# 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 COPYRIGI	HT OFFICE USE ONLY
DATE RECEIVED	AMOUNT
02/26/2018	\$ 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 il of the general instructions.

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (Check one of the boxes and fill in the year date.)								
Accounting Period	☐ January 1–June 30								
B	INSTRUCTIONS: Give the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.  In line 2, list any other 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. 40303								
	1 LEGAL NAME OF OWNER OF CABLE SYSTEM:								
	STARVISION, INC. dba Star Communications 40303								
	2 BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):								
	3 MAILING ADDRESS OF OWNER OF CABLE SYSTEM:								
	PO Box 319 (Number, street, rural route, apartment, or suite number)								
	Clinton, NC 28329 (City, town, state, zip)								
С	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:								
·									
	2 (Number, streat, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b wit all communities.								
Area Served	CITY OR TOWN STATE								
First ▶	SAMPSON COUNTY NC								
Community	Below is a sample for reporting communities if you report multiple channel line-ups in Space G.								
1	CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP#								
Sample >	Allance 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:									
STARVISION, INC. dba Star Communications 40303									
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.									
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
If all communities receive the same complement of television broadcast stations ( all communities with the channel line-up "A" in the appropriate column below on on a partially distant or partially permitted basis in the DSE Schedule, associate designated by a number (based on your reporting from Part 9).	r leave the co e each relevan	lumn blank. If you t community with a	report any stations a subscriber group,	·					
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 reportion (based on your reporting from Part 9 of the DSE Schedule) in the appropriate col	ng) and a subs	asis, associate eact scriber group desig	n community with a nated by a number						
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
HALLS	NC	A	1	<b>⋖</b> First					
CLINTON	NC	A	1	Community					
GARLAND	NC	Α	1	_					
HOLLOW		В	3	,					
HONEYCUTT	1	<u>A</u>	1						
MINGO	NC	A	1						
ROCKFISH	NC	Α	1						
SALEMBURG		A	1,						
SAMPSON CO	1	Α	1						
SAMPSON W	NC	A	1						
BEAVERDAM	NO.	A	1						
	110	Α							
TURKEY WESTERN PRONG		В							
WESTERN FRONS	1		T						
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40303 STARVISION, INC. dba Star Communications SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of the cable E 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 Secondary 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 Transmission Service: Subdown by categories of secondary transmission service. In general, you can compute the number of subscribers in scribers and each category by counting the number of billings in that category (the number of persons or organizations charged Rates 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 2 BLOCK 1 NO. OF NO. OF SUBSCRIBERS RATE RATE CATEGORY OF SERVICE CATEGORY OF SERVICE SUBSCRIBERS Residential: \$24.00 Service to first set Service to additional set(s) FM radio (if separate rate) Motel, hotel Commercial 4,302 \$4,95 Converter Residential Non-residential 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 F 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 Services amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, Other Than enter only the letters "PP" in the rate column. Secondary Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Transmissions: Block 2: List any services that your cable system furnished or offered during the accounting period that were not Rates 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. BLOCK 1 BLOCK 2 RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Installation: Non-residential **Continuing Services:** \$45.00 **EXPANDED** · Pav cable · Motel, hotel \$15.39 ULTRA · Pay cable - add'l channel Commercial HBO \$16.75 · Pay cable Fire protection CINEMAX \$15.50 Pav cable—add'l channel Burglar protection SHOWTIME \$16.75 Fire protection Installation: Residential \$0.00 · Burglar protection STARZ \$15.50 First set \$10.95 Other services: Additional set(s) \$25.00 \$13.12 ·FM radio (if separate rate) Reconnect

Disconnect

Outlet relocation

Move to new address

. . . . . .

Converter

\$0.00

\$26.49

\$26.49

LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 40303 STARVISION, INC. dba Star Communications 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 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.

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.

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.

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.

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, identify the line-up in the far right column here in Space G based on your channel line-up reported in Space D. Use a separate space G for each channel line-up.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6, LOCATION OF STATION
WECT	44	N	NO		WILMINGTON, NC
WFPX - DT	36	I	NO		FAYETTEVILLE, NC
WLFL - DT	27	1	NO		RALEIGH, NC
WRDC - DT	28	1	NO		DURHAM, NC
WUVC - DT	38	1	NO		FAYETTEVILLE, NC
WUNU - DT	31	E	NO		LUMBERTON, NC
WRAY - DT	42		NO		WILSON, NC
WNCN - DT	17	N	NO		GOLDSBORO, NC
WRAL - DT	5	N	NO		RALEIGH, NC
WRAZ - DT	49	1	NO		RALEIGH, NC
WTVD - DT	11	N	NO		DURHAM, NC
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**Primary** Transmitters: Television

> Channel Line-Up

> > Α

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Name

#### 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 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.

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.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex-

planation of local service area, see page (v) of the general instructions.

