

- 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

| DSE<br>1.0<br>1.0<br>0.083<br>0.139<br>0.25 | Identification<br>CITY<br>Santa Rosa<br>Rapid City<br>Bodega Bay<br>Fairvale | OUTSIDE LOCAL SERVICE AREA OF Stations A, B, C, D, E Stations A and C Stations A and C Stations B, D, and E | GROSS RECEIPTS<br>FROM SUBSCRIBERS<br>\$310,000.00<br>100,000.00<br>70,000.00<br>120,000.00  |
|---|--|---|--|
| 2,412                                       |  | TOTAL GROSS RECEIT TO   | ψοσομοσισσ   |
|   | DSE<br>1.0<br>1.0<br>0.083<br>0.139  | DSE CITY 1.0 1.0 Santa Rosa 0.083 Rapid City 0.139 Bodega Bay 0.25 Fairvale                                 | DSE 1.0 OUTSIDE LOCAL SERVICE AREA OF Stations A, B, C, D, E Stations A and C Stations A and C Stations B, D, and E TOTAL GROSS RECEIPTS |

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6,384.00

| First Subscriber Gro<br>(Santa Rosa)  | oup  | Second Subscriber<br>(Rapid City and Bod                                    | <b>Group</b><br>lega Bay) |
|---|--|---|---------------------------|
| Gross receipts<br>DSEs<br>Base rate fee<br>\$310,000 x .01064 x<br>\$310,000 x .00701 x | \$310,000.00<br>2.472<br>\$6,497.20<br>1.0 = 3,298.40<br>1.472 =3,198.80 | Gross receipts DSEs Base rate fee \$170,000 x .01064 x \$170,000 x .00701 x |                           |
| Base rate fee   | \$6,497.20   | Base rate fee   | \$1,907.71                |

Third Subscriber Group
(Fairvale)

Gross receipts \$120,000.00
3 DSEs 1.389
1 Base rate fee \$1,604.03
\$120,000 x .01064 x 1.0 = 1,276.80
\$120,000 x .00701 x .389 = 327.23
1 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)

Enter the sum here and in line 1 of part 5 of this schedule.

1 BLEDSOE TELEPHONE COOP CATV DIV

3314

2

Computation of DSEs for Category "O" Stations

#### Instructions:

In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).

In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."

| CALL SIGN DS    | 35 | Children 22/12/2016 | 110000000000 |           |     |
|-----------------|----|---------------------|--------------|-----------|-----|
| Of the Williams | DE | CALL SIGN           | DSE          | CALL SIGN | DSE |
|                 |    |                     |              |           |     |
|                 |    |                     |              |           |     |
|                 |    |                     |              |           |     |

| Maria   | LEGAL NAME OF OWNER OF CABLE SYSTEM:   |  |  |  |                             |                |   |
|---|--|--|--|--|-----------------------------|----------------|---|
| Name  | BLEDSOE TELEPHONE COOP CATV DIV 3314   |  |  |  |                             |                |   |
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. The figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions.) |  |  |  |                             |                | nting period.<br>s figure must<br>ional station,<br>less than the |
| Capacity  | CATEGORY LAC STATIONS: COMPUTATION OF DSEs   |  |  |  |                             |                |   |
|   | 1. CALL<br>SIGN  | 2. NUMBER OF HOURS CARRIED BY SYSTEM   | 3. NUMBER<br>OF HOURS<br>STATION<br>ON AIR | 4. BASIS OF<br>CARRIAG<br>VALUE              | É VALUE                     |                |   |
|   |  | :  | '/! <del>!</del>                           |  | ×                           |                |   |
|   |  | ÷  |  | <u>.                                    </u> | <del>*</del>                |                |   |
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|   | ***************************************  |  |  | =  | x                           | :              |   |
|   |  | <u>:</u>   |  | =  | x                           | 8=0            |   |
| Computation of DSEs for Substitute-Basis Stations                                   | Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station:  • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and  • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.  Column 3: Enter the number of days in the calendar year: 365, except in a leap year.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions.)   |  |  |  |                             |                |   |
|   |  | SUBSTITU   |  |  | UTATION OF DS               |                |   |
|   | 1. CALL<br>SIGN  | 2. NUMBER 3. NUMOF OF DEPROGRAMS IN Y  | DAYS                                       | 1. CALL<br>SIGN                              | 2. NUMBER<br>OF<br>PROGRAMS |                | 4. DSE  |
|   |  | ·  |  |  |                             | ÷              | =   |
|   | 0.02-2-2-2-2-2   | <u>.</u>   | <u> </u>                                   |  |                             | •              | **************  |
|   |  | *  | =  |  |                             | . ÷ . <u> </u> | =   |
|   |  | · · · · · · · · · · · · · · · · · · ·  |  |  |                             | . †            | =<br><u></u><br>=   |
|   | Add the DSEs   | OF SUBSTITUTE-BASIS S<br>of each station.<br>Im here and in line 3 of part                                       |  | ·····•                                       | 0                           |                |   |
| <b>5</b> Total Number of DSEs   | number of DSE<br>1. Number of<br>2. Number of<br>3. Number of  | ER OF DSEs: Give the amous applicable to your system of DSEs from part 2 of DSEs from part 4 of DSEs from part 4 | h.   |  |                             |                | vide the total  |

