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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED AMOUNT							
01/20/20	\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	2019/1			
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting conduction of the conduction o	ess of the cable system on the last day of the counting perion	em the accounting period should s	
				40632019/1
				4063 2019/1
	1006 12TH ST AURORA NE 68818			
С	INSTRUCTIONS: In line 1, give any business or trade names used to in names already appear in space B. In line 2, give the mailing address of			
System	1 IDENTIFICATION OF CABLE SYSTEM:	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite number)			
	(City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page 1b
Area Served	with all communities. CITY OR TOWN	STATE		
First	Aurora	NE		
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	Α	1
,	Alliance	MD	В	2
	Gering	MD	В	3

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

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 4063 MID-STATE COOMUNITY TV INC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE **CH LINE UP** SUB GRP# AA **Aurora** NE First Giltner AA NE Community Marquette NE AA Trumbull NE AA Doniphan AA NF Hordville NE AA See instructions for **Phillips** NE AA additional information on alphabetization. Hampton NE AA Henderson NE AA Hemingford ΝE AB Crawford NE AB Add rows as necessary.

	•

LEGAL NAME OF OWNER OF CABLE SYSTEM: Name

MID-STATE COOMUNITY TV INC

SYSTEM ID# 4063

Ε

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.

BL	OCK 1		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	
Residential:							
 Service to first set 	5	\$ 49.95	Basic MDU	145	\$	9.00	
 Service to additional set(s) 			Element	79	\$	44.45	
 FM radio (if separate rate) 			Essentials	737	\$	90.45	
Motel, hotel			Ultra	463	\$	101.95	
Commercial			Essentials MDU	129	\$	21.95	
Converter			Ultra MDU	108	\$	23.95	
Residential			Element MDU	57	\$	9.50	
Non-residential			Set Top Box	2,893	\$	6.95	
					•		

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.

	CK 1	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	CATEGORY OF SERVICE	RATE		
Continuing Services:		Installation: Non-residential				
Pay cable		Motel, hotel				
 Pay cable—add'l channel 		Commercial				
Fire protection		Pay cable				
•Burglar protection		Pay cable-add'l channel		•		
Installation: Residential		Fire protection				
First set	\$ 20.00	Burglar protection				
 Additional set(s) 		Other services:				
 FM radio (if separate rate) 		Reconnect	\$ 24.00			
Converter		Disconnect				
		Outlet relocation	\$ 20.00			
		Move to new address	\$ 20.00	1		
				1		

FURINI SASE, PAGE 3.	•				OVOTE	-14 154	
MID-STATE C					SYSTE	±М 1D# 4063	Name
PRIMARY TRANSMIT	TERS: TELEVISION	ON					
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 3 substitute program b	e system during t ations in effect o 76.61(e)(2) and (asis, as explaine	he accounting n June 24, 19 (4), or 76.63 (ed in the next	g period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carring the carriage of cert (1(e)(2) and (4))];	s and low power television stations) ed only on a part-time basis under ain network programs [sections and (2) certain stations carried on a cable system on a substitute program		G Primary Transmitters: Television
station was carrie List the station here basis. For further in the paper SA3 Column 1: List ex each multicast strear cast stream as "WETA Column 2: Give t its community of lice on which your cable Column 3: Indica educational station, t (for independent mul For the meaning of tt Column 4: If the s planation of local ser Column 5: If you cable system carried carried the distant station for written agreeme the cable system and tion "E" (exempt). Fo explanation of these Column 6: Give t	on here in space of only on a subset, and also in spainformation conform. In ach station's call of a spainformation so call of a spainformation associated with a spainformation associated with a spainformation and a spainformation of a primary transmit of the categories of a spainformation of a primary transmit simulcasts, als three categories of a spainformation of a spainformatical and the categories	G—but do listitute basis. ace I, if the state that it is sign. Do not the station act is streams must ber the FCC her, WRC is Chine station. Whether the station.	ation was carried tute basis station report origination coording to its over the terms of the te	d both on a substins, see page (v) on program service er-the-air designate column 1 (list each the television statington, D.C. This park station, an indiffer network multiper "E-M" (for nonections located in the television stating of the television of the television, an indiffer network multiper "E-M" (for nonections located in the televisions located in the program of the televisions located in the television of the television of the television of the primary channel on any of instructions located list the communit	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system		
Note: If you are utiliz	ring multiple cha		· · · · · · · · · · · · · · · · · · ·	•	channel line-up.		-
		CHANN	EL LINE-UP	AA			 -
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		
KHNE-TV	29.1	E	NO		HASTINGS NE		
KHAS-TV	6	N	NO		LINCOLN NE		See instructions for
KOLN-TV	10.1	N	NO		LINCOLN NE		additional information on alphabetization.
KHGI-TV	13	N	NO		LINCOLN NE		on alphabetization.
KFXL-TV	8	l	NO		GRAND ISLAND NE		
KSNB-TV	4	I	NO		LINCOLN NE		
NET-2	29.2	E	NO		HASTINGS NE		
NET-3	29.3	E	NO		HASTINGS NE		
]

FORM SA3E. PAGE 3.						NG PERIOD: 2019/1
LEGAL NAME OF OWN					SYSTEM ID# 4063	Name
MID-STATE CO					4063	
PRIMARY TRANSMITTE In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the si planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For se	ers: TELEVISIC G, identify every system during the ions in effect or 6.61(e)(2) and (exists, as explaine stations: With r CC rules, regular here in space only on a subsication on a part-tire in each case were terms, see part of the cast), "E" (for not one a subsication on a part-tire ion on a part-tire ion of a distant statication on a part-tire ion of a distant entered into on a primary transication on a primary transication on a primary transication on a subsicial in the casts, and the casts, also	the detailed in the process of the station accounting the process of the station accounting the station account of the station of th	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: It it in space I (the station was carried that basis station report origination cording to its own be reported in origination is a network etwork), "N-M" (I educational), one general instruct 4, you must cordinate of lack of a gram that is not some 30, 2009, be sesociation repreyou carried the	(1) stations carried the carriage of certain (e)(2) and (4))]; as carried by your context of the special Statement of both on a substitution, see page (v) of the program services the television station of the television of the televisio	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" emmercial educational multicast). the paper SA3 form. s". If not, enter "No". For an ex- expendent station, on which your ering "LAC" if your cable system	G Primary Transmitters: Television
	Canadian statio	ns, if any, giv	e the name of th	ne community with	to which the station is licensed by the which the station is identifed. channel line-up.	
,	-		EL LINE-UP	•	<u>'</u>	
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	
KNEP	4.1	N	NO	,	SIDNEY NE	
KMGH	7.1	N	NO		DENVER CO	
KTVD	20.1	E	NO		DENVER CO	
KCNC	4.1	N	NO		DENVER CO	
KDVR	22.1	N	NO		DENVER CO	
KUSA	9.1	N	NO		DENVER CO	
KWGN	2.1	I	NO		DENVER CO	

