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.

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are at the end of this form [pages (i)-(vii)].

FOR COPYRIG	HT OFFICE USE ONLY
DATE RECEIVED	AMOUNT
8-26-19	\$ ALLOCATION NUMBER

SA1-2 Short Form

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 Period	Já	January 1-June 30 2019 July 1-December 31 (Year) (Year)					
Bowner	Give corpo In If to a sing	orate title of the subsidiary, not that of line 2, list any other names under wh there were different owners during the gle statement of account and royalty	of the parent corporation sich the owner conducts accounting period, only fee payment covering the filing. If not, enter the sy	the business of the cable system. the owner on the last day of the accountin	ng period should submit		
	1	Connected Investments LLC					
	2	BUSINESS NAME(S) OF OWNER	- w	DIFFERENT):			
	3	MAILING ADDRESS OF OWNER PO Box 1820 (Number, street, rural route, apartment, or suit Conway, SC 29528 (City, town, state, zip)	e number)		- 0.0 11 (10.0)		
C	Instr	dy appear in space B. In line 2, give	the mailing address of the	entify the business and operation of the sys ee system, if different from the address giv	tern unless these names en in space B.		
System	1	identification of cable sys	STEM:				
	2	(Number, street, rural route, apartment, or suite (City, town, state, zip)		&*************************************	ydenecer		
D Area Served	in FC areas of sy Note:	CC rules: "a separate and distinct co s and including single, discrete uning stem identification hereafter known a	mmunity or municipal el orporated areas)." 47 C. as the "first community."	vstem. A "community" is the same as a "contity (including unincorporated communities. R. §76.5(dd). The first community that you Please use it as the first community on all the plants of mobile home parks should be reported.	es within unincorporated u list will serve as a form future filings.		
		CITY OR TOWN	STATE	CITY OR TOWN	STATE		
First ► Community	Lum	berton					
arevo A	-		4004,00	693			

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
Connected Investments LLC				
Instructions: List each separate community in FCC rules: "a separate and distinct com areas and including single, discrete unincor of system identification hereafter known as Note: Entities and properties such as hotels, a identified city.	munity or municipal ent porated areas)." 47 C.F.I the "first community." P	ity (including unincorporated communitles to a \$76.5(dd). The first community that you like see use it as the first community on all future.	within unincorporated st will serve as a form ure fillings.	D Area Served
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Red Springs	NC			
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Name

LEGAL NAME OF OWNER OF CABLE SYSTEM: Connected Investments LLC

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 SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE		
Residential: • Service to first set		× e y • • • • • •	SEE ATTACHMENT #1				
 Service to additional set(s) 	***************************************						
•FM radio (if separate rate)	1456 - 0.61 - 0.4(E) 5065 -		- E. E. SKASSER E. E. K.		134.61		
Motel, hotel	EXCEPT 101 (000 FEB.)				E000451355		
Commercial							
Converter					1		
 Residential 				er soongeeer (Figure			
 Nonresidential 	44.00						

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		Installation: Non-residential • Motel, hotel		SEE ATTACHMENT #2	. 1
 Pay cable—add'l channel 		Commercial			
 Fire protection 	AMARIA T	• Pay cable	ļ		-
 Burglar protection 		Pay cable-add'l channel		****.*********************************	
Installation: Residential	1	Fire protection	A		
• First set		 Burglar protection 	772.,		
 Additional set(s) 		Other Services:		1	
 FM radio (if separate rate) 		Reconnect	h	000000000000000000000000000000000000000	
 Converter 		Disconnect		E	
		Outlet relocation			
		Move to new address		y/F	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Connected Investments LLC

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 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 "WETA-2" as the same on the form. Simulcast stations must be reported in column 1 (list each station separately: for example, WETA-2-simulcast).

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions.

Column 4: 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.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WMBF-D2	32.2	N	MYRTLE BEACH
WFXB-D4	43.4	N-M	MYRTLE BEACH
WBTW-D2	13.2	N-M	FLORENCE
WHMC-D2	9.2	E	CONWAY
WMBF-D3	32.3	N-M	MYRTLE BEACH
WBTW-D1	13.1	N	FLORENCE
WGSC-CD	8.1	N	MURRELLS INLET
WFXB-D1	43.1	N	MYRTLE BEACH
WFXB-D3	43.3	N-M	MYRTLE BEACH
WHMC-D1	9.1	E	CONWAY
WMBF-D1	32.1	N-M	MYRTLE BEACH
WPDE-D1	15.1	N	FLORENCE
WPDE-D2	15.2	N	FLORENCE
WPDE-D3	15.3	N-M	FLORENCE
WPDE-D4	15.4	N-M	FLORENCE
WUNJ	39	E	WILMINGTON
WWMB-D1	21.1	N	FLORENCE
WWMB-D3	21.3	N-M	FLORENCE
WHMC-D3	9.3	E	CONWAY
WHMC-D4	9.4	E	CONWAY
WMBF-D4	32.4	N-M	MYRTLE BEACH
WBTW-D4	13.4	N-M	FLORENCE