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.

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, identify the line-up in the far right column here in Space G based on your channel line-up reported in Space D. Use a separate space G for each channel line-up.

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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
WECT	44	N	NO		WILMINGTON, NC
WFPX - DT	36	I	NO		FAYETTEVILLE, NC
WLFL - DT	27	ı	YES	0	RALEIGH, NC
WRDC - DT	28	ı	YES	0	DURHAM, NC
WUVC - DT	38	1	YES	0	FAYETTEVILLE, NC
WUNU - DT	31	E	NO		LUMBERTON, CN
WRAY - DT	42	I	YES	0	WILSON, NC
WSFX - DT	26		NO		WILMINGTON, NC
WWAY 3.3	46	I	NO		WILMINGTON, NC
WILM - LP	40	N	YES	0	WILMINGTON, NC
				·	

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Primary Transmitters: Television

Channel Line-Up

В

Name	LEGAL NAME OF C							10000		
	STARVISION	N, INC. dba S	Star Co	ommunications		40303				
H	In General: L all-band basi Special Instr	PRIMARY TRANSMITTERS: RADIO  n General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.  Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally eceivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected,								
ransmitters: Radio	on the basis of For detailed in Column 1: Column 2: Column 3: signal, indica Column 4:	of monitoring information ald information ald information ald information ald information information ald info	, to be cout the call si ner the station acing a	received at the headend, we here the Copyright Office regul gn of each station carried. It is station is AM or FM. It is signal was electronically a check mark in the "S/D" of location (the community to if any, the community with the state of the community of the state of the community with the community with the state of the community with the communit	ith the system's ations on this p processed by t olumn. which the stat	FM antenna oint, see pag the cable systion is license	i, durii je (vi) i stem a ed by	ng certain stated interval of the general instruction as a separate and discre		
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION		
	WCLN	AM		CLINTON, NC						
	WCLN	FM	-	FAYETTEVILLE, NC						
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LEGAL NAME OF OWNER OF CABLE SYSTEM:  STARVISION INC. dba Star Communications 40303									
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (vi) of the general instructions.									
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.									
2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast 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).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.									
SUB	STITUTE I	PROGRAM			SUBSTI GE OCCI		7, REASON FOR		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5, MONTH AND DAY	6. TIN FROM -		DELETION	-	
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							FORM SA3. P	AGE 6.	
	LEGAL NAME OF OWNER	R OF CABLE SYSTEM:							
Name	STARVISION, INC. dba Star Communications 40303								
Part-Time Carriage Log	time carriage due hours your syster Column 1 (Ca column 5 of space Column 2 (Da curred during the "4/10."  State the startiof the television "app." Example	space ties in we to lack of active mearried that sill sign): Give the ce G.  Ites and hours accounting perhand day where ing and ending the station's broster.	ith column 5 of spa ated channel capaci tation. If you need n e call sign of every of of carriage): For earlied. In the carriage occurriations of carriage to tadcast day, you mand at the same at the horizontal three same at the same a	ity, you a nore spa distant a ach stal red. Use the near y give a	are required to cace, please attacestation whose batton, list the date numerals, with test quarter hour, in approximate of	omplete this log gich additional page asis of carriage your sand hours when the month first. Example to any case where anding hour, follow	iving the total dates is. u identified by "LA n part-time carriag kample: for April 10 e carriage ran to the wed by the abbrev	s and C" in e oc- give e end iation	
			DATES AND HOU	JRS OF	PART-TIME CAF	RRIAGE			
		WHEN CA	RRIAGE OCCURRE	D.		WHEN CAP	RRIAGE OCCURRE	ĒD	
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LEGAL,N	NAME OF OWNER OF CABLE SYSTEM:	Name
STAF	RVISION, INC. dba Star Communications 40303	
Instru all am (as ide page Gre du	SS RECEIPTS Juctions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of founts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service entified in space E) during the accounting period. For a further explanation of how to compute this amount, see (vii) of the general instructions.  OSS receipts from subscribers for secondary transmission service(s) aring the accounting period.  CHARANT: You must complete a statement in space P concerning gross receipts.  (Amount of gross receipts)	K Gross Receipts
· Co · Co · If y fee · If v	PYRIGHT ROYALTY AND FILING FEES Juctions: Use the blocks in this space L to determine the royalty fee you owe: Implete block 1, showing your minimum fee. Implete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum of from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule companying this form and attach the schedule to your statement of account.	Copyright Royalty Fee
	part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of ock 3 below.	
►  f; 3   ►  f	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.	
Block 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.	
Block 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.   No—Leave block 3 below blank and complete line 1, block 4.	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	
	schedule. If none, enter zero  Line 3. Add lines 1 and 2 and enter here  \$ 2,057.00	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee/3.75 fee from block 3, line 3, whichever is larger	
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. \$ 0.00	Cable systems submitting additional deposits under
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) \$ 0.00  Line 4. FILING FEE: \$ 725.00	Section 111(d)(7) should contact the Licensing
	TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add Lines 1, 2, 3 and 4 of block 4 and enter total here	Division for the appropriate form for submitting the
	Remit this amount via electronic payment payable to Register of Copyrights. (See page (i) of the general instructions for more information.)	additional fees.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:		Name
Name	STARVISION, INC. dba Star Communications	40303	Ivallie
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried telev to its subscribers and (2) the cable system's total number of activated channels, during the activated channels.	ision broadc ecounting pe	ast stations riod.
Channels	Enter the total number of channels on which the cable system carried television broadcast stations		14
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services		300
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)		
Individual to Be Contacted for Further Information	Name lelephone	910-564-787 rea code)	72
	PO Box 319 Address		
	Clinton, NC 28329 (City, town, state, zip)		
	Email (optional) Fax (optional)		
0	<b>CERTIFICATION</b> (This statement of account must be certified and signed in accordance will lations, as explained in the general instructions.)	th 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 it of space B; or	dentified 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	or partnersh	ip; or
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the le owner of the cable system in line 1 of space B.	gal entity ide	entified as
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that a contained herein are true, complete, and correct to the best of my knowledge, information made in good faith. [18 U.S.C. sec. 1001]</li> </ul>	ll statements n, and belief,	of fact and are
	Handwritten signature:		
	Typed or printed name:		
1	Title: EVP & COO  (Title of official position held in corporation or pa	urtnership)	
	Date:		