FORM SA3E. PAGE 3.					0\/0TEM ID#	
LEGAL NAME OF OWN					SYSTEM ID#	Name
					4003	
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried ti carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th	ERS: TELEVISIO G, identify every system during the ions in effect or 0.61(e)(2) and (sis, as explaine Stations: With I CC rules, regulate only on a subsection of the and also in space offormation concurre. The station's call associated with associated with see channel numbers are chan	y television stane accounting a June 24, 1964), or 76.63 (r d in the next prespect to any tions, or auth G—but do list itute basis. In the stane accounting substitute basis. In the stane account of the station account of the station. In the station of the	period, except 81, permitting the seferring to 76.6 paragraph. It is space I (the stion was carried ute basis station to the seferring to 76.6 paragraph. It is in space I (the stion was carried ute basis station to the sefer to see the see the see the second to see the see the second to see the see the second to sec	(1) stations carried et carriage of certa 1(e)(2) and (4))]; as carried by your context of the carried by your carried by y	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
FCC. For Mexican or (Note: If you are utilizing				•	which the station is identifed.	
,			EL LINE-UP		'	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURM SAJE. PAGE 3.					OVOTEM ID#	1		
MID-STATE CC					SYSTEM ID# 4063	Name		
PRIMARY TRANSMITTI	ERS: TELEVISION	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 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 or before June 30, 2009, between a cable system or an association representing the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the								
		CHANN	EL LINE-UP	AD				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
MID-STATE CO	OMUNITY 1	TV INC			4063	Nume	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
PRIMARY TRANSMITTE In General: In space (carried by your cable stock rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute program bas basis under specific Fo Do not list the station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servi Column 5: If you have cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	ers: TELEVISIO G, identify every system during the control of the control G, identify every system during the control G, identify every system during the control G, identify every system during the control G, identify explained G, identify ex	y television state accounting a June 24, 194, or 76.63 (red in the next) respect to any ations, or authors accelling the state accounting substitute basis. The accelling substitute basis accelling substitute basis. The accelling substitute basis accelling substitute basis accelling substitute basis. The accelling substitute accelling substitut	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the fermion of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is space I (the referring to report origination of the report origination of the reported in control of the reported in control of the reported in control of the reported in the report origination is a network assigned to the reported in the referring to the reported in the referring the re	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce special Statement of both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television statington, D.C. This in the television statington, D.C. This in the television statington, D.C. This in the television statington, but the television statington in the more television statington in the television statington, but the television statington in the television statington, but the television statington, but the television statington in the television statington, but the television statington, but the television statington, but the television statington, but the television statington in the television statington, but the television sta	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel apendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The paper SA3 form is the subject teem or an association representing the pasis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the	Primary Transmitters: Television	
Note: If you are utilizing				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AF			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
MID-STATE CO	OMUNITY 1	VINC			4063	Nume	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
PRIMARY TRANSMITTE In General: In space (carried by your cable stock rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute program bas basis under specific Fo Do not list the station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servi Column 5: If you have cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	ers: TELEVISIO G, identify every yestem during to ons in effect or ons in end in space only on a subset or ond also in space orm. In station's call associated with one can end in end on end in end in each case or one in each case or one in end in end on on a part-time on on	y television state accounting a June 24, 194, or 76.63 (red) in the next prespect to any stions, or authors, or a station acceptable. The station acceptable with the station or commercial page (v) of the local servers are (v) of the estin column on during the commercial page (v) of the estination or during the commercial page (v) of the estination or during the commercial page (v) of the estination or during the commercial page (v) of the estination or during the commercial page (v) of the estination or during the commercial page (v) of the estination or during the committer or an acceptable of the control of the contro	g period, except 81, permitting the feferring to 76.6 paragraph. It distant stations orizations: to the fermion of the fermion was carried the fermion of th	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the carried by your context your your context your your context	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program and and Program Log)—if the and Program Log)—if the attention basis and also on some other attention basis on the channel and basis and also on some other attention basis on which your attention basis on the sum attention basis	Primary Transmitters: Television	
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AF			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURM SAJE. PAGE 3.					OVOTEM ID#	I		
MID-STATE CO					SYSTEM ID# 4063	Name		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the FCC. For Mexican or Column 6:	CC rules, regular here in space only on a substand also in spatformation concern. The station's call associated with a channel number of the station's call associated with a channel number of the station and the station are the station is outside the cease, see part of a distant station of a distant and a primary transist of the categories are categories and canadian station of a canadian station and a canadian station and a canadian station and a canadian station and a canadian station of a canadian station and a canadian	ations, or auth G—but do list titute basis. Ince I, if the state erning substit sign. Do not read a station acceptate a station acceptate a station. In a station are station. In a station are station and uring the same basis became the station and uring the same that is a station and uring the same that is a station are station. In a see page (v) ch station. For no, if any, given a station are station.	orizations: It it in space I (the strict of the space I (the strict of the space I) It it in space I (the strict of the space I) It is the space I (the strict of the space I) It is the space I (the space I) It is the space I (e Special Statemer by the television statisticularly special statisticularly special	ent and Program Log)—if the ute basis and also on some other if the general instructions located is such as HBO, ESPN, etc. Identify ion. For example, report multi- instream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). use paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing by transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Television		
Note: If you are utilizing	ig multiple char		EL LINE-UP		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			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name	
MID-STATE CO	OMUNITY T	VINC			4063	Name	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 "In" (for network), "I-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial e							
explanation of these th	ree categories	, see page (v)	of the general i	nstructions located	d in the paper SA3 form.		
FCC. For Mexican or C Note: If you are utilizing				•	which the station is identifed. channel line-up.		
,		CHANN	EL LINE-UP	AH			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		1	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
					000000000000000000000000000000000000000		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Namo
MID-STATE CO	OMUNITY 1	TV INC			4063	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space carried by your cable : FCC rules and regular 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis: basis under specific FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even- system during ti- ions in effect or 5.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a subs and also in spa- information cond- ions. ch station's call associated with A-2". Simulcast e channel numl se. For example system carried the in each case way entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y entering the le cast), "E" (for no ese terms, see ation is outside ice area, see pa ave entered "Y ice on a part-til sion of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea	y television standard page (v) of the local serial page (v) of the local s	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to it it in space I (the referring to station was carried that the basis station report origination cording to its own to be reported in ordinas assigned to hand a sassigned to hand I wash tation is a network etwork), "N-M" (I educational), or egeneral instructive area, (i.e. "or general instruct 4, you must correct ause of lack of a seam that is not some 30, 2009, be ssociation repreyou carried the of the general instruct the of the general instruct you.	(1) stations carried to carriage of certa- tile (2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service the television statistication, D.C. This the television statistication, D.C. This the television statistication, on the television of the television statistication, on the television statistication of the television of the televi	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your dering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	Al		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
MID-STATE CO	OMUNITY T	VINC			4063	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space (carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify every system during the ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e)(2) and (6.51(e)(2) and (6.51(e)(2) and (6.51(e)(2) and also in spanformation concurrs. Chastaion's call associated with associated with associated with associated with a carried the in each case we are entering the lecast), "E" (for no ese terms, see pation is outside ice area, see pation is outside ice area, see pation of a distant the entered "Ye in each case we entered into on a part-tire ision of a distant the entered into on a primary transisimulcasts, also are categories, e location of each canadian statio	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the station account of the station. Whether the station. Whether the station account of the local server in column on during the ame basis becar in multicast stream or before Jumitter or an associated in the station. For ones, if any, given as a count of the station.	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: It it in space I (the referring to station was carried that it in space I (the referring to report origination coording to its own be reported in compared to the reported in the reporte	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) of the program services the television statification, D.C. This in the television statification, D.C. This in the television statification, an indefor network multicar "E-M" (for noncontions located in the instant"), enter "Ye in the column 5, so the special column 1 (the special column 1) and the column to the special column to any other column to any other column to any other column to catellist the community with the community with the community with	paper SA3 form. stating the basis on which your ering "LAC" if your cable system eapacity. payment because it is the subject etem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Primary Transmitters: Television
		CHANN	EL LINE-UP	AJ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
MID-STATE CO	OMUNITY 1	TV INC			4063	Nume	
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 specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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), "" (for independent), "I-M" (for indepe							
Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AK			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
MID-STATE CO	OMUNITY 1	TV INC			4063	Nume	
PRIMARY TRANSMITTERS: TELEVISION							
PRIMARY TRANSMITTE In General: In space (carried by your cable stock rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute program bas Substitute Basis Subasis under specific Fo Do not list the station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servi Column 5: If you have cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the	ers: TELEVISIO G, identify every system during the system days of the system carried the system of a cut-system carried the system of a distant the entered into on a part-time on of a distant the entered into on a primary trans simulcasts, also are categories	y television state accounting a June 24, 194, or 76.63 (rad in the next) respect to any ations, or auth G—but do listitute basis. ace I, if the state raing substitute basis bearing substitute basis. The state of t	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is a control of the report origination could be reported in control of the reported in contr	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your ce special Statement both on a substitute, see page (v) of a program services er-the-air designaticolumn 1 (list each the television statington, D.C. This in the television statington, D.C. This in the television statington, D.C. This in the television statington, but the television statington stat	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). the paper SA3 form. s". If not, enter "No". For an ex- repaper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television	
Note: If you are utilizing				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AL			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
MID-STATE CO	OMUNITY 1	TV INC			4063	Nume	
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),76,50(e)(2) and (4),0 r 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 Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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), "F" (for independent), "I-M" (for indep							
Note: If you are utilizing				•			
		CHANN	EL LINE-UP	AM			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
MID-STATE CC	OMUNITY T	VINC			4063	ramo
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program Program 1: List the station here, basis. For further ir in the paper SA3 for Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even the system during it ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e	y television standard page (v) of the local servage (v) of the local se	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried ute basis station eport origination cording to its own be reported in comparation in a network of the station is a network of the stational, on the stational of the stationa	(1) stations carried to carriage of certa- 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service the television statistication, D.C. This work station, an indefor network multicution "E-M" (for noncontrolled in the finite of the television statistication, but the television statistication, but the television statistication, but the television statistication, but the television statistication, an indefor network multicute. The television statistication is located in the finite television statistication in the television statistication in the television statistication and the television statistication and the television statistication and the television statistication in the television statistication in the television statistication and the television statistication in the television in the televis	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ig manipic chai		•		опапнетине-ар.	
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	
				(2.5.6111)		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
MID-STATE CO	OMUNITY 1	TV INC			4063	Nume	
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 specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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), "" (for independent), "I-M" (for indepe							
Note: If you are utilizing				•			
	<u> </u>	CHANN	EL LINE-UP	ΔΩ			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					0/07514 15 //	
LEGAL NAME OF OWN					SYSTEM ID#	Name
					4003	
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried ti carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th	ERS: TELEVISIO G, identify every system during the control of the control Gold (e)(2) and (e) Gold (e)(3) and (e) Gold (e	y television state accounting an June 24, 196 (4), or 76.63 (red in the next prespect to any the General substitute basis. It acerning substitute basis. It acerning substitute sign. Do not red a station account of the station account of the station. It whether the station whether the station. It is a station account of the station. It is a station account of the station account of the station. It is a station account of the station account of the station. It is a station account of the station account of the station account of the station o	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is a control of the report origination could be reported in control of the reported in contr	(1) stations carried et carriage of certa 1(e)(2) and (4))]; as carried by your context of the carried by your carried by y	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your dering "LAC" if your cable system	G Primary Transmitters: Television
FCC. For Mexican or (Note: If you are utilizing)		. ,		•	which the station is identifed. channel line-up.	
-		CHANN	EL LINE-UP	AP	·	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	Name
MID-STATE CC	OMUNITY 1	TV INC			4063	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify ever system during to ions in effect or ions in expansion and also in sparaformation concurr. In station's call associated with example system carried the in each case or in each case or ions in expansion is outside to earea, see prave entered "Y he distant static ion on a part-till ion of a distant is entered into of a primary trans is included in each casts, also incree categories in location of each candian static cand	y television st he accounting in June 24, 194, or 76.63 (in the next prespect to any ations, or auth G—but do listitute basis. In the state of the station acceptance of the station acceptance of the station acceptance of the station acceptance of the station. Whether the station whether the station. Whether the station acceptance of the station or during the station or during the station or before Jumitter or an acceptance of the station. For the station or station or station or station or station or station.	g period, except 81, permitting the referring to 76.6 paragraph. A distant stations to rizations: It it in space I (the ation was carried tute basis station report origination cording to its own be reported in containing to its own annel 4 in Wash ation is a netwo retwork), "N-M" (I educational), or general instruction area, (i.e. "or general instruction area of lack of a general instruction area of lack of a general instruction area." Jor U.S. stations, ie the name of the general in true.	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services the television statifington, D.C. This light of the television statifington, by the television statifington, by the television statifington, by the television statifington, by the television statifications located in the mplete column 5, so the television stated channel or collistic to a royalty struction and the television slocated in the mplete column 5, so the television should be the television of the television of the television should be the television of the telev	s". If not, enter "No". For an expaper SA3 form. Stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the designation in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Primary Transmitters: Television
		CHANN	EL LINE-UP	AQ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
		1				

