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.

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:						
Accounting		2022/2						
Period								
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. 06149 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM RCN TELECOM SERVICES OF PHILADELPHIA INC							
					06149	720222		
					061497	2022/2		
		650 COLLEGE RD E STE 3100 PRINCETON NJ 08540-6659						
С		STRUCTIONS: In line 1, give any business or trade names used to i mes already appear in space B. In line 2, give the mailing address o						
System	1	IDENTIFICATION OF CABLE SYSTEM:						
		MAILING ADDRESS OF CABLE SYSTEM:						
	2	(Number, street, rural route, apartment, or suite number)						
	—	(City, town, state, zip code)						
D	Ins	tructions: For complete space D instructions, see page 1b. Identify	y only the frst comm	nunity served below and re	list on page	ə 1b		
Area	with	h all communities.	•					
Served		CITY OR TOWN	STATE					
First Community		Clifton Heights	PA					
Community	В	Below is a sample for reporting communities if you report multiple ch						
	Ald	CITY OR TOWN (SAMPLE)	STATE MD	CH LINE UP	SUE	3 GRP#		
Sample		iance	MD	B		2		
	Gering MD B					3		
form in order to pro numbers. By provid search reports prep	cess y ling Pl pared f	tion 111 of title 17 of the United States Code authorizes the Copyright Offce to collect t your statement of account. PII is any personal information that can be used to identify o II, you are agreeing to the routine use of it to establish and maintain a public record, wh for the public. The effect of not providing the PII requested is that it may delay process ements of account, and it may affect the legal suffciency of the fling, a determination th	or trace an individual, su hich includes appearing i ing of your statement of	ch as name, address and telephon n the Offce's public indexes and in account and its placement in the	ne			

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

3-2-23

FORM SA3E. PAGE 1b.						
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#			
RCN TELECOM SERVICES OF PHILADELPHIA INC			061497			
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses						
below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up "A" in the appropriate column below or leave th on a partially distant or partially permitted basis in the DSE Schedule, associate each re designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-commu	e column blank. If levant community nity basis, associa	you report any sta with a subscriber ate each communi	ations group, ty with a			
channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns b		p designated by a	number	_		
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#			
Clifton Heights	PA			First		
Crum Lynne	PA			Community		
Darby	PA					
Drexel Hill	PA					
Essington	PA					
Folcroft	PA			See instructions for		
Folsom	PA			additional information		
Glenolden	PA			on alphabetization.		
Havertown	PA					
Holmes	PA					
Lansdowne	PA			Add rows as necessary.		
Morton	PA			Add rows as necessary.		
Norwood	PA					
Prospect Park	PA					
Ridley Park	PA					
Sharon Hill	PA					
Springfield	PA					
Swarthmore	PA					
Upper Darby	PA					
Woodlyn	PA					

N a sea a	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC									
	SECONDARY TRANSMISSION	SERVICE: SU	IBSCRI	BERS AND RA	ATES					
E	In General: The information in s			0		,				
	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information									
Secondary	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).									
ransmission ervice: Sub-	Number of Subscribers: Bot	i (June 30 or D n blocks in sna	ecempe ce E ca	er 31, as the ca Il for the numb	ase may be er of subso	e). There to the ca	hle system	broken		
scribers and	down by categories of secondar	•								
Rates	each category by counting the n									
	separately for the particular serv									
	Rate: Give the standard rate of	-	-	-				-		
	unit in which it is generally billed category, but do not include disc					d rate variation	s within a	particular rate		
	Block 1: In the left-hand block					ondary transmi	ssion servi	ce that cable		
	systems most commonly provide	•		-		•				
	that applies to your system. Not									
	categories, that person or entity									
	subscriber who pays extra for ca					in the count ur	nder "Servi	ce to the		
	first set" and would be counted of Block 2: If your cable system					service that are	different	rom those		
	printed in block 1 (for example, t									
	with the number of subscribers a									
	sufficient.	0016.4			1	-				
	BL	OCK 1 NO. OF	:				BLOC	NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SE	RVICE	SUBSCRIBERS	RATE	
	Residential:									
	Service to first set		5,125	\$ 21.32						
	 Service to additional set(s) 		37	\$ 8.48						
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		75	\$ 10.00						
	Converter									
	Residential									
	Non-residential									
		<u> </u>								
	SERVICES OTHER THAN SEC	-								
F	In General: Space F calls for ra		,	ormation with re	senant to a	I		vices that were		
	I not covered in space F that is f	hose services			•	, ,				
-					combinatio	on with any sec	ondary trar	nsmission		
Services	service for a single fee. There a	re two exceptio	ons: you	do not need to	combinatio give rate	on with any second information cor	ondary trar cerning (1	nsmission) services		
Services Other Than	service for a single fee. There a furnished at cost or (2) services	re two exceptio or facilities furr	ons: you nished t	do not need to	combinatio give rate ers. Rate ir	on with any seco information cor information shou	ondary trar cerning (1 Id include	nsmission) services both the		
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RCN Telecom Services of Philadelphia Inc Page 2 - Section F- Block 2 Additional Services Other Than Secondary Transmissions:Rate