G

Primary Transmitters: Television

		Company of the last of the las	AND A SHARE TOTAL AND				-maxile	FORM SA1-2. PAGE
Name	LEGAL NAME OF O							
	Connected	invesiment	S LLU					parameter control of the second secon
Н	PRIMARY 1 In General: L all-band basis	ist every rac	lio sta	: RADIO tion carried on a separate a ere generally receivable by y	nd discrete ba our cable syst	asis and list tem em during th	those ie acc	FM stations carried on an ounting period.
Primary ransmitters: Radio	receivable if (the basis of m detailed infor Column 1: Column 2: Column 3: signal, indica Column 4:	1) it is carried nonitoring, to mation abou led the carrier than carrier the carrier the carrier the carrier the carrier the carrier the carrier than carr	by the be received to the the the call signer the station action's	ng All-Band FM Carriage: Le system whenever it is received at the headend, with the Copyright Office regulation of each station carried. station is AM or FM. I's signal was electronically check mark in the "S/D" collocation (the community to	ved at the syst he system's FN ons on this pol processed by olumn. which the stat	em's header I antenna, di nt, see page the cable systion is licens	nd; and uring of (iv) of stem a	d (2) it can be expected, on certain stated intervals. For f the general instructions. as a separate and discrete
				f any, the community with w	11			LOCATION OF STATION
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
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LEGAL NAME OF OWNER OF CABLE SYST Connected Investments LL	_						Name
SUBSTITUTE CARRIAGE In General: In space I, ident system carried on a substitute tions, or authorizations. For a the general instructions.	ify <i>every nor</i> e <i>basi</i> s during	nnetwork televi	<i>ision program</i> , broadca ng period, under specifi	st by a <i>dist</i> c present ar	nd former FCC ru	les, regula-	Substitute Carriage:
SPECIAL STATEMENT Co. During the accounting peri broadcast by a distant stat Note: If your answer is "No," log in block 2.	od, did your tion?	cable system o	carry, on a substitute ba	☐ Yes	B ■ No		Special Statement and Program Log
2. LOG OF SUBSTITUTE PF In General: List each substit clear. If you need more space Column 1: Give the title of period, was broadcast by a di under certain FCC rules, regu Do not use general categorie "NBA Basketball: 76ers vs. B Column 2: If the program Column 3: Give the call sig Column 4: Give the broad the case of Mexican or Cana Column 5: Give the month first. Example: for May 7, give Column 6: State the times to the nearest five minutes. E: as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules and was substituted for programs on October 19, 1976.	tute program p, please atta f every nonnestant station ulations, or a s like "movie dulls." was broadca gn of the station dian station dian stations and day whe e "5/7." when the su xample: a pro "R" if the list d regulations	ach additional petwork television and that your outhorizations. es" or "basketh ast live, enter" tion broadcast is location (the program carried ted program win effect during the effect during etwork to the effect during etwork to the effect during etwork television to the effect during etwork television to the effect to t	pages. on program ("substitute cable system substitute See page (v) of the gen call." List specific progr Yes.". Otherwise, enter ing the substitute progre community to which the manunity with which the carried the substitute am was carried by your by a system from 6:01:1 ras substituted for prog g the accounting period	e program") d for the program titles, for "No." ram. ne station is a station is program. U cable systems to p.m. to 6 ramming the content of the left	that, during the gramming of anotions for further in example, "I Low dentified). It is the times the image of the image o	accounting ther station of formation. We Lucy" or FCC or, in the month accurately d be stated as required ed program	
SI	JBSTITUTE	PROGRAM		1	SUBSTITUTE GE OCCURRED	7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		DELETION	
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Connected Investments LLC			
K Gross Recelpts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file ar all amounts (gross receipts) paid to your cable system by subscribers for the s (as identified in space E) during the accounting period. For a further explanat page (vi) of the general instructions. • Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross re	system's seco ion of how to	ondary transmiss compute this a	nion service mount, see
Copyright Royalty Fee	COPYRIGHT ROYALTY AND FILING FEES Instructors: To compute the royalty fee you owe: Complete block 1, block 2, or block 3 Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions for more information.	00 but less th	nan or equal to \$ nan \$527,600	263,800
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee	that you mus	t pay for this six-m	onth
	accounting period is \$52.00 Line 1. Royalty fee for accounting period		\$ 52	.00
	Line 1. Hoyarty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8			
	Line 3. Filing Fee			00
	Line 4. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD		e	
	Add lines 1, 2 and 3	• • • • • • • • • • • • • • • • • • • •	41	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but m	ore than \$137,	100)	
		\$263.8	ROO	
	1. Base amount under statutory formula · · · · · · · · · · · · · · · · · · ·			
	2. Enter amount of gross receipts from space K		* ****	
	3. Subtract line 2 from line 1			
	4. Enter the amount of gross receipts from space K	***	\$234,845.00	
	5. Enter the amount from line 3	\$	\$28,955.00	
	6. Subtract line 5 from line 4		\$205,890.00	
	7. Multiply line 6 by .005 (enter figure here)			1,029.45
	8. Interest charge. Enter the amount from line 4, space Q, page 8			00
	9. Filing Fee		\$ 20	.00
	10. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add lines 7, 8 and 9		. • \$	1,049.45
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but	t less than \$52	7,600)	
	*	- ·		Manual Control of the
	1. Enter the amount of gross receipts from space K		40000	
	2. Base amount under statutory formula	\$ 263,	B00	
	3. Subtract line 2 from line 1		and the same of th	
	4. Multiply line 3 by .01	\$		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	_	\$ 1,319	
	6. Interest Charge. Enter the amount from line 4, space Q, page 8			
	7. Filing Fee.		\$ 20.00	
	7, mag . www			,
	8. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, 6 and 7		\$	
	rad mico 4, o, o dild r			
	IMPORTANT: Your remittance must be in the form of an electronic payment payable	to Register of	Copyrights. See	page i of the