FORM SA3E. PAGE 3.					0/07514 15 //	
LEGAL NAME OF OWN					SYSTEM ID#	Name
					4003	
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	ERS: TELEVISIO G, identify every system during the control of the control Gold (e)(2) and (e) Gold (e)(3) and (e) Gold (e	y television state accounting a June 24, 1964, or 76.63 (r d in the next prespect to any disons, or auth G—but do list itute basis. ace I, if the state ring substitute basis. ace I, if the state ring substitute sign. Do not reason acceptance of the FCC has station acceptance of the station. Whether the stater "N" (for no commercial page (v) of the local servage (v) of the es" in column on during the ame basis becar multicast stream or before Jumitter or an acceptance of the servage (v) of the servage of the station. For the servage (v) of	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the fermion of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is space I (the referring to report origination of the report origination of the reported in control of the reported in control of the reported in control of the reported in the report origination is a network assigned to the reported in the referring to the reported in the referring the re	(1) stations carried et carriage of certa 1(e)(2) and (4))]; as carried by your context of the carried by your carried by y	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your dering "LAC" if your cable system expapacity. expapacity. expapare to be subject estem or an association representing expect transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. expect to which the station is licensed by the	Primary Transmitters: Television
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FURM SAJE. PAGE 3.					0//07514 ID#		
MID-STATE CC					SYSTEM ID# 4063	Name	
PRIMARY TRANSMITTI	ERS: TELEVISION	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the							
station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th	only on a subs and also in spariformation concurm. The station's call associated with a case of the station is call associated with a case of the station is call as the station is outside to the station is outside to a case of the station is outside to a rea, see prave entered at the distant static ion on a part-tilicion of a distant at entered into of a primary trans simulcasts, also aree categories	titute basis. ace I, if the state that serning substiff sign. Do not the station acestreams must been the FCC here, WRC is Chane station. Whether the station. Whether is a station. Whether the station according to the station according	ation was carried tute basis station report origination report origination of the cording to its own to be reported in the carried annel 4 in Wash tation is a network attention is a network attention is a network attention is a network attention is a network area, (i.e. "c general instruction area, (i.e. "c general instruction area, (i.e. "c general instruction area of lack of a seam that is not some 30, 2009, be ssociation repreyou carried the of the general in the control of the	d both on a substitute, see page (v) or program services er-the-air designate column 1 (list each the television statifington, D.C. This light of the television statifington, D.C. This light of the television statifington, D.C. This light of the television, an indefor network multicur "E-M" (for noncontrictions located in the interest of the televisions located in the interest occurrence of the televisions located in the interest of the inter	ute basis and also on some other if the general instructions located is such as HBO, ESPN, etc. Identify the stream separately; for example on for broadcasting over-the-air in imay be different from the channel opendent station, or a noncommercial east), "I" (for independent), "I-M" ommercial educational multicast). The paper SA3 form. In the paper SA3 form. The stating the basis on which your dering "LAC" if your cable system capacity. The paper shade it is the subject them or an association representing the pasis, enter "O." For a further in the paper SA3 form.		
	Canadian statio	ons, if any, giv nnel line-ups,	e the name of thuse a separate	ne community with space G for each	to which the station is licensed by the which the station is identifed. channel line-up.		
	1	CHANN	EL LINE-UP	AS			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
		1		I	1	1	

FORM SA3E. PAGE 3.											
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#											
MID-STATE CO	OMUNITY T	VINC			4063	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), 07.661(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 Pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated 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 for hemosphisms on which your cable system carried the											
		CHANN	EL LINE-UP	AT							
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION						

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN					SYSTEM ID#	Name		
MID-STATE CO	OMUNITY 1	VINC			4063			
PRIMARY TRANSMITT	ERS: TELEVISION	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational) multicas								
Note: If you are dillizing	ig multiple chai	•	•	•	charmer inte-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			
		†						

FORM SA3E. PAGE 3.					21/2=====	
LEGAL NAME OF OWN					SYSTEM ID#	Name
MID-STATE CO					4063	
PRIMARY TRANSMITT						
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during the consistency of	he accounting n June 24, 199 4), or 76.63 (r d in the next p	period, except 81, permitting the eferring to 76.6 paragraph.	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
basis under specifc F0	, 0	,		0 11011		
Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable so Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 4: If the steplanation of local service Column 5: If you heable system carried the carried the distant state. For the retransmission of a written agreement the cable system and	n here in space only on a subs and also in spatformation concorm. The second of the se	G—but do list titute basis. ace I, if the state ring substit sign. Do not read the station acceptation of the station acceptation of the station. Whether the station. Whether the station age (v) of the local servage (v) of the age (v) of the age in column on during the same basis because multicast streen or before Jumitter or an assert accepts.	tit in space I (the stion was carried tute basis station report origination of the properties of the station is a network and a sassigned to the station is a network of t	I both on a substitute, see page (v) on a program service er-the-air designate column 1 (list each the television statifington, D.C. This rk station, an indefor network multic r "E-M" (for nonceptions located in the instant"), enter "Ye ions located in the instant" of the column 5, so the colum	es". If not, enter "No". For an ex- e paper SA3 form. estating the basis on which your eering "LAC" if your cable system capacity. e payment because it is the subject estem or an association representing ry transmitter, enter the designa-	
explanation of these the Column 6: Give the	nree categories e location of ea Canadian statio	, see page (v) ch station. Fo ns, if any, giv nnel line-ups,	of the general in U.S. stations, let the name of the	nstructions locate list the community ne community with space G for each	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. 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	
	NOWBER	STATION		(II Distant)		

FORM SA3E. PAGE 3.										
LEGAL NAME OF OWNER OF CABLE SYSTEM: MID-STATE COOMUNITY TV INC 4063										
MID-STATE CO	OMUNITY 1	TV INC			4063	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), 76,616 (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 specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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), "E" (for independent), "I-M" (for in										
Note: If you are utilizing				•						
		CHANN	EL LINE-UP	AW						
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					

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 4063 MID-STATE COOMUNITY TV INC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). AM or FM CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION **KROA FM GRAND ISLAND NE** KRGI **FM GRAND ISLAND NE** KAWL KICS FΜ YORK NE FΜ HASTINGS NE **KRNY** FΜ **KEARNEY NE** FΜ **KEARNEY NE KEAN**

FORM SA3E. PAGE 5.								ACCOUNTING	PERIOD: 2019/1				
LEGAL NAME OF OWNER OF							S	YSTEM ID#	Name				
MID-STATE COOMUNI	TY TV INC	ວ 						4063					
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 a	In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE												
				<u> </u>				-	Carriage: Special				
	• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Yes X No Note: If your answer is "No" leave the rest of this page blank. If your answer is "Yes" you must complete the program.												
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													
2. LOG OF SUBSTITUTE In General: List each substiclear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broat the case of Mexican or Can Column 5: Give the mor first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ce, please a of every no distant stati gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static atth and day we "5/7." es when the Example: a er "R" if the and regulatic ogramming	am on a separa attach addition network televion and that your authorization at use general of the second of the se	al pages. ision program (substitute pour cable system substitute pour cable system substitute pour cable system substitute pour categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the stem carried the substitute purpose was carried by your ded by a system from 6:01:10 was substituted for programing the accounting period	rogram) that, d for the progeral instructio "basketball". o." m. station is licer station is idenorogram. Use cable system. 5 p.m. to 6:2 mming that yes enter the let	during the ramming on slocated List special sp	e account another account another account acco	unting ther static paper pgram C or, in the month ccurately d be required ed pro	h ,					
					EN SUBS			7. REASON					
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH		TIMES	3	FOR DELETION					
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	_	TO						
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Form SA3E Long Form (Rev. 05-17) U.S. Copyright Office