Service	Туре		Retail Rate
TEN	Adult Premium	\$	24.95
Penthouse TV	Adult Premium	\$	24.95
Aapka Colors	International Premium	\$	14.95
ART-Arabic	International Premium	\$	12.95
CCTV4	International Premium	\$	9.95
CTI Zhong Tian	International Premium	\$	11.95
CCTV4/CTI Zhong Tian	International Premium	\$	11.95
The Filipino Channel (TFC)	International Premium	\$	11.95
GMA Pinoy TV	International Premium	\$	12.95
GMA Life TV	International Premium	\$	9.95
GMA Pinoy/TFC	International Premium	\$	19.95
GMA Life/GMA Pinoy/TFC	International Premium	\$	29.95
GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	29.95
GMA Life/GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	35.95
TV-5 Monde	International Premium	\$	9.95
Antenna Satellite	International Premium	\$	14.95
Mega Cosmos	International Premium	\$	11.95
Antenna Satellite/Mega Cosmos	International Premium	\$	25.95
RAITALIA	International Premium	\$	9.95
TV Japan	International Premium	\$	24.95
MBC (Muhwa Broadcasting Corporation)	International Premium	\$	12.95
TVK24	International Premium	\$	12.95
TVK24/MBC	International Premium	\$	19.95
MYX	International Premium	\$	4.95
TVN24	International Premium	\$	9.95
iTVN	International Premium	\$	14.95
TVN24/iTVN	International Premium	\$	19.95
RTPi	International Premium		9.95
TV Globo	International Premium	\$	19.99
PFC	International Premium	\$	19.95
TV Globo/PFC	International Premium	\$ \$	29.95
RTVI	International Premium	\$ ¢	9.95
RTVI Plus	International Premium	\$ \$	9.95
RTVI/RTVI Plus	International Premium	Ŧ	14.95
Channel One Russia (C1R)	International Premium	\$	14.95
Russian Television Network (RTN)	International Premium	\$	15.95
NTV America	International Premium	\$	15.95
C1R/RTN/NTV America/RTVI/RTVI Plus	International Premium	\$	28.95
ITV Gold	International Premium	\$	9.95
Star India Gold	International Premium	\$	9.95
Star One (name change to LifeOK in 2012)	International Premium	\$	9.95
Star India Plus	International Premium	\$	11.95
TV Asia	International Premium	\$	14.95
Zee TV	International Premium	\$	14.95
ITV/TV Asia	International Premium	\$	17.95
ITV/Zee TV/Aapka Colors	International Premium	\$	19.95
Star Gold/Life OK/Star Plus/Aapka Colors	International Premium	\$	21.95