FORM SA1-2. PAGE 7.	
LEGAL NAME OF OWNER OF CABLE SYSTEM: Connected Investments LLC	Name
CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations. 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services. 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services.	Channels
INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual we can contact about this statement of account.)	N
Name Jamie Ponder Address PO Box 1820 (Number, street, rural route, apartment, or suite number) Conway, SC 29528 (City, town, state, zip) Email (optional) jamie ponder@htcinc.net Fax (optional) 843-365-1999	Individual to Be Contacted for Further Information
CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations, as explained in the general instructions.)	0
I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	Certification
Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B, and that the owner is not a corporation or partnership; or	
(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner 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 statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [See 18 U.S.C. sec.1001] Handwritten signature:	
Typed or printed name; Carlton Lewis	
Title: Chief Financial Officer (Title of official position held in corporation or partnership)	
Date: 8 26 19	

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.

	The first programmer and the first programmer
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Connected Investments LLC
P Special Statement Concerning Gross Receipts Exclusions	SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A) of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vi) of the general instructions. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? NO YES. Enter the total here and list the satellite carrier(s) below
:	i)
i	Name Mailing address Mailing address
	8
Q Interest Assessment	INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (vii) of the general instructions.
	Line 1. Enter the amount of late payment or underpayment \$
	Line 2. Multiply line 1 by the interest rate* and enter the sum here
	Line 3. Multiply line 2 by the number of days late and enter the sum here. x .00274
	Line 4, Multiply line 3 by .00274** and enter here and in space L (page 6) block 1, line 2, or block 2, line 8, or block 3, line 6
	* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.
	**This is the decimal equivalent of 1/365, which is the interest assessment for one day late.
	Note: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.
	Owner
	Address
	ID number
	First community served
	Accounting period

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.

FORM SA1-2, Page 2, Section E Connected Investments, LLC Attachment #1 Jan – June 2019

Block 1

CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:		The authorities are an incident and a second a second and
Service to first set	791	\$34.95
Service to additional sets	0	0
FM Radio	0	0
Form Motel, Hotel	O	0
Commercial	0	0
Converter		
Residential		
Digital Standard		
Digital Advanced (HD & DVR)	1904	\$10.75
Non-residential		Admit.

Block 2

CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:		
Service to first set (includes bulk billed equivalent units)		
Service to additional sets		
FM Radio		
Motel, Hotel		
Commercial		
Converter		
Residential		9. (6. 3.400.)
Digital Standard		
Digital Advanced (HD & DVR)	ALL AND	
Non-residential		· · · · · · · · · · · · · · · · · · ·

FORM SA1-2, Page 2, Section F Connected Investments, LLC Attachment #2 Jan – June 2019

Block 1

CATEGORY OF SERVICE	RATE
Continuing Services:	TQTTD
Expanded Basic Tier	\$40.00
Enhanced Digital Basic Tier	\$10.75
Digital Sports Tier	\$5.00
High Definition Tier	\$0.00
Starz & Encore Movie Pak	\$16.99
HBO Package	\$16.99
Showtime Package	\$16.99
Cinemax Package	\$16.99
Epix Package	\$5.00
Pay-Per-View – InDemand Movies	\$0.00
Pay-Per-View – InDemand Events	Price Varies
Pay-Per-View – Hipernand Events	Price Varies
Video-On-Demand – TVN Movies Avg Price	\$4.88
The state of the s	\$16.66
Video-On-Demand - TVN Events Avg Price	\$10.00
Installation: Residential	\$190.00
First Set (Internet & Cable Installation):	\$180.00
Additional Set (Initial Visit):	\$25.00
Outlet Relocation with new station wire:	\$85.00
Move to New Address – Pre-Wired	
Move to New Address - Not Pre-Wired	
Installation: Non-residential	
Motel, Hotel	
Commercial	· · · · · · · · · · · · · · · · · · ·
Pay Cable	No. 1-10
Pay Cable - Add'l Channel	
Fire Protection	
Burglar Protection	
Other Services:	
Reconnect	\$75.00
Disconnect	AND THE STREET AND TH
Outlet Relocation - Subsequent	And the state of t
Move to New Address	· · · · · · · · · · · · · · · · · · ·
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