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MID-STATE COOMUNITY TV INC

PART-TIME CARRIAGE LOG

In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "I AC" for part-

J

Part-Time Carriage Log

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

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

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

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

		DAT	ES A	AND HOURS (OF F	PART-TIME CAF	RRIAGE			
CALL SIGN	WHEN CARRIAGE OCCURRED					CALL SIGN	WHEN CARRIAGE OCCURRED			
	DATE FROM		OURS TO				DATE	HOURS FROM		TO
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	SASE. PAGE 7. IL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Nama						
MIE	STATE COOMUNITY TV INC		4063	Name						
all a (as pag	Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) 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 receipts. (Amount of gross receipts)									
InstruConConIf your feeIf you accommoder	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.									
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e entered on line 1 o	of							
-	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2 in l	olock							
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered on lir	ne							
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.	e is 1.064 percent of								
	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.	Ψ	700,703.30							
	This is your minimum fee.	\$	7,541.31							
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.	nn 4, you must checo	k							
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	\$	-							
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00							
	Line 3. Add lines 1 and 2 and enter here	\$	-							
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE : Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$	7,541.31	Cable systems						
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	r	0.00	submitting additional deposits under						
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)									
	Line 4. FILING FEE									
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	8,266.31	appropriate form for submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form for more information.)	See page (i) of the								

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
Name	MID-STATE COOMUNITY TV INC 4063								
	4000 4000 4000 4000 4000 4000 4000 400								
	CHANNELS								
M	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.								
Channels									
	1. Enter the total number of channels on which the cable								
	system carried television broadcast stations								
	O Fater the Add growth as of a third at least the								
	Enter the total number of activated channels on which the cable system carried television broadcast stations								
	and nonbroadcast services								
	una nonsiduada con noco								
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual								
Individual to	we can contact about this statement of account.)								
Be Contacted									
for Further	Name John Nelson Telephone 402-694-4401								
Information									
	Address 1006 12th St								
	(Number, street, rural route, apartment, or suite number)								
	Aurora NE 68818								
	(City, town, state, zip)								
	Email charity.kolar@hamiltontel.com Fax (optional) 402-694-2848								
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.								
0	3 17 3								
Certifcation	I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)								
Continuation	i, the dilation signed, note by sentiny that (entert only one, or the bestee.)								
	(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 identifed 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.								
	[18 U.S.C., Section 1001(1986)]								
	X								
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.								
	(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.								
	Typed or printed name: John Nelson								
	Title: President								
	(Title of official position held in corporation or partnership)								
	· · · · · · · · · · · · · · · · · · ·								
	Date: August 23, 2019								
	Date: / August 20, 20 10								

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

LEGAL NAME OF OWNE	ER OF CABLE SYSTEM: SOMUNITY TV INC	4063	Name					
The Satellite Hor lowing sentence: "In determ service of	ATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS me Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the nining the total number of subscribers and the gross amounts paid to the cable system for the bar providing secondary transmissions of primary broadcast transmitters, the system shall not include amounts collected from subscribers receiving secondary transmissions pursuant to section 1	asic ude sub-	Special Statement Concerning					
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. 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?								
X NO YES. Enter the	he total here and list the satellite carrier(s) below							
Name Mailing Address	Name Mailing Address							
INTEREST AS	SSESSMENTS							
You must comple	ete this worksheet for those royalty payments submitted as a result of a late payment or underpa on of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ayment.	Q					
Line 1 Enter the	amount of late payment or underpayment		Interest Assessment					
Line 2 Multiply I	ine 1 by the interest rate* and enter the sum here	- days						
Line 3 Multiply I	ine 2 by the number of days late and enter the sum here	- 74						
	ine 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	- arge)						
	interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance Licensing Division at (202) 707-8150 or licensing@loc.gov.	please						
** This is the	decimal equivalent of 1/365, which is the interest assessment for one day late.							
•	filing this worksheet covering a statement of account already submitted to the Copyright Offce, the owner, address, first community served, accounting period, and ID number as given in the owner.	original						
Owner Address								
First community s Accounting perio								

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

ACCOUNTING PERIOD: 2019/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during

the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
 - 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule: or

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

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

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above;
 the total number of DSEs for that group's complement of stations;
 and
 the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

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

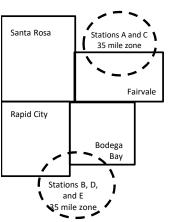
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



	Distant Stations Carried		Identification of	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
in	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
3	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
-	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSEs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6,384.00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

ACCOUNTING PERIOD: 2019/1

DSE SCHEDULE. PAG	E 11. (CONTINUED)					
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: MID-STATE COOMUNITY TV INC 4063					
1						
	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.				0.00	
	Instructions:					
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5					
	of space G (page 3).					
Computation	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-					
of DSEs for	mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs					
Category "O" Stations	CALLSION	DSE			CALL CICN	DSE
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Add rows as						
necessary.						
Remember to copy						
all formula into new						
rows.						
10113.						

	LEGAL NAME OF C	OWNER OF CABLE SYSTEM	:				S	YSTEM ID#
Name	MID-STATE	COOMUNITY TV IN	С					4063
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type- Column 6	at the call sign of all dis Eror each station, give correspond with the info Eror each station, give Divide the figure in co at least to the third dec For each independent value as ".25."	the number of primation given the total numb plumn 2 by the ficinal point. This t station, give the column 4 by the	hours your cable sys in space J. Calculate er of hours that the s figure in column 3, an s is the "basis of carri ne "type-value" as "1.	tem carried the st only one DSE for tation broadcast of d give the result in age value" for the 0." For each netwond give the result	ation during the accountine each station. over the air during the accounting the	ounting period. In this figure must cational station, Less than the	
Capacity			CATECODY	/ I A C CTATIONS	COMPLITAT	TION OF DOEs		
	1. CALL SIGN	2. NUMB OF HO	ER OURS IED BY	' LAC STATIONS 3. NUMBER OF HOURS STATION ON AIR	4. BASIS C CARRIA VALUE	F 5. TYPE		iΕ
			÷		=	x	=	
			÷		=	<u>x</u>		
			÷		=	x x		
	***************************************		÷		=	x	=	
			÷		=	x	=	
			÷		=	X X		
	Add the DSEs	oF CATEGORY LAC of each station. Im here and in line 2 of		chedule,		0.00]	
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations are space I). Column 2: at your option. Column 3: Column 4: I	I by your system in sub ict on October 19, 1976 one or more live, nonnet For each station give the This figure should corrected the number of da Divide the figure in columbis is the station's DSI	stitution for a pi (as shown by the control of livers of	rogram that your syst the letter "P" in colum during that optional care, nonnetwork prograe information in space dar year: 365, except ure in column 3, and ormation on rounding	em was permitted in 7 of space I); an arriage (as shown but arms carried in subset. In a leap year, give the result in a see page (viii) of a see page (viii) of	by the word "Yes" in column in distitution for programs that column 4. Round to no les f the general instructions in	2 of were deleted s than the third	rm).
						ATION OF DSEs	T	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	<u>=</u>				=
			÷ ÷					=
			÷	=		-		=
			÷	=		÷		=
			÷	=		÷		=
	Add the DSEs	oF SUBSTITUTE-BA of each station. Im here and in line 3 of				0.00] 	
5 Total Number of DSEs	number of DSEs 1. Number of 2. Number of	ER OF DSEs: Give the as applicable to your system of DSEs from part 2 ● f DSEs from part 3 ● f DSEs from part 4 ●		e boxes in parts 2, 3, a	nd 4 of this schedu	ule and add them to provide	0.00 0.00 0.00	
	3	part 1 •				-		
	TOTAL NUMBE	R OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

LEGAL NAME OF C							S	YSTEM ID# 4063	Name
Instructions: Blo In block A: • If your answer if schedule. • If your answer if	"Yes," leave the r	emainder of p	•	7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	f the	6
			BLOCK A: T	ELEVISION M	ARKETS				Computation of 3.75 Fee
	1981?	e schedule—[C below.	OO NOT COM	PLETE THE REM	AINDER OF F	PART 6 AND 7		gulations in	3.70166
		BLOC	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Jui dule. (Note: Th	part 2, 3, and 4 or ne 25, 1981. For for ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stat C Noncomeric D Grandfathere instructions fe E Carried pursu *F A station pre	ules and reguled pursuant to as defined call education of the call education of DSE sched ant to individuation by carries of JHF station was defined to the call of the call o	lations cited be to the FCC madd in 76.5(kk) (7a.1 station [76.565) (see paragulule). Lual waiver of Fed on a part-ting grade-Both in the first station of the part-ting grade-Both in the first station of the part-ting grade-Both in grade-B	ne or substitute ba contour, [76.59(d)(ose in effect of 76.57, 76.59(b re)(1), 76.63(a 63(a) referring bstitution of g	n June 24, 198 n), 76.61(b)(c), n) referring to 7 g to 76.61(d) randfathered s	76.63(a) referring		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
						"			
								0.00	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			,	-	
Line 2: Enter the	sum of permitte	ed DSEs from	m block B abo	ove				-	
Line 3: Subtract (If zero,				r of DSEs subjec 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply I	ine 4 by 0.0375	and enter su	ım here						partially permited/ partially
Line 6: Enter tot	al number of DS	Es from line	3				х	<u>-</u>	nonpermitted carriage? If yes, see part
Line 7: Multiply I	ine 6 by line 5 a	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	9 instructions.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MID-STATE COOMUNITY TV INC 4063 **BLOCK A: TELEVISION MARKETS (CONTINUED)** 6 3. DSE 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 1. CALL 2. PERMITTED 3. DSE 3. DSE SIGN BASIS SIGN SIGN **BASIS** BASIS Computation of 3.75 Fee