Service	Туре		Retail Rate
TV Asia/Zee TV	International Premium	\$	24.95
Star Gold/Life OK/Star Plus/ITV	International Premium	\$	26.95
Star Gold/Life OK/Star Plus/TV Asia	International Premium	\$	27.95
Star Gold/Life OK/Star Plus/Zee TV/Aapla Colors	International Premium	\$	34.95
Star Gold/Life OK/Star Plus/ITV/Tv Asia/Zee TV/Aapka Colors	International Premium	\$	39.95
MiVision Lite	International Premium	\$	12.00
MiVision Plus	International Premium	\$	22.95
El Paqueton	International Premium	\$	37.00
Premiere Sports	Premiere Packages	\$	6.99
Premiere News & Information	Premiere Packages	\$	4.99
Premiere Children & Family	Premiere Packages	\$	4.99
Premiere Movies & Entertainment	Premiere Packages	\$	9.99
Premiere Total (includes all 4)	Premiere Packages	\$	16.95
НВО	Premium	\$	19.95
Showtime/The Movie Channel (TMC)	Premium	\$	16.95
Cinemax	Premium	\$	9.95
Starz	Premium	\$	11.95
Showtime/TMC/Starz	Premium	\$	21.95
HD Tier	High Definition Package	\$	-
HD Expanded Tier	High Definition Package	\$	8.99
The Jewish Channel	Subscription VOD	\$	6.50
Bollywood Hits On Demand	Subscription VOD	\$	9.95
Filipino On Demand	Subscription VOD	\$	9.95
here! On Demand	Subscription VOD	\$	8.95
Anime Network On Demand	Subscription VOD	\$	6.99
Too Much for TV On Demand	Subscription VOD	\$	17.99
Disney Channel Video On Demand	Subscription VOD	\$	4.99
Fox Soccer Plus	Sports Premium	\$	14.95
MLB Extra Innings (Early Bird)	Sports Package		-
MLB Extra Innings (Regular Season)	Sports Package	\$ \$	164.99
MLB Extra Innings (Half Season)	Sports Package	\$	119.99
MLB Extra Innings (Pennant Race)	Sports Package	\$	37.49
MLS Direct Kick (Full Season)	Sports Package	\$ \$	89.00
MLS Direct Kick (Half Season)	Sports Package	\$	59.00

Primary

Transmitters:

Television

1	FORM SA3E, PAGE 3.		· · · ·		
Г	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#			
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name		
Ī	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				

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

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

 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each 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	
KJWP	2	I	No		Roxborough, PA	
KYW	3	N	No		Roxborough, PA	
WACP	4	I	No		Atlantic City, NJ	additional information on alphabetization.
WCAU	10	N	No		Roxborough, PA	un alphabetization.
WFMZ	69	I	No		Allentown, PA	
WFPA	28	I	No		Roxborough, PA	
WGTW	14	I	No		Roxborough, PA	
WHYY	12	E	No		Roxborough, PA	
WLVT	39	E	No		Allentown, PA	
WNJN	23	E	Yes	0	Montclair, NJ	
WPHL	17	I	No		Roxborough, PA	
WPPX	61	I	No		Roxborough, PA	
WPSG	57	I	No		Roxborough, PA	
WPVI	6	N	No		Roxborough, PA	
WTVE	51	I	No		Roxborough, PA	
WTXF	29	I	No		Roxborough, PA	
WUVP	24	I	No		Roxborough, PA	

Transmitters:

Television

FORM SA3E. PAGE 3.				
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome		
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	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 [se 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 ca		Primary		

76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AB	
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
wwsi	20	I	No		Philadelphia, PA
WYBE	35	Е	No		Roxborough, PA
		+			
					<u> </u>

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
KJWP	2	I	Roxborough, PA	1.000	
KYW	3 4	N	Roxborough, PA	0.250	
WACP	4 10	I N	Atlantic City, NJ Roxborough, PA	1.000 0.250	
WCAU WFMZ	69	I I	Allentown, PA	1.000	
WFPA	28	I I	Roxborough, PA	1.000	
WGTW	14	i I	Roxborough, PA	1.000	
WHYY	12	Ē	Roxborough, PA	0.250	
WLVT	39	E	Allentown, PA	0.250	
WNJN	23	Е	Montclair, NJ	0.250	0
WPHL	17	I	Roxborough, PA	1.000	
WPPX	61	I	Roxborough, PA	1.000	
WPSG	57	L	Roxborough, PA	1.000	
WPVI	6	Ν	Roxborough, PA	0.250	
WTVE	51	I.	Roxborough, PA	1.000	
WTXF	29	I	Roxborough, PA	1.000	
WUVP	24	I	Roxborough, PA	1.000	
WWSI	20	I	Philadelphia, PA	1.000	
WYBE	35	Е	Roxborough, PA	0.250	
				#N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A #N/A	
				#N/A	
				, #N/A	
				#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
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			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
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			#N/A #N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
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			#N/A	
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			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
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			#N/A #N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
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			#N/A #N/A	
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			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
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			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
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	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
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			#N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
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			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
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			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of		Space G Basis of
1. Call Sign	Number	Station 6. Location of Station	DSE	Carriage
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A	
			#N/A	
			, #N/A	
			#N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A #N/A	
			#N/A	
			#N/A #N/A	
			#N/A	