| SE SCHEDU   | ILE. PAGE 13.          |  |                 |   |                              |   |                       |                             |  |
|---|------------------------|--|-----------------|---|------------------------------|---|-----------------------|-----------------------------|--|
| LEGAL NAME OF   | F OWNER OF CABLE SY    | /STEM:   |                 |   |                              |   |                       |                             | Name                                       |
| BLEDSOE   | TELEPHONE C            | OOP CATV I   | DIV             |   |                              |   | 3314                  |                             |  |
| <ul> <li>Instructions: Block A must be completed.</li> <li>In block A:</li> <li>If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.</li> <li>If your answer if "No," complete blocks B and C below.</li> </ul>  |                        |  |                 |   |                              |   |                       | age 16) of the              | 6 Computation of                           |
| BLOCK A: TELEVISION MARKETS   |                        |  |                 |   |                              |   |                       | 3.75 Fee                    |  |
| Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981?  Yes — Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7.  No—Complete blocks B and C below.   |                        |  |                 |   |                              |   |                       |                             |  |
|   |                        | BLOC   | K B: CAI        | BRIAGE OF PER                                     | MITTED                       | OSEs                                    |                       |                             |  |
| 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.)   |                        |  |                 |   |                              |   |                       | ations, see the             |  |
| Column 2:  BASIS OF PERMITTED CARRIAGE  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), 76.63(a) referring to 76.61(e)(1)  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:   | *(Note: For the        | for each distar<br>ose stations id<br>to determine | entified by     | ited in parts 2, 3, and<br>the letter "F" in colu | d 4 of the so<br>mn 2, you n | hedule.<br>iust comple                  | ete the worksheet o   | on page 14 of               |  |
| 1. CALL SIGN  | 2. PERMITTED<br>BASIS  | 3. DSE   | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS                             | 3. DSE                       | 1. CALL<br>SIGN                         | 2. PERMITTED<br>BASIS | 3. DSE                      |  |
|   |                        |  |                 |   |                              |   |                       | <del></del>                 |  |
|   |                        |  |                 |   |                              |   |                       |                             |  |
|   |                        |  |                 |   |                              |   |                       |                             |  |
|   |                        |  |                 |   |                              |   |                       |                             |  |
|   |                        |  |                 |   |                              | ,                                       | •                     | 0                           |  |
|   |                        | BL   | OCK C: (        | COMPUTATION                                       | OF 3.75 F                    | EE                                      |                       |                             |  |
| Line 1: Ente  | er the total number    | of DSEs from                                       | part 5 of th    | is schedule                                       |                              |   |                       | 0                           |  |
| Line 2: Ente  | er the sum of permi    | itted DSEs from                                    | n block B a     | bove  |                              |   |                       | 00                          |  |
|   |                        |  |                 | per of DSEs subject                               | to the 3.75                  | ate.                                    |                       |                             |  |
|   |                        |  |                 | rt 7 of this schedule                             |                              |   |                       | 0                           | Do any of the                              |
| Line 4: Ente  | er gross receipts fro  | om space K (p                                      | age 7)          |   |                              |   |                       | ),157. <b>4</b> 5<br>).0375 | DSEs represent partially permited/         |
| Line 5: Mult  | tiply line 4 by 0.037  | 75 and enter s                                     | um here,        |   |                              |   | ▶ \$ 49               | 093.41                      | partially non-<br>permitted                |
| Line 6: Ente  | er total number of [   | OSEs from line                                     | 3               |   |                              | • | 0                     | 00                          | carriage? If yes, see part 9 instructions. |
| Line 7: Mult  | tiply line 6 by line 5 | and enter her                                      | re and on lir   | ne 2, block 3, space                              | L (page 7)                   |   | ▶\$                   | 0                           |  |