Mana	LEGAL NAME OF OWN	IER OF CABLE	E SYSTEM:						S	YSTEM ID#
Name	MID-STATE CO	OMUNITY	TV INC							4063
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the F0 A—Part-time spp 76.59(B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Compare in block	or to June 25, call sign for eather DSE for the DSE for the DSE for the basis of CC rules and ecialty progra (d)(1),76.61(e rogramming: (e)(3)). Carriage under all instructions the station's I e the DSE figure. B, column 3 differentiation by call information years.	1981, under former ach distant station in this station for a sing geriod and year is arriage on which the regulations cited be mming: Carriage, or (1), or 76.63 (refer Carriage under FCC certain FCC rules, in the paper SA3 from the paper SA3 from the current ures listed in column of part 6 for this state ou give in columns.	r FCC rules gover dentifed by the gle accounting properties and the care station was celew pertain to the care station was celew pertain to the properties of the care station of 76.61(e). Corules, sections regulations, or accounting perms 2 and 5 and tion.	verr lett per riag arri thos asis (1) s 70 aut	entifed by the letter "F" ning part-time and subter "F" in column 2 of piod, occurring between ge and DSE occurred lied by listing one of the se in effect on June 24 s, of specialty program.). 6.59(d)(3), 76.61(e)(3) thorizations. For furthe las computed in parts the smaller of the two e accurate and is subjection.	stitute carri part 6 of the n January 1 (e.g., 1981/ e following I, 1981. Iming unde n, or 76.63 (r explanation 2, 3, and 4 o figures her	age. DSE schedule, 1978 and Jur 1) etters FCC rules, sereferring to on, see page (voof this schedule). This figure is	ene 30, 19 ections vi) of the should be	981 se enterer
		PERMITT	ED DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS		
	1. CALL	2. PRIC	OR 3. ACC	COUNTING		4. BASIS OF	5. PF	RESENT	6. P	ERMITTED
	SIGN	DSE	PI	ERIOD		CARRIAGE	[SE		DSE
7 Computation of the		"Yes," comple	ete blocks B and C, locks B and C blanl	k and complete		rt 8 of the DSE sched				
Syndicated			BLOCK	K A: MAJOR	TE	LEVISION MARK	ET			
Exclusivity				4-1:	4		C F -4 FOO		04	10040
Surcharge	l <u> </u>	,		or television mar	кеі	as defned by section 7		rules in effect J	une 24,	1981?
	Yes—Complete	blocks B and	/ C .			X No—Proceed to	part 8			
	BLOCK B: C:	arriage of VHI	F/Grade B Contour	Stations	T	BLOCK	(C: Compu	tation of Exem	pt DSE	S
	Is any station listed in commercial VHF stati or in part, over the cal	block B of pa	art 6 the primary str	eam of a		Was any station listed nity served by the cab to former FCC rule 76	in block B le system p	of part 7 carrie	d in any	commu-
	Yes—List each s	tation below wi	th its appropriate peri	mitted DSE		Yes—List each st	ation below	vith its appropria	ate permi	tted DSE
	X No—Enter zero a	and proceed to	part 8.			X No—Enter zero a	nd proceed t	o part 8.		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N I	DSE
	O/ ILL STOTY	302	57 LEE 51511	502		GALL SIGH	302	07122 010	.,	302
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: MID-STATE COOMUNITY TV INC	SYSTEM ID# 4063	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	708,769.36	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	F	
	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)		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS 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)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: SYSTEM:
		MID-STATE COOMUNITY TV INC
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$
Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here
		D. Enter 0.00089 of gross receipts (the amount in section 1)
		E. Subtract 4.000 from the total DSEs (the figure on line C in
		section 2) and enter here
		F. Multiply line D by line E and enter here
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)
		Syndicated Exclusivity Surcharge
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	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. sick A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. sur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. sur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below sa partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers becated 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?
		Yes—Complete part 9 of this schedule. X 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) ▶ _ \$ 708,769.36
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.
		A. Enter 0.01064 of gross receipts (the amount in section 1)
		B. Enter 0.00701 of gross receipts (the amount in section 1)
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here
		D. Multiply line B by line C and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)
		Base Rate Fee

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/1

	AME OF OWNER OF CABLE SYSTEM: STATE COOMUNITY TV INC	SYSTEM ID# 4063	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1) **Section 1.** **Page 1.** **Page 2.** **P		8
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$\bigseleft\simples\$		Computation of
	C. Multiply line B by 3.000 and enter here \$	_	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$	0.00	
IMPOE	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	et cianale chall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel	0	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:		Computation of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for	the number of	and Syndicated Exclusivity Surcharge
NOTE:	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. If any portion of your cable system is located within the top 100 television market and the station is not exempt in pupule a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B becable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
	For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lot the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
Step 3 subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
groups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your sys	tem's subscriber	
IdentiGivesubscr	fy the communities/areas represented by each subscriber group. the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.	of the	
• lf: 1) your	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it is	n parts 2, 3,	
2) any	of this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,	
•	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general is paper SA3 form.	nstructions	
page.	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee	at is, the total	

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

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 4063 MID-STATE COOMUNITY TV INC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP S	Name
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA OCMMUNITY/ AREA CALL SIGN DSE	-
CALL SIGN DSE CA	
Total DSEs O.00 Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Computation
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Base Rate F
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	and
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Syndicate
Gross Receipts First Group South Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL	Exclusivity Surcharge
Gross Receipts First Group South Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL	for
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Partially
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Distant
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Stations
Gross Receipts First Group South Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL	
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	
Gross Receipts First Group Solution Gross Receipts Second Group Solution Gross Receipts Second Group Solution THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE	
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	
Gross Receipts First Group Sase Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	_
Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	_
THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CA	_
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Column	
Total DSEs	
Total DSEs 0.00 Total DSEs 0.00	
Total DSEs 0.00 Total DSEs 0.00	
Total DSEs 0.00 Total DSEs 0.00	
Total DSEs 0.00 Total DSEs 0.00	
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otal DSEs 0.00 Total DSEs 0.00	
Fotal DSEs 0.00 Total DSEs 0.00	
Total DSEs 0.00 Total DSEs 0.00	
Ootal DSEs 0.00 Total DSEs 0.00	
Total DSEs 0.00 Total DSEs 0.00	
Fotal DSEs 0.00 Total DSEs 0.00	
Total DSEs 0.00 Total DSEs 0.00	
	_]
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	_
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	
	_
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	ار
Inter here and in block 3, line 1, space L (page 7) \$ 0.00	<u> </u>

IIID GTATE GGGIIIGHT	ABLE SYSTEM: Y TV INC				S	4063	Name
	A: COMPUTATION (TE FEES FOR EAC				
	TH SUBSCRIBER GR				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
							and
							Syndica
							Exclusiv
							Surchar for
							Partiall
							Distan
							Station
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
sase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	TH SUBSCRIBER GR	OUP		EIGHTH	I SUBSCRIBER GROU	JP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs			0.00	
	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third Group			11				
Gross Receipts Third Group							

	TV INC					4063		
	: COMPUTATION O		TE FEES FOR EAG					
NINT COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	TENTH SUBSCRIBER GROUP					
COMMONT I/ ARLA			COMMONT IT AIL	COMMUNITY/ AREA				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						<u></u>		
otal DSEs		0.00	Total DSEs		1	0.00		
Gross Receipts First Group	\$	0.00	Gross Receipts Second Group \$ 0.00					
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	H SUBSCRIBER GRO				SUBSCRIBER GROU			
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs		0.00	Total DSEs			0.00		
		0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00		
Total DSEs Gross Receipts Third Group				rth Group	\$	_		

	001101171710110						
			TE FEES FOR EAC			ID.	
THIRTEENTH COMMUNITY/ AREA	SUBSCRIBER GRO	0 0	FOURTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	H SUBSCRIBER GRO	UP	
MMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	-						
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

DI 001/ A						4063	
			TE FEES FOR EAC			ID	
COMMUNITY/ AREA	I SUBSCRIBER GRO	0 0	EIGHTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	. 📙						
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINTEENTH	I SUBSCRIBER GRO	UP		TWENTIETH	SUBSCRIBER GROU	JP	
MMUNITY/ AREA		0	COMMUNITY/ AREA 0				
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	- 						
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts Third Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
	ı	0.00	Base Rate Fee Fou		\$	0.00	

		TV INC					4063	
				TE FEES FOR EACH			ID	
OMMUNITY/ AREA	I Y-FIRST	SUBSCRIBER GRO	0 0	TWENTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				
JOINIMONT IT AREA								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		-						
otal DSEs		<u> </u>	0.00	Total DSEs			0.00	
ross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•	•				•			
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
TWEN	ry-Third	SUBSCRIBER GRO	UP	TWEN	ITY-FOURTH	SUBSCRIBER GROU	JP	
DMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
otal DSEs	•		0.00	Total DSEs	•		0.00	
ross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ase Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third (·			