	2. B'cast Channel	3. Type of			Space G Basis of
1. Call Sign	Number	Station	6. Location of Station	DSE	Carriage
				#N/A	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television station station by your cable system during the accounting period, except (1) stations carried only on a part-time basis u	nder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sectio $76, 50(d)(2)$ and (4), $76, 64(a)(2)$ and (4), or $76, 62$ (referring to $76, 61(a)(2)$ and (4)); and (2) participations carried		Drimon
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 carrie substitute program basis, as explained in the next paragraph.	u on a	Primary Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Television
pasis under specifc FCC rules, regulations, or authorizations:	0	
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 basis. For further information concerning substitute basis stations, see page (v) of the general instructions loc in the paper SA3 form.		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. I	dentify	
each multicast stream associated with a station according to its over-the-air designation. For example, report mu	lti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exar	nple	
NETA-simulcast).		

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

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

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

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

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

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

CHANNEL LINE-UP AC								
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION			
	NUMBER	STATION		(If Distant)				
		1						
		†			<u> </u>			
		+						

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	News
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television station carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis	inder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sectic 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 carrie		Primary
substitute program basis, as explained in the next paragraph.		Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Television
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. 	e	
 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions loc 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 mu	ilti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exal	mple	
WETA-simulcast).		

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

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

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

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

1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

RCN TELECOM SERVICES OF PHILADELPHIA INC PRIMARY TRANSMITTERS: TELEVISION	064407	
PRIMARY TRANSMITTERS: TELEVISION	061497	Name
n General: In space G, identify every television station (including translator stations and low power television st carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis u FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section	under	G
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 carrie 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	ed on a	Primary Transmitters Television
pasis 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.	e	
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions loo 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 mu		
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exa NETA-simulcast).	ample	

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

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

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

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

		CHANN	AE		
1. CALL					6. LOCATION OF STATION
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
			••••••		
		[
		†			

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nema
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
RIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television stations arried by your cable system during the accounting period, except (1) stations carried only on a part-time basis u	nder	G
CC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sectio		
6.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carrie	d on a	Primary
ubstitute 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	Transmitters Television
asis under specific FCC rules, regulations, or authorizations:	program	relevision
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 loc in the paper SA3 form.	ated	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. I	dentify	
ach multicast stream associated with a station according to its over-the-air designation. For example, report mu	lti-	
ast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exar	nple	
VETA-simulcast). Activity of City the channel number the ECO has easily added to the talevision station for here described on the		

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

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

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

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

		CHANN	EL LINE-UP	AF	
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	
		f			<u> </u>
		+			

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television station station by your cable system during the accounting period, except (1) stations carried only on a part-time basis u	Inder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sectio 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 carrie		Primary
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Transmitters Television
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. 	e	
 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions loc 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 mu	Ilti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exami	mple	
WETA-simulcast).		
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the	e-air in	

to community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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

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

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

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

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television s carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis	s under [′]	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sec 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 car		Primary
substitute program basis, as explained in the next paragraph.		Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitut	te program	Television
pasis 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 t station was carried only on a substitute basis.	the	
List the station here, and also in space I, if the station was carried both on a substitute basis and also on som basis. For further information concerning substitute basis stations, see page (v) of the general instructions in the paper SA3 form.		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc	c. Identify	
each multicast stream associated with a station according to its over-the-air designation. For example, report n	nulti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for ex NETA-simulcast).	kample	

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

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

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

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

		CHANN	AH		
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	
		 			
		 			

	SYSTEM ID#
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
RIMARY TRANSMITTERS: TELEVISION	
n General: In space G, identify every television station (including translator stations and low power tele arried by your cable system during the accounting period, except (1) stations carried only on a part-time CC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network program	e basis under G
6.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain static ubstitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a su	ns carried on a Prima Transmit
asis 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 Lo station was carried only on a substitute basis.	g)—if the
List the station here, and also in space I, if the station was