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:		Name				
STARVISION, INC. dba Star Communications	40303	1441116				
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."						
For more information on when to exclude these amounts, s		Concerning Gross Receipts Exclusions				
During the accounting period did the cable system exclude made by satellite carriers to satellite dish owners?	any amounts of gross receipts for secondary transmissions					
YES. Enter the total here and list the satellite carrier(s) t	below \$					
NameMailing address	Name					
WINDOW A COPOCITIVE	Ш					
INTEREST ASSESSMENT  You must complete this worksheet for those royalty paymer For an explanation of interest assessment, see page (viii) of Line 1 Enter the amount of late payment or underpayment	\$	Q Interest Assessment				
	x%					
Line 2 Multiply line 1 by the interest rate* and enter the s	sum here	Parameter Control of the Control of				
Line 3 Multiply line 2 by the number of days late and en	ter the sum here	and a second a second and a second a second and a second a second and a second and a second and a second and				
Line 4 Multiply line 3 by 0.00274** enter here and on line space L, (page 7)	e 3, block 4, \$					
•	(interest charge)					
*To view the interest rate chart click on www.copyright.g contact the Licensing Division at (202) 707-8150 or lice.	gov/licensing/interest-rate.pdf. For further assistance please ansing@loc.gov.					
** This is the decimal equivalent of 1/365, which is the int	terest assessment for one day late.					
NOTE: If you are filing this worksheet covering a statem please list below the owner, address, first community serve filing.	nent of account already submitted to the Copyright Office, ed, accounting period, and ID number as given in the original					
OwnerAddress						
First community served						
First community served		-				
ID number		1				

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (Pil) requested on this form in order to process your statement of account. Pil is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing Pil, 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 Pil 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

1.054% of gross receipts
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:
- 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.
- 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.

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.