| Name  | LEGAL NAME OF OWNER OF  | CABLE SYSTEM:                           |  |   |   |   |  |  |  |
|---|---|---|--|---|---|---|--|--|--|
| Wante   | BLEDSOE TELEPHONE COOP CATV DIV 3314  |   |  |   |   |   |  |  |  |
| Worksheet for<br>Computating<br>the DSE<br>Schedule for<br>Permitted<br>Part-Time and<br>Substitute<br>Carriage | 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 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 identified by the letter "F" in column 2 of part 6 of the DSE schedule.  Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.  Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).  Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:  (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) |   |  |   |   |   |  |  |  |
|   |   |   |  | ON A DADT TIME AND  | CLIDOTITUTE DACIO                       |   |  |  |  |
|   |   |   |  | ON A PART-TIME AND  |   |   |  |  |  |
|   | 1. CALL<br>SIGN   | 2. PRIOR<br>DSE                         | 3. ACCOUNTING<br>PERIOD                    | 4. BASIS OF<br>CARRIAGE   | 5. PRESENT<br>DSE                       | 6. PERMITTED<br>DSE                           |  |  |  |
|   | ·····   | *************************************** |  |   |   |   |  |  |  |
|   |   |   |  |   | *************************************** |   |  |  |  |
|   |   |   |  |   | 100000000000000000000000000000000000000 |   |  |  |  |
|   |   | •                                       |  |   |   |   |  |  |  |
|   |   |   |  |   | *************************************** |   |  |  |  |
|   |   |   |  |   |   |   |  |  |  |
|   |   |   |  |   |   |   |  |  |  |
|   |   |   |  |   |   |   |  |  |  |
|   |   |   |  |   |   |   |  |  |  |
|   |   |   |  |   |   |   |  |  |  |
| 7 Computation of the Syndicated   | Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.  BLOCK A: MAJOR TELEVISION MARKET   |   |  |   |   |   |  |  |  |
| Exclusivity<br>Surcharge  | Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981?      Yes—Complete blocks B and C . No—Proceed to part 8  |   |  |   |   |   |  |  |  |
|   | BLOCK B: Carriage   | e of VHF/Grade B C                      | Contour Stations                           | BLOCK C:  | Computation of Ex                       | empt DSEs                                     |  |  |  |
|   | Is any station listed in commercial VHF station or in part, over the cab  | n that places a grade                   | primary stream of a<br>B contour, in whole | Was any station listed<br>nity served by the cal<br>to former FCC rule 76 | ble system prior to M                   | arried in any commu-<br>arch 31, 1972? (refer |  |  |  |
|   | Yes—List each station   | n below with its approp                 | oriate permitted DSE                       | Yes — List each stati   | ion below with its appro                | ppriate permitted DSE                         |  |  |  |
|   | ■ No-Enter zero and   | proceed to part 8.                      |  | □No-Enter zero and  | d complete block D.                     |   |  |  |  |
|   | CALL SIGN   | DSE CALLS                               | IGN DSE                                    | CALL SIGN   | DSE CALL                                | SIGN DSE                                      |  |  |  |
|   |   |   |  |   |   |   |  |  |  |
|   | TOTAL DSEs  |   |  |   | TOTAL                                   | DSEs  |  |  |  |

| DOE SUI       | TEDULE, FAGE 13.   |                               |
|---------------|--|-------------------------------|
| LEGAL N       | AME OF OWNER OF CABLE SYSTEM:  | Name                          |
| BLED          | SOE TELEPHONE COOP CATV DIV 3314   | Hame                          |
|               | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE   | _                             |
| Section<br>1  | Enter the amount of gross receipts from space K (page 7)   | /                             |
| Section<br>2  | A. Enter the total DSEs from block B of part 7   | Computation of the Syndicated |
|               | B. Enter the total number of exempt DSEs from block C of part 7.   | Exclusivity<br>Surcharge      |
|               | 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.  |                               |
| • Is an       | y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below. No—Complete section 4 below.   |                               |
|               | SECTION 3: TOP 50 TELEVISION MARKET  |                               |
| Section<br>3a | • Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.  |                               |
|               | f 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 \$  |                               |
| 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 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   |                               |
|               | SECTION 4: SECOND 50 TELEVISION MARKET   |                               |
| Section<br>4a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  ☐ Yes—Complete part 9, of the Schedule.  ☐ No—Complete the following sections.  |                               |
|               | 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 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 in line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge   |                               |