	TV INC					4063
			TE FEES FOR EAC			
TWENTY-FIFT	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	<u>JP</u> 0
JOMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
	H SUBSCRIBER GRO		ii .		SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	CALL SIGN	DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE
Total DSEs	CALL SIGN				CALL SIGN	
CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Third Group		0.00	Total DSEs			0.00
Fotal DSEs		0.00	Total DSEs	th Group		0.00

MID-STATE COOMUNITY	BLE SYSTEM: TV INC				S	YSTEM ID# 4063	Nam
			TE FEES FOR EAC				
	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Comput
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rat
							and
							Syndica
							Exclusi
							Surcha for
							Partial
							Distar
					 		Station
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		-			L		
THIRTY-FIRS	T SUBSCRIBER GRO	DUP			SUBSCRIBER GROU		
	T SUBSCRIBER GRO	0 0		TY-SECOND	SUBSCRIBER GROU		
OMMUNITY/ AREA	T SUBSCRIBER GRO		THIR	TY-SECOND	SUBSCRIBER GROU	UP	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
COMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
OMMUNITY/ AREA		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
CALL SIGN DSE		0	THIR COMMUNITY/ ARE.	TY-SECOND		UP 0	
CALL SIGN DSE CALL SIGN DSE		DSE	THIR COMMUNITY/ ARE. CALL SIGN	TY-SECOND A DSE		DSE	
CALL SIGN DSE CALL SIGN DSE	CALL SIGN	0.00	THIR COMMUNITY/ ARE CALL SIGN Total DSEs	TY-SECOND A DSE		DSE O.000	
COMMUNITY/ AREA	CALL SIGN	0.00	THIR COMMUNITY/ ARE CALL SIGN Total DSEs	TY-SECOND A DSE TH Group		DSE O.000	

MID-STATE COC						S	YSTEM ID# 4063	Name
	RTY-THIRD	COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EAC	RTY-FOURTH	RIBER GROUP I SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA			<u> </u>	COMMUNITY/ ARE	Α		U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
		,						Surcharge
								for Partially
								Distant
								Stations
Total DCCs		Ш	0.00	Total DCFs			0.00	
Total DSEs	C	•	0.00	Total DSEs		•	0.00	
Gross Receipts First	Group	<u>\$</u>	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		††		H SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		,						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	o as shown in the boxe	es above.	\$		

	TV INC					4063
	: COMPUTATION O					
	H SUBSCRIBER GRO		††		I SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec		\$	0.00
	H SUBSCRIBER GRO		<u> </u>		SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00
Fotal DSEs Gross Receipts Third Group	\$			rth Group	\$	

	COMPUTATION OF SUBSCRIBER GRO		TE FEES FOR EAC	H SUBSCF	RIBER GROUP	
COMMUNITY/ AREA	SUBSCRIBER GRO	UP				
			Ħ		SUBSCRIBER GROU	
		0	COMMUNITY/ ARE	٩		0
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
	-					
		0.00				0.00
otal DSEs	-	0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
FORTY-THIRD	SUBSCRIBER GRO	UP	FOR	TY-FOURTH	I SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	•					
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00

LEGAL NAME OF OW MID-STATE CO						S	YSTEM ID# 4063	Name
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA		. CODECTUBLIC CITY	0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated
		-						Exclusivity
								Surcharge for
		-						Partially
								Distant
								Stations
		-						
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Cross recorpts r not	Огоир		0.00	Cross rescipis ecoc	ла огоар		0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
FORT	Y-SEVENTH	SUBSCRIBER GROU	JP	FOR	RTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	١		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
T / 1 DOF			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$		

	Y TV INC					4063
	A: COMPUTATION		TE FEES FOR EAC			
FOR LY-NIN COMMUNITY/ AREA	ITH SUBSCRIBER GR	0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	<u>0</u>
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs	-	0.00	Total DSEs			0.00
oss Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
FIFTY-FIF	ST SUBSCRIBER GR	ROUP	FIF	TY-SECONE	SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
otal DSEs ross Receipts Third Group	<u> </u>	0.00	Total DSEs Gross Receipts Fou	ırth Group	\$	0.00

	: COMPUTATION O D SUBSCRIBER GRO					
COMMUNITY/ AREA	D SUBSCRIBER GRO					
			H		I SUBSCRIBER GROU	
		0	COMMUNITY/ ARE			0
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
	H SUBSCRIBER GRO		Ħ		H SUBSCRIBER GROU	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
······································						
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
Total DSEs Gross Receipts Third Group	\$			rth Group	\$	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIFTY-SEVENTH SUBSCRIBER GROUP FIFTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA		IUNITY	LE SYSTEM: TV INC					4063
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE								
CALL SIGN DSE CA		SEVENTH	SUBSCRIBER GROU		H .		I SUBSCRIBER GRO	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE otal DSEs 0.00 Total DSEs 0.00 Total DSEs 0.00 scross Receipts First Group \$ 0.00 Base Rate Fee Sirst Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	COMMUNITY AREA			U				U
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	CALL SIGN	DSE	CALL SIGN	DSE			CALL SIGN	DSE
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN								
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN								
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN								
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN			_					
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN								
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN								
Siross Receipts First Group Rase Rate Fee First Group Siross Receipts Second Group Base Rate Fee Second Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA OCCOMMUNITY/ AREA CALL SIGN DSE CALL SIGN								
Siross Receipts First Group Rase Rate Fee First Group Siross Receipts Second Group Base Rate Fee Second Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA OCCOMMUNITY/ AREA CALL SIGN DSE CALL SIGN								
Gross Receipts First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL								
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN								
Stross Receipts First Group Sase Rate Fee First Group Sase Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN								
STOSS Receipts First Group STORMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE								
Base Rate Fee First Group FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE	otal DSEs	•		0.00	Total DSEs	•		0.00
FIFTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN D	Fross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA OCALL SIGN DSE CALL SIGN DSE								
OMMUNITY/ AREA O COMMUNITY/ ARE	ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	FIF	ΓY-NINTH	SUBSCRIBER GROU	JP			SUBSCRIBER GRO	JP
otal DSEs 0.00 Total DSEs 0.00	OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
			_					
iross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	otal DSEs			0.00	Total DSEs			0.00
	Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00
	baco itato i co ilma c		•				•	· ·

SIXTY-FIRST	COMPUTATION O	F BASE RA	TE EEEE EOD EAG			
	SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE

otal DSEs	П	0.00	Total DSEs		11	0.00
	•	0.00		and Charles	•	0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SIXTY-THIRE	SUBSCRIBER GRO)UP	SIX	TY-FOURTH	SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00
		0.00	Base Rate Fee Fou	rth Group	\$	0.00
Base Rate Fee Third Group	\$	0.00		•	<u> </u>	

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			ATE FEES FOR EAC			
SIXTY-FIFT COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0
		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
	H SUBSCRIBER GRO		111	TY-EIGHTH	I SUBSCRIBER GROU	JP
OMMUNITY/ AREA						
MINIOINI I / AILA		0	COMMUNITY/ AREA			0
	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN				CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		DSE	Total DSEs	DSE		DSE
CALL SIGN DSE		DSE	Total DSEs	DSE		DSE

DI OCK A	TV INC					4063
			TE FEES FOR EAC			
	H SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs		<u> </u>	0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
	·				·	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
SEVENTY-FIRS	T SUBSCRIBER GRO	UP	1		SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		-	11			
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Total DSEs Gross Receipts Foul	rth Group	\$	0.00
otal DSEs Foross Receipts Third Group	\$			rth Group	\$	_

MID-STATE COOMUNIT	ABLE SYSTEM: Y TV INC				S	YSTEM ID# 4063	Name
BLOCK A	A: COMPUTATION (OF BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
SEVENTY-THIF	RD SUBSCRIBER GR	OUP	SEVEN	ITY-FOURTH	SUBSCRIBER GROU	UP	•
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	9 Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
							and Syndicat
							Exclusiv
							Surcharg
							for
							Partially
							Distant
							Stations
otal DSEs		0.00	Total DSEs	•		0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
sase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVENTY-FIF	TH SUBSCRIBER GR	OUP	SEV	ENTY-SIXTH	SUBSCRIBER GROU	UP	
	TH SUBSCRIBER GR	OUP 0	SEV COMMUNITY/ ARE		SUBSCRIBER GROU	UP 0	
			ii		SUBSCRIBER GROU		
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		DSE	CALL SIGN	DSE		DSE	

MID-STATE COOMUNITY	TV INC					4063
	COMPUTATION O					
	H SUBSCRIBER GRO		1		I SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SEVENTY-NINTI	H SUBSCRIBER GRO	UP		EIGHTIETH	I SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
otal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	orth Group	\$	0.00

LEGAL NAME OF OW MID-STATE COC						S	YSTEM ID# 4063	Name
	HTY-FIRST	COMPUTATION C SUBSCRIBER GRO		ATE FEES FOR EACH	TY-SECON	RIBER GROUP O SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA	*		U	COMMONT T/ ARE			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	•	\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				H SUBSCRIBER GRO	_	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	.A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