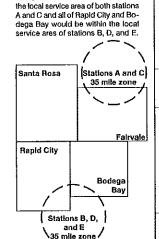
Rounding Off DSEs. in computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

- 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



rules, all of Fairvale would be within

Distant Stations Ca	arried		of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1,0	Santa Rosa	Stations A. B. C. D .E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2,472		TOTAL GROSS RECEIPTS	\$600,000.00
Minimum Fee Total Gross Receipts			\$600,000.00	

Minimum Fee Total Gross Heceipts	\$600,000.00
•	x .01064
	\$6,384.00

First Subscriber Gre (Santa Rosa)	oup	Second Subscribe (Rapid City and Bo		Third Subscriber (Fairvale)	Group
Gross receipts DSEs Base rate fee \$310,000 x .01064 x \$310,000 x .00701 x		Gross receipts DSEs Base rate fee \$170,000 x .01064 \$170,000 x .00701		Gross receipts DSEs Base rate fee \$120,000 x .0106 \$120,000 x .0070	
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)

LEGAL NAME OF OWNER OF CABLE SYSTEM:
STARVISION, INC. dba Star Communications

40303

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."

		CATEGORY "O" STA	TIONS: DSE	3	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
WUVC - DT	1.0	WRAY - DT	1.0		
WILM - DT	.25	WRDC - DT	1.0		
WLFL - DT	1.0				

#### SUM OF DSEs OF CATEGORY "O" STATIONS:

Add the DSEs of each station.

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

4.25

	LEGAL NAME OF OW	NER OF CABLE SYSTEM:				
Name	STARVISION,	INC. dba Star Commun	ications			40303
Gomputation of DSEs for Stations Carried Part Time Due to Lack of Activated	Column 2: F figure should co Column 3: F Column 4: E be carried out a Column 5: F give the type-va	the call sign of all distant sign each station, give the number of the information acceptance of the topical the figure in column the topical the the third decimal or each independent statiouture as ".25."	umber of hours you ion given in space that number of hours 2 by the figure in copoint. This is the "bn, give the "type-vand by the figure in	r cable system carried. Calculate only one that the station broadlumn 3, and give the asis of carriage value lue" as "1.0." For each column 5, and give the systems of the column 5.	ed the station during the DSE for each station. Added to the air during the air during the air during the air during the station. The the station is the result in column 6.	ring the accounting period. column 4. This figure must mercial educational station, . Round to no less than the
Channel Capacity		CATEGO	RY LAC STATIC	NS: COMPUTAT	ION OF DSEs	
оприску	1. CALL SIGN	2. NUMBER OF HOURS CARRIED BY SYSTEM	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	6. DSE
			h	, = . <u></u>	X	
					X	
			t		X	
					x	=
			•		x	=
				=	×	
		•	+	= -	X	
	Add the DSEs of Enter the su	m here and in line 2 of part	5 of this schedule,	page 5, the Log of S	ubstitute Programs) if	that station:
Computation of DSEs for Substitute-Basis Stations	Was carried tilons in effer broadcast c space I).     Column 2: I at your option.     Column 3: I Column 4: I	by your system in substitu- ct on October 19, 1976 (as one or more live, nonnetwork For each station give the nu This figure should corresponders the number of days in	tion for a program shown by the letter k programs during umber of live, nonne ond with the informathe calendar year:  by the figure in co	that your system was "P" in column 7 of s that optional carriag stwork programs carr ation in space I. 365, except in a lear lumn 3, and give the	s permitted to delete upace I); and le (as shown by the wied in substitution for pear.  Tresuit in column 4. Ro	word "Yes" in column 2 of programs that were deleted bund to no less than the third
		SUBSTITU	ITE-BASIS STA	TIONS: COMPU	TATION OF DSES	
	1. CALL SIGN	2. NUMBER 3. NU OF OF PROGRAMS IN )	<b>I</b>		2. NUMBER OF PROGRAMS	3. NUMBER 4. DSE OF DAYS IN YEAR
		. <del></del> † <del></del>	<del></del> = <del></del>	<del></del>    ·	÷ <del></del>	
					[ •	=
		**************************************	=	i I	-	=
	1	÷	=	<b>I</b> I	1 +	·
		÷	=		· ·	· <u>=</u>
	Add the DSEs	OF SUBSTITUTE-BASIS of each station. Im here and in line 3 of par		·····•		
5	number of DSE	ER OF DSEs: Give the amount of DSEs from part 2	n.			add them to provide the total
Total Number	2 Number	of DSEs from part 3				
of DSEs	3. Number	of DSEs from part 4······		****************		
		•				
	TOTAL NU	MBER OF DSEs			·····	4.25