| Name  | LEGAL NAME OF OWNER OF CABLE SYSTEM:   |   |  |  |  |  |  |  |  |
|---|--|---|--|--|--|--|--|--|--|
| Name  | BLEDSOE TELEPHONE COOP CATV DIV 3314   |   |  |  |  |  |  |  |  |
| Computation of the Syndicated Exclusivity Surcharge | Section 4b   | If the figure in section 2, line C is more than 4.000, compute your surcharge here and leaven.  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. 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. | \$<br>\$   |  |  |  |  |  |  |
| 8<br>Computation                                    | 6 was<br>In bl   | ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, be checked "Yes," use the total number of DSEs from part 5.  ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distaur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  | nt stations.   |  |  |  |  |  |  |
| Base Rate Fee                                       | blan<br><b>What i</b><br>were lo   | <ul> <li>If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank.</li> <li>What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.</li> </ul>   |  |  |  |  |  |  |  |
|   |  | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS   |  |  |  |  |  |  |  |
|   | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      \[ \text{Yes} - Complete part 9 of this schedule.} \]      \[ \text{No} - Complete the following sections.} \]  BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE |   |  |  |  |  |  |  |  |
|   | Section<br>1   | Enter the amount of gross receipts from space K (page 7)  | 1,309,157.50   |  |  |  |  |  |  |
|   | 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.)  | 0  |  |  |  |  |  |  |
|   | Section 3  | If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave sect NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter  A. Enter 0.01064 of gross receipts (the amount in section 1)   | ion 4 blank.<br>the result on line A below.<br>13,929.44 |  |  |  |  |  |  |
|   |  | (the figure in section 2) and enter here  | 0.00   |  |  |  |  |  |  |
|   |  | E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee   | \$ 13,929.44   |  |  |  |  |  |  |

| SE SCI    | HEDULE, PAGE 17,  |   |
|-----------|---|---|
| LEGAL N   | IAME OF OWNER OF CABLE SYSTEM:  | N   |
| BLED      | SOE TELEPHONE COOP CATV DIV 3314  | Name  |
| Section 4 | If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.  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. Multiply line B by 3.000 and enter here \$  D. Enter 0.00330 of gross receipts (the amount in section 1) \$  E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here \$  F. Multiply line D by line E and enter here \$  G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee . | 8<br>Computation<br>of<br>Base Rate Fee           |
| shall in  | RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals astead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel as in Space G.  | 9   |
| receipt   | eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude a strom subscribers located within the station's local service area, from your system's total gross receipts. To take advantage exclusion, you must:   | Computation of                                    |
| station   | Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. <b>Next:</b> Treat each subscriber group as if it were a separate cable system. Determine the number is and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each  | Base Rate Fee<br>and<br>Syndicated<br>Exclusivity |
| -         | : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.  | Surcharge<br>for                                  |
| must al   | If any portion of your cable system is located within the top 100 television market and the station is <i>not exempt in part 7</i> , you lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. ver, if your cable system is wholly located outside all major television markets, complete block A only.  | Partially Distant Stations, and                   |
| How to    | o Identify a Subscriber Group for Partially Distant Stations  | for Partially                                     |

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.
- If:
- 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.
- 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 recipts 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.