	TV INC					4063
			TE FEES FOR EAC			
	1 SUBSCRIBER GRO		Ħ		I SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs		-	0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Dana Data Faa Caa		¢.	0 00 1
	<u></u>		Base Rate Fee Seco		\$	0.00
	H SUBSCRIBER GRO	DUP	EIG	HTY-EIGHTH	SUBSCRIBER GROU	JP
	<u></u>			HTY-EIGHTH		
MMUNITY/ AREA	<u></u>	DUP	EIG	HTY-EIGHTH		JP
MMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
DMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
DMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
CALL SIGN DSE	1 SUBSCRIBER GRO	0 0	EIGI COMMUNITY/ AREA	HTY-EIGHTH	I SUBSCRIBER GROU	JP 0
CALL SIGN DSE CALL SIGN DSE	1 SUBSCRIBER GRO	DUP	EIGH COMMUNITY/ AREA CALL SIGN	DSE	I SUBSCRIBER GROU	JP 0
COMMUNITY/ AREA	CALL SIGN	DUP DSE 0.00	EIGH COMMUNITY/ AREA CALL SIGN Total DSEs	DSE The Group	CALL SIGN	DSE DSE DO

LEGAL NAME OF OWN MID-STATE COO						S	YSTEM ID# 4063	Name
EIGH	HTY-NINTH	COMPUTATION O SUBSCRIBER GRO	UP	ATE FEES FOR EAC	NINTIETH	RIBER GROUP I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
		_						Distant
								Stations
Total DSEs		Ш	0.00	Total DSEs		1	0.00	
	· roun	•	0.00		and Craun	•	0.00	
Gross Receipts First (oroup.	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		††		SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood	the base ra ck 3, line 1,	te fees for each subs	criber group	as shown in the boxe	es above.	\$		

	TV INC					4063
			TE FEES FOR EAC			
NINETY-THIR COMMUNITY/ AREA	D SUBSCRIBER GRO	OUP 0	NINE COMMUNITY/ AREA		I SUBSCRIBER GROU	<u>JP</u> 0
		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	····					
otal DSEs	-	0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
se Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
NINETY-FIFT	H SUBSCRIBER GRO	UP	NI	NETY-SIXTH	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					Ш	
otal DSEs		0.00	Total DSEs			0.00
otal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Foul	rth Group	\$	0.00

MID-STATE COOMUNITY	BLE SYSTEM: 'TV INC					4063
	: COMPUTATION O					
	H SUBSCRIBER GRO		i i		I SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
NINETY-NINT	H SUBSCRIBER GRO	UP	ONE H	HUNDREDTH	I SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					1.1	
otal DSEs		0.00	Total DSEs			0.00
otal DSEs cross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00

MID-STATE COOMUNITY	LE SYSTEM: TV INC				S	4063
			TE FEES FOR EAC			
ONE HUNDRED FIRST	SUBSCRIBER GRO				SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
ONE HUNDRED THIRD	SUBSCRIBER GRO	JP	ONE HUNDRE	ED FOURTH	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Gross Receipts Four	th Group	\$	0.00
Fross Receipts Third Group				•		
ross Receipts Third Group						

	TV INC				5	4063
			TE FEES FOR EAC			
ONE HUNDRED FIFTI	1 SUBSCRIBER GRO		i i		I SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
ONE HUNDRED SEVENT		UP	ONE HUNDR	ED EIGHTH	I SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	···					
otal DSEs		0.00	Total DSEs			0.00
otal DSEs ross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Four	th Group	\$	0.00

MID-STATE COOMUNITY	BLE SYSTEM: TV INC				S	4063
			TE FEES FOR EAC			
ONE HUNDRED NINTI	1 SUBSCRIBER GRO		ONE HUND		I SUBSCRIBER GROU	<u>JP</u> 0
COMMUNITY/ AREA		0				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
					<u>-</u>	
ase Rate Fee First Group	\$	0.00				
	4	0.00	Base Rate Fee Seco	ond Group	\$	0.00
ONE HUNDRED ELEVENTI			ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	
ONE HUNDRED ELEVENTI				D TWELVTH		
ONE HUNDRED ELEVENTI		DUP	ONE HUNDRE	D TWELVTH		JP
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTION	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	1 SUBSCRIBER GRO	0 0	ONE HUNDRE	D TWELVTH	I SUBSCRIBER GROU	JP 0
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ONE HUNDRED ELEVENTI COMMUNITY/ AREA CALL SIGN DSE Otal DSEs	1 SUBSCRIBER GRO	DUP	ONE HUNDRE COMMUNITY/ AREA CALL SIGN	D TWELVTH A DSE	I SUBSCRIBER GROU	JP 0
ONE HUNDRED ELEVENTI	CALL SIGN	DUP DSE 0.00	ONE HUNDRE COMMUNITY/ AREA CALL SIGN Total DSEs	D TWELVTH	CALL SIGN	DSE DSE O.00

LEGAL NAME OF OWNE						S	YSTEM ID# 4063	Name
ONE HUNDRED THIS			JP	li	URTEENTH	IBER GROUP SUBSCRIBER GROI		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		_						Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						

Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
	г				- · F	·		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	ne base rat	e fees for each subsc space L (page 7)	riber group	as shown in the boxe	s above.	\$		

	4063							MID-STATE COON
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (Bl
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROL	NTEENTH	NE HUNDRED SEVE
Compu	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Ra								
and		-						
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	0.00			Total DSEs	0.00			Total DSEs
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	3ase Rate Fee First G
	JP	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TV	JP	SUBSCRIBER GROL	NTEENTH	ONE HUNDRED NI
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN				CALL SIGN		

MID-STATE COOMUNITY	BLE SYSTEM: TV INC				S	YSTEM ID# 4063	
	COMPUTATION O		11				
ONE HUNDRED TWENTY-FIRS	T SUBSCRIBER GRO	<u>0</u>	ONE HUNDRED TWE		SUBSCRIBER GROUP	0	
COMMUNITY AREA		U	COMMONT I/ AREA				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs	•		0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWENTY-THIR	O SUBSCRIBER GROU	P	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUF)	
DMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs			0.00	
otal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	orth Group	\$	0.00	

LEGAL NAME OF OW MID-STATE COC						S	4063	Name
	/ENTY-FIFTH	COMPUTATION OF SUBSCRIBER GROUP		it .	ENTY-SIXTH	RIBER GROUP I SUBSCRIBER GROUP	0	9
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
					<u></u>			for Partially
					<u></u>			Distant
								Stations
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROUP		11		I SUBSCRIBER GROUP)	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW MID-STATE COC						S	YSTEM ID# 4063	Name
				TE FEES FOR EAC				
COMMUNITY/ AREA		SUBSCRIBER GROUP	0	COMMUNITY/ ARE		SUBSCRIBER GROUP	0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated Exclusivity
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Total DSEs			0.00	Total DSEs		Į.I.	0.00	
Gross Receipts First	Croup	¢	0.00	Gross Receipts Sec	and Croup	•	0.00	
Gloss Receipts Filst	Group	\$	0.00	Gioss Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED TH	IRTY-SECOND	SUBSCRIBER GROUP)	
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE						S	YSTEM ID# 4063	Nam
Bl	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
	RTY-THIRD	SUBSCRIBER GROUP		H .		I SUBSCRIBER GROUP)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computa of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	Base Rate
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otal DSEs			0.00	Total DSEs			0.00	
iross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED THII	RTY-FIFTH	SUBSCRIBER GROUP)	ONE HUNDRED	THIRTY-SIXTH	I SUBSCRIBER GROUP)	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ase Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	

CALL SIGN DSE CALL SIGN D CALL SIGN CALL SIGN CALL SIGN D CALL SIGN CALL SIGN	.00 G .00 B .00 C	CALL SIGN CALL SIGN Cotal DSEs Gross Receipts Secon	DSE d Group	SUBSCRIBER GROUP	0 DSE 0.00 0.00 0.00 0.00
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CALL SIGN DSE CALL SIGN D CALL SIGN CALL SIGN D CALL SIGN	.00 G.00 B.	CALL SIGN CALL SIGN Cotal DSEs Cotal DSEs Cross Receipts Secon Consider Fee Secon ONE HUNDRED	d Group	\$	0.00 0.00 0.00
Total DSEs Gross Receipts First Group Base Rate Fee First Group ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 To	CALL SIGN Cotal DSEs Gross Receipts Secon ONE HUNDRED	d Group	\$	0.00 0.00 0.00
Gross Receipts First Group \$ 0.0 Base Rate Fee First Group \$ 0.0 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Gross Receipts First Group \$ 0.6 Base Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Gross Receipts First Group \$ 0.6 Base Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Gross Receipts First Group \$ 0.6 Base Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Gross Receipts First Group \$ 0.6 Base Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Sross Receipts First Group \$ 0.6 Sase Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
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ase Rate Fee First Group \$ 0.0 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
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\$ 0.6 sase Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Sross Receipts First Group \$ 0.6 Sase Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Gross Receipts First Group \$ 0.6 Base Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Gross Receipts First Group \$ 0.6 Base Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Sross Receipts First Group \$ 0.6 Sase Rate Fee First Group \$ 0.6 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 G	Gross Receipts Secon	d Group	\$	0.00 0.00
Base Rate Fee First Group \$ 0.0 ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP COMMUNITY/ AREA	.00 B	Sase Rate Fee Secon	d Group	\$	0.00
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COMMUNITY/ AREA					
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Total DSEs 0.0	. 00 To	otal DSEs			0.00
Gross Receipts Third Group \$ 0.0	.00 G	Gross Receipts Fourth	Group	\$	0.00
Base Rate Fee Third Group \$ 0.	.00	Base Rate Fee Fourth	Group	\$	0.00