LEGAL NAME OF OWNER OF CABLE SYSTEM:					Name				
STARVIS	ION, INC. dba Sta	r Communic	ations				40303		Manie
<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>						6 Computation of			
			BLOCK A	: TELEVISION M	ARKETS				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	RRIAGE OF PER	MITTED I	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:  Enter the appropriate letter indicating the basis on which you carried a permitted station.									
Column 2: BASIS OF PERMITTI CARRIAGI	(Note the FCC ED A Stations c 76.61(b)(c)	C rules and reg arried pursuan I	ulations cit t to the FC	ed below pertain to C market quota rules kk) (76.59(d)(1), 76.6	those in effe s (76.57, 76.	ect on June .59(b), 76.6	e 24, 1981.) i1(b)(c), 76.63(a) refe	erring to	ПУПС
	C Noncomm D Grandfath instruction E Carried pu 'F A station p G Commercial	erical education of station (7 as for DSE schursuant to indicate or carrial UHF station terical UHF station	onal station 6.65) (see pedule). ridual waive led on a pa within grad	(76.59(c), 76.61(d), paragraph regarding or of FCC rules (76.7) rt-time or substitute de-B contour, [76.59	76.63(a) refe substitution ) basis prior	erring to 76 of grandfa to June 25	s.61(d)] athered stations in th , 1981		HALLS
Column 3:	O Other List the DSE *(Note: For the		it station lis	st stream. ted in parts 2, 3, and the letter "F" in colui			ete the worksheet o	n page 14 of	
			<u> </u>		<u> </u>			I	
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>	<del>*************************************</del>		<u></u>	' <u></u>	ļ	
	·			<u> </u>			· <u>• • • • • • • • • • • • • • • • • • •</u>		
	· <u>·····</u>				<u></u>				
	· <u></u>				<u></u>				
<u></u>	· <u>*******************</u>	<u> </u>			1	-   -   -   -   -   -   -   -   -		1	
		DI.	OCK C+ (	COMPUTATION (	OE 2 75 E				
		BL	OUR U. L	<u>JOIVIPU IATION (</u>	<u> </u>	EC			
Line 1: En	ter the total number	of DSEs from	part 5 of th	is schedule		•••••			
Line 2: En	ter the sum of perm	itted DSEs fror	n block B a	bove					
				per of DSEs subject t rt 7 of this schedule				· 	Do any of the
Line 4: En	ter gross receipts fro	om space K (p	age 7)	••••••				).0375	DSEs represent partially permited/
Line 5: Mu	ultiply line 4 by 0.037	75 and enter so	ım here			************	Φ.		partially non- permitted
Line 6: En	ter total number of (	OSEs from line	3		•••••	*********			carriage?  If yes, see part 9 instructions.
Line 7: Mu	ultiply line 6 by line 5	and enter her	e and on lir	ne 2, block 3, space	L (page 7)	***********	<b>&gt;</b>	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM:		Name			
STARVISION, INC. dba Star Communications 40303					
<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, (paschedule.</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?  Tyes — Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7.  No—Complete blocks B and C below.					
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  CARRIA		WESTERN PRONG			
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 76.4  M Retransmission of a distant multicast stream.  O Other					
Column 3: List the DSE for each distant station listed in parts 2, 3, and 4 of the schedule.  '(Note: For those stations identified by the letter "F" in column 2, you must complete the worksheet of this schedule to determine the DSE.)	on page 14 of				
1. CALL SIGN 2. PERMITTED BASIS 1. CALL SIGN BASIS 3. DSE 1. CALL SIGN BASIS 2. PERMITTED BASIS 1. CALL SIGN BASIS	3. DSE				
	, <u></u>				
	· <del></del>				
	······	<u>.  </u>			
·					
BLOCK C: COMPUTATION OF 3.75 FEE					
Line 1: Enter the total number of DSEs from part 5 of this schedule					
Line 2: Enter the sum of permitted DSEs from block B above					
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate.  (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule)		Do any of the			
	0.0375	DSEs represent partially permited/			
Line 5: Multiply line 4 by 0.0375 and enter sum here.		partially non- permitted carriage?			
Line 6: Enter total number of DSEs from line 3		If yes, see part 9 instructions.			
Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7)	0.00				