Permitted **Stations** 

| I .   | OF CABLE SYST                       | EM:         |  |                     |                        |               |     | Name                 |
|---|-------------------------------------|-------------|--|---------------------|------------------------|---------------|-----|----------------------|
| BLEDSOE TELEF                               | PHONE CO                            | OP CATV DIV |  |                     |                        | 3314          |     | Name                 |
|   | CK A: COM                           |             | ASE RAT  | E FEES FOR EACH     |                        | RIBER GROUP   |     | 0                    |
| COMMUNITY/ AREA                             |                                     |             | THE EXECUTE OF THE PARTY OF THE | COMMUNITY/ AREA     |                        |               |     | 9                    |
|   |                                     |             | *********  | *************       |                        |               |     | Computation          |
| CALL SIGN                                   | DSE                                 | CALL SIGN   | DSE  | CALL SIGN           | DSE                    | CALL SIGN     | DSE | of<br>Base Rate Fee  |
|   | <u> </u>                            |             | -  |                     |                        |               |     | and<br>Syndicated    |
|   |                                     |             |  |                     |                        |               |     | Exclusivity          |
|   |                                     |             | <u> </u>   |                     |                        |               |     | Surcharge<br>for     |
|   |                                     |             |  |                     |                        |               |     | Partially<br>Distant |
|   |                                     |             |  |                     |                        |               |     | Stations             |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
| FT1744-GT154-T1774-                         |                                     |             | Total Paragraph  | ****************    | ***********            |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
| Total DSEs                                  | 34:50:00 + 54: + 50:54/4/4/14/14/14 | ((*)/=      |  | Total DSEs          | - 500,000 - 12,500,000 | 200           |     |                      |
| Gross Receipts First                        | Group                               | <b>\$</b>   |  | Gross Receipts Seco | ond Group              | \$            |     |                      |
|   | •                                   |             |  | ·                   |                        | ſ             |     |                      |
| Base Rate Fee First                         | t Group                             | <b>.s</b>   |  | Base Rate Fee Seco  | ond Group              | <b>s</b> ,    |     |                      |
| THIF  | RD SUBSCRI                          | BER GROUP   |  | FOU                 | RTH SUBSC              | RIBER GROUP   |     |                      |
| COMMUNITY/ AREA                             |                                     |             |  |                     | THEODEON               | IIDEI COITOOI |     |                      |
| COMMONT IT THE                              | 4                                   |             |  | COMMUNITY/ AREA     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     | -                    |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     | -                    |
|   |                                     |             |  |                     |                        |               |     | Ē                    |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     | ÷                    |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
|   |                                     |             |  |                     |                        |               |     |                      |
| CALL SIGN                                   | DSE                                 | CALL SIGN   |  | CALL SIGN           | DSE                    | CALL SIGN     |     |                      |
| CALL SIGN                                   | DSE                                 | CALL SIGN   |  | Total DSEs          | DSE                    | CALL SIGN     |     |                      |
| CALL SIGN                                   | DSE                                 | CALL SIGN   |  | CALL SIGN           | DSE                    | CALL SIGN     |     |                      |
| CALL SIGN  Total DSEs  Gross Receipts Third | DSE                                 | CALL SIGN   |  | Total DSEs          | DSE                    | CALL SIGN     | DSE |                      |
| CALL SIGN                                   | DSE                                 | CALL SIGN   |  | Total DSEs          | DSE                    | CALL SIGN     | DSE |                      |

|                                    | T   |  |  |  |  |  |  |  |  |
|------------------------------------|---|--|--|--|--|--|--|--|--|
| Name                               | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | 2244   |  |  |  |  |  |  |  |
|                                    | BLEDSOE TELEPHONE COOP CATV DIV   | 3314   |  |  |  |  |  |  |  |
|                                    | BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI  |  |  |  |  |  |  |  |  |
| 9                                  | If your cable system is located within a top 100 television market Syndicated Exclusivity Surcharge. Indicate which major television by section 76.5 of FCC rules in effect on June 24, 1981:   | and the station is <i>not exempt</i> in Part 7, you must <i>also</i> compute a market any portion of your cable system is located in as defined    |  |  |  |  |  |  |  |
| Computation<br>of<br>Base Rate Fee | First 50 major television market  Second 50 major television market  INSTRUCTIONS:  |  |  |  |  |  |  |  |  |
| and<br>Syndicated                  | Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.  |  |  |  |  |  |  |  |  |
| Exclusivity<br>Surcharge           | Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.  |  |  |  |  |  |  |  |  |
| for<br>Partially                   | Step 3: In line 3, subtract line 2 from line 1. This is the total numb  |  |  |  |  |  |  |  |  |
| Distant<br>Stations                | Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. |  |  |  |  |  |  |  |  |
|                                    | ÷   |  |  |  |  |  |  |  |  |
|                                    | 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: Subract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  | Line 3: Subract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |  |  |  |  |  |  |  |
|                                    | SYNDICATED EXCLUSIVITY SURCHARGE First Group\$  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group\$  |  |  |  |  |  |  |  |
|                                    | 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: Subract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  | Line 3: Subract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |  |  |  |  |  |  |  |
|                                    | SYNDICATED EXCLUSIVITY SURCHARGE Third Group\$  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group\$  |  |  |  |  |  |  |  |
|                                    | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fin the boxes above. Enter here and in block 4, line 2 of space L (p  | for each subscriber group as shown age 7)\$  |  |  |  |  |  |  |  |
|                                    |   |  |  |  |  |  |  |  |  |