	TV INC					YSTEM ID# 4063	Na
BLOCK A	: COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FORTY-FIRE	ST SUBSCRIBER GROU		H		SUBSCRIBER GROUP)	ç
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Comp
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Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORTY-THIF	RD SUBSCRIBER GROU	JP	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
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	D SUBSCRIBER GROU		ii –		SUBSCRIBER GROUF		
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LEGAL NAME OF OW MID-STATE COC						S	4063	Name
ONE HUNDRED F	ORTY-FIFTH	COMPUTATION OF SUBSCRIBER GROUP		III .	ORTY-SIXTH	RIBER GROUP I SUBSCRIBER GROUP		9
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Total DSEs	-		0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
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		SUBSCRIBER GROUP		ii e		I SUBSCRIBER GROUP	_	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN						S	YSTEM ID# 4063	Name
B ONE HUNDRED FOR				ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
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Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FIR	TY-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFT	Y-SECONE	SUBSCRIBER GRO	UP	1
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Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
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Base Rate Fee: Add t Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

VINC 40	ID# 063 Name
OMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
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ioss Receipts Filst Gloup	\$	0.00	Gioss Neceipis Seco	ilia Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
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OF CABLE SYSTEM: SYST	TEM ID# 4063 Name
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Base Rate Fee First Group SIXTY-SEVENT	\$	0.00	Base Rate Fee Secon	nd Group TY-EIGHTH		UP	
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SIXTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SIX COMMUNITY/ AREA	nd Group	I SUBSCRIBER GRO	UP 0	
SIXTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SIX COMMUNITY/ AREA	nd Group	I SUBSCRIBER GRO	UP 0	
SIXTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SIX COMMUNITY/ AREA	nd Group	I SUBSCRIBER GRO	UP 0	
SIXTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SIX COMMUNITY/ AREA	nd Group	I SUBSCRIBER GRO	UP 0	
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SIXTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SIX COMMUNITY/ AREA	nd Group	I SUBSCRIBER GRO	UP 0	
SIXTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SIX COMMUNITY/ AREA	nd Group	I SUBSCRIBER GRO	UP 0	
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SIXTY-SEVENT COMMUNITY/ AREA CALL SIGN DSE Total DSEs	S H SUBSCRIBER GRO	0.00 DUP DSE 0.00	Base Rate Fee Secon SIX* COMMUNITY/ AREA CALL SIGN Total DSEs	TY-EIGHTH DSE	I SUBSCRIBER GRO	DSE O.00	

EGAL NAME OF OWNER OF CAMID-STATE COOMUNITY						4063	Name
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Gross Receipts First Group	\$	0.00	Gross Receipts Secon		\$	0.00	
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Gross Receipts First Group Gase Rate Fee First Group SEVENTY-FIRS	\$	0.00	Base Rate Fee Secon	nd Group Y-SECOND	\$	0.00	
Gross Receipts First Group Gase Rate Fee First Group SEVENTY-FIRS	\$	0.00	Base Rate Fee Secon	nd Group Y-SECOND	\$	0.00	
Gross Receipts First Group Gase Rate Fee First Group SEVENTY-FIRST COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
sross Receipts First Group sase Rate Fee First Group SEVENTY-FIRST	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
sross Receipts First Group sase Rate Fee First Group SEVENTY-FIRST	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
sross Receipts First Group sase Rate Fee First Group SEVENTY-FIRST	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRSTONMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Gase Rate Fee First Group SEVENTY-FIRST COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRSTONMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRS COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRS COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRS COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRS COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRS COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRSTONMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Gross Receipts First Group Base Rate Fee First Group SEVENTY-FIRS COMMUNITY/ AREA	\$ T SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	nd Group	\$ SUBSCRIBER GRO	0.00 UP	
Seventy-First Group Seventy-First Group Seventy-First Group CALL SIGN DSE Control DSE	\$ T SUBSCRIBER GRO	0.00 DUP DSE	Base Rate Fee Secon SEVENT COMMUNITY/ AREA CALL SIGN	Y-SECOND DSE	\$ SUBSCRIBER GRO	0.00 UP DSE	
Gross Receipts First Group SEVENTY-FIRS COMMUNITY/ AREA CALL SIGN DSE	S T SUBSCRIBER GRO	0.00 DSE 0.00	Base Rate Fee Secon SEVENT COMMUNITY/ AREA CALL SIGN Total DSEs	Y-SECOND DSE	\$ SUBSCRIBER GRO	0.00 UP	

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O O O O O O O O O O O O O O O O O O O	0.00 JP	\$ I SUBSCRIBER GROU	I Group	Base Rate Fee Secon SEVEI COMMUNITY/ AREA	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH	Base Rate Fee First Gr SEVEN COMMUNITY/ AREA
O O O O O O O O O O O O O O O O O O O	0.00 JP O DSE	\$ I SUBSCRIBER GROU	d Group TY-SIXTH DSE	Base Rate Fee Secon SEVEI COMMUNITY/ AREA CALL SIGN	JP 0	\$ SUBSCRIBER GROU	TY-FIFTH DSE	SEVEN COMMUNITY/ AREA CALL SIGN
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LEGAL NAME OF OWN						S	4063	Name
				TE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	TY-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	

Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Dana Bata Fra This is	3		0.00	Dece Date Fee 5	with Charter		0.00	
Base Rate Fee Third (oroup	\$	0.00	Base Rate Fee Fou	ни Group	\$	0.00	
se Rate Fee: Add t	he base rat			as shown in the boxe		\$	0.30	

В		TV INC					4063	Name
				TE FEES FOR EAC				
	I Y-FIRST	SUBSCRIBER GRO		ii .		SUBSCRIBER GRO		9
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
			•				<u>,</u>	
	ry-third	SUBSCRIBER GRO		ii .		I SUBSCRIBER GRO	_	
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	<u>. </u>							
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Fotal DSEs			0.00	Total DSEs			0.00	
	Group	S	0.00		ırth Group	<u> </u>	0.00	
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Gross Receipts Third (0.00	Gross Receipts Fou			0.00	
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EGAL NAME OF OWNER OF CA MID-STATE COOMUNITY						4063	Name
			TE FEES FOR EACH				
	H SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	Computa
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otal DSEs		0.00	Total DSEs			0.00	
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ross Receipts First Group	\$	0.00	Gross Receipts Secor	•			
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ase Rate Fee First Group		0.00	Base Rate Fee Secon	nd Group	\$ I SUBSCRIBER GROU	•	
ease Rate Fee First Group EIGHTY-SEVENT	\$	0.00	Base Rate Fee Secon	nd Group TY-EIGHTH		•	
EIGHTY-SEVENT	\$	0.00	Base Rate Fee Secon	nd Group TY-EIGHTH		UP	
EIGHTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group EIGHTY-SEVENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group EIGHTY-SEVENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
EIGHTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
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EIGHTY-SEVENT	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
Base Rate Fee First Group EIGHTY-SEVENT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
Base Rate Fee First Group EIGHTY-SEVENT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
Base Rate Fee First Group EIGHTY-SEVENT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
Base Rate Fee First Group EIGHTY-SEVENT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
Base Rate Fee First Group EIGHTY-SEVENT COMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group EIGHTY-SEVENT OMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
EIGHTY-SEVENT COMMUNITY/ AREA CALL SIGN DSE	\$ H SUBSCRIBER GRO	0.00 DUP	Base Rate Fee Secon EIGH COMMUNITY/ AREA	nd Group	SUBSCRIBER GRO	UP 0	
EIGHTY-SEVENT COMMUNITY/ AREA CALL SIGN DSE Total DSEs	\$ H SUBSCRIBER GRO	0.00 DSE	Base Rate Fee Secor EIGH' COMMUNITY/ AREA CALL SIGN	TY-EIGHTH DSE	SUBSCRIBER GRO	DSE	
Base Rate Fee First Group EIGHTY-SEVENT COMMUNITY/ AREA	S H SUBSCRIBER GRO	0.00	Base Rate Fee Secon EIGH¹ COMMUNITY/ AREA CALL SIGN Total DSEs	TY-EIGHTH DSE	SUBSCRIBER GRO	DSE O.00	

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9)	SUBSCRIBER GROUP	NINTIETH S		JP	SUBSCRIBER GROU	TY-NINTH	EIGHT
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EGAL NAME OF OWNER OF CAMID-STATE COOMUNITY						4063	Name
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COMMUNITY/ AREA		0	COMMUNITY/ AREA			U	Computat
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs		0.00	Total DSEs		-	0.00	
		0.00	Cross Bossinta Sass	nd Group	\$	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco				
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	•			
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Mana	LEGAL NAME OF OWNER OF CABLE SYSTEM: MID-STATE COOMUNITY TV INC 4063								
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Mana	LEGAL NAME OF OWNER OF CABLE SYSTEM: MID-STATE COOMUNITY TV INC 4063								
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN	
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	0.00 DSE	\$ SUBSCRIBER GROU	DSE	ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROUND CALL SIGN	Y-NINTH :	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 DSE	\$ SUBSCRIBER GROU	SIXTIETH DSE Group	ONE HUNDREI COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	SUBSCRIBER GROUND CALL SIGN	TY-NINTH STORY	ONE HUNDRED FIFT COMMUNITY/ AREA CALL SIGN Total DSEs	

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MID-STATE COOMUNITY TV INC 4063 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** 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 and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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