LEGAL NAME	OF OWNER OF CABLE S	YSTEM;							Name
STARVISI	ON, INC. dba St	ar Communic	ations				40303		
in block A:  • If your as schedule		e the remaind		nd part 7 of the DSf	E schedule l	blank and c	complete part 8, (pa	ige 16) of the	6 Computation of
				TELEVISION M	ARKETS				3.75 Fee
tions in effe	ect on June 24, 198	31? of the schedule	e—DO NOT	nd smaller markets a				s and regula-	
				RRIAGE OF PER	MITTED I	DSFs			
Column 1: CALL SIG	N carry under l instructions Satellite Tele	signs of distar FCC rules and for the DSE So vision Extensi	nt stations ils regulations p hedule. ( <b>Not</b> on and Local	ted in part 2, 3, and orior to June 25, 198 e: The letter M below ism Act of 2010.) ne basis on which yo	I 4 of this s 1. For furthe v refers to a	chedule tha er explanati n exempt m	ion of permitted stated state in the state of the state o	tions, see the	
Column 2: BASIS OF PERMITTI	(Note the FC ED A Stations	C rules and re carried pursua	aulations cit	ed below pertain to to C market quota rules	those in effe	ect on June	24, 1981.)	rring to	
CARRIAGE	B Specialty C Noncomi D Grandfat instructic E Carried p *F A station G Commer	vistation as det merical educal hered station ( ons for DSE so oursuant to ind	ilonal station 76.65) (see p hedule). Ividual walve rried on a pai on within grad	kk) (76.59(d)(1), 76.6 [76.59(c), 76.61(d), 7 aragraph regarding or of FCC rules (76.7] rt-time or substitute de-B contour, [76.59 at stream.	76.63(a) refe substitution ) basis prior	erring to 76 of grandfa to June 25,	.61(d)) thered stations in the		HOLLOW
Column 3:	List the DSE	for each distance fose stations lessed to determine	dentified by t	ted in parts 2, 3, and the letter "F" in colu	d 4 of the so mn 2, you n	chedule. nust compl	ete the worksheet o	n page 14 of	- Table
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3, DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WRAY	Α	1.0	.				· <u></u>		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·   · · · · · · · · · · ·				·		
								<u>,</u>	
	· <u>.,,</u>	<u> -                                   </u>	<u>.  </u>		<u></u>		· <u> </u>	· · · · · · · · · · · · · · · · · · ·	
		<u></u>	<u></u>					1	
							1.0		
		В	LOCK C: (	COMPUTATION	OF 3.75 F	EE			-
Line 1: Er	iter the total numbe	er of DSEs fror	n part 5 of th	ls schedule			···· <b>&gt;</b>		
	iter the sum of peri								
				per of DSEs subject art 7 of this schedule			>		Do any of the
Line 4: Er	nter gross receipts	from space K	(page 7)				<b>⊳</b> \$	0.0375	DSEs represent partially permited/
Line 5: M	uitiply line 4 by 0.0	375 and enter	sum here		************		<b>⊳</b>		partially non- permitted carriage?
Line 6: Er	nter total number o	f DSEs from lir	ne 3 <sub></sub>						If yes, see part 9 instructions.
Line 7: M	ultiply line 6 by line	e 5 and enter h	ere and on li	ne 2, block 3, space	L (page 7)	•••••	<b>&gt;</b>	0,00	

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:					
Name	STARVISION, INC.	STARVISION, INC. dba Star Communications 40303					
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried prior to Column 1: List the call Column 2: Indicate the Column 3: Indicate the Column 4: Indicate the (Note that the A-Part-tirm 76.59(d)  B-Late-ni 76.61(e)  S-Substitu general if Column 5: Indicate the Column 6: Compare the in block B, o	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.)  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)).  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.  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.  MPORTANT: 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 file in the Licensing Division.					
	F	PERMITTED DSE FO	R STATIONS CARRIED	ON A PART-TIME AND	SUBSTITUTE BASIS		
	1. CALL SIGN	2. PRIOR DSE	3. ACCOUNTING PERIOD	4. BASIS OF CARRIAGE	5. PRESENT DSE	6. PERMITTED DSE	
					, <del>, , , , , , , , , , , , , , , , , , </del>		
	<del></del> .		. <del></del>				
						-	
	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
7 Computation of the Syndicated Exclusivity Surcharge	If your answer is	s "Yes," complete blo s "No," leave blocks BL the cable system wi	ocks B and C, below. B and C blank and cor OCK A: MAJOR T	nplete part 8 of the DSI ELEVISION MARK levision market as defir ocks B and C . \	ET		
	BLOCK B: Carriag	e of VHF/Grade B	Contour Stations	BLOCK C	: Computation of I	Exempt DSEs	
	Is any station listed in commercial VHF static or in part, over the cat	on that places a grad	e primary stream of a le B contour, in whole		able system prior to l	carried in any commu- March 31, 1972? (refer	
	Yes — List each static	on below with its appr	opriate permitted DSE	Yes — List each sta	tion below with its app	propriate permitted DSE	
	■ No—Enter zero and	proceed to part 8.		■No-Enter zero ar	nd complete block D.		
	CALL SIGN	DSE CALL	SIGN DSE	CALL SIGN	DSE CAL	L SIGN DSE	
		TOTAL	DSEs 0		TOTA	AL DSEs 0	

STARVISION, INC. dba Star Communications 40303	
BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	7
Enter the amount of gross receipts from space K (page 7) \$ 929,914.00	1
Section 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 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 any 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	
* Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  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 If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	
3b 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 Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  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 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	

	LEGAL N	AME OF OWNER OF CABLE SYSTEM:	
Name	STAR	VISION, INC. dba Star Communications	40303
<b>7</b> 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 leave 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.	
Computation of Base Rate Fee	6 was In bl If you If you blant What	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, blochecked "Yes," use the total number of DSEs from part 5.  lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distanture answer is "No," compute your system's base rate fee in block B. Leave part 9 blank, our answer is "Yes" (that is, if you carried one or more partially distant stations), you must com	nt stations.  plete part 9. Leave block B below rried it, some of your subscribers
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIC	NS
HALLS	_	Yes—Complete part 9 of this schedule.  BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF	
	Section 1	Enter the amount of gross receipts from space K (page 7)	777,100.00
	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 section NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the 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)  Base Rate Fee	

Nama	LEGAL N	AME OF OWNER OF CABLE SYSTEM:
Name	STAR	VISION, INC. dba Star Communications 40303
<b>7</b> 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 leave section 4a blank.  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
8 Computation of Base Rate Fee	6 was In bl If yo If yo If yo blan What i were lo	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.  ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
WESTERN PRONG	ے ا	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  rour cable system retransmit the signals of any partially distant television stations during the accounting period?  Yes—Complete part 9 of this schedule.  BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE
	Section 2 Section 3	Enter the amount of gross receipts from space K (page 7)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:				
Name	STAR	VISION, INC. dba Star Communications 40303			
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.			
Computation		A. Enter 0,00300 of gross receipts (the amount in section 1)			
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)			
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here			
Guronargo		D. Enter 0.00089 of gross receipts (the amount in section 1)			
		E. Subtract 4,000 from the total DSEs (the figure on line C in section 2) and enter here			
		F. MultIply line D by line E and enter here			
		G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge			
8	6 was	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.			
Computation	1	ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.			
of Base Rate Fee	• If yo	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below			
	were lo	s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.			
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS			
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?			
Hollow		Yes—Complete part 9 of this schedule. No—Complete the following sections.			
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE			
	Section 1	Enter the amount of gross receipts from space K (page 7)			
	Section 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.)  1			
	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) \$ 1,422.00			
		B. Enter 0.00701 of gross receipts \$ 937.00 (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)  Base Rate Fee			
	1				

LEGAL NAME OF OWNER OF CABLE SYSTEM:  STARVISION, INC. dba Star Communications  40303							
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and	d leave section 3 bl	ank.	0			
4	A. Enter 0.01064 of gross receipts (the amount in section 1)	\$	208.00	8			
	B. Enter 0.00701 of gross receipts (the amount in section 1)	137.00		Computation of Base Rate Fee			
	C. Multiply line B by 3.000 and enter here		411.00				
	D. Enter 0.00330 of gross receipts (the amount in section 1)·····  \$	64.00					
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here	.25					
	F. Multiply line D by line E and enter here	·····• <u>\$</u>	16.00				
	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>,</b> \$.	635.00				

**IMPORTANT:** It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) If the cable system reported multiple channel line-ups in Space G.

In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must:

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.
- 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.

9

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

	OF CABLE SYSTE	•					-	Name
STARVISION, IN	C. dba Star C	Communications				40303		
BLOC	K A: COM	PUTATION OF B	ASE RAT	E FEES FOR EAC				
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP			9	
COMMUNITY/ AREA .HALLS.				COMMUNITY/ AREA WESTERN PRONG			_	
							Computation of	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
* * * * * * * * * * * * * * * * * * *				<u>wuvc</u>	1.0			and
	· <u></u>			WLFLWRAY	1.0		.	Syndicated Exclusivity
<u></u>				WRDC	1.0		· <del> </del>	Surcharge
<u> </u>				WILM	.25			for
				111177777777777777777777777777777777777				Partially Distant
							.	Stations
1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4		 						
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	·							
		-	·  <del></del>				1	
					.		.]	
						<u> </u>	]	-
Total DSFs		0.0	0	Total DSEs		4.25		
Total Data **********************************				11	I local Does		19,507	
Gross Receipts Fire	st Group		, , 100	Gross Hecelpts Se	cona Group			
							İ	
Base Rate Fee Firs	st Group	<b> \$</b>	0.00	Base Rate Fee Se	cond Group	\$	635	
							1	
THIRD SUBSCRIBER GROUP			FOURTH SUBSCRIBER GROUP					
								-
COMMUNITY/ ARE						RIBER GROUP		
COMMUNITY/ ARE	A HOLLOW		nee	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE				DSE	
COMMUNITY/ ARE	A HOLLOW		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	The state of the s
COMMUNITY/ ARE	DSE		DSE	COMMUNITY/ ARE	A · · · · · · · · · · · · · · · · · · ·		·······	The state of the s
CALL SIGN WRAY	DSE 1.0	CALL SIGN		CALL SIGN	DSE	CALL SIGN	·······	
COMMUNITY/ ARE	DSE 1.0	CALL SIGN		CALL SIGN  CALL SIGN  Total DSEs	DSE	CALL SIGN	·······	
CALL SIGN WRAY	DSE 1.0	CALL SIGN		COMMUNITY/ ARE	DSE	CALL SIGN	·······	
CALL SIGN WRAY  Total DSEs	DSE 1.0	CALL SIGN		CALL SIGN  CALL SIGN  Total DSEs	DSE	CALL SIGN	·······	
CALL SIGN WRAY  Total DSEs Gross Receipts Th	DSE 1.0	1.0 \$ 1:	33,306.00	COMMUNITY/ ARE	DSE DSE	CALL SIGN	DSE	
CALL SIGN WRAY  Total DSEs	DSE 1.0	1.0 \$ 1:		COMMUNITY/ ARE	DSE DSE	CALL SIGN	DSE	
CALL SIGN WRAY  Total DSEs Gross Receipts Th	DSE 1.0	1.0 \$ 1:	33,306.00	COMMUNITY/ ARE	DSE DSE	CALL SIGN	DSE	
CALL SIGN WRAY  Total DSEs  Gross Receipts Th  Base Rate Fee Th	DSE 1.0 Ind Group	1.0 \$ 1:	33,306.00 1,422.00	CALL SIGN  CALL SIGN  Total DSEs  Gross Receipts For Base Rate Fee For State Fee For S	DSE  DSE  Durth Group	CALL SIGN	DSE	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:						
Name	STARVISION, INC. dba Star Communications	40303					
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIV	/ITY SURCHARGE FOR EACH SUBSCRIBER GROUP					
9	If your cable system is located within a top 100 television market and the station is <i>not exempt</i> in Part 7, you must <i>also</i> compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:						
Computation of	First 50 major television market	Second 50 major television market					
Base Rate Fee	INSTRUCTIONS:						
and Syndicated Exclusivity	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.						
Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.						
for Partially	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.						
Distant Stations	Step 4: Compute the surcharge for each subscriber group using schedule. In making this computation, use gross receipts fi your actual calculations on this form.	the formula outlined in block D, section 3 or 4 of part 7 of this igures applicable to the particular group. You do not need to show					
	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	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	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 f in the boxes above. Enter here and in block 4, line 2 of space L (p.	for each subscriber group as shown age 7)					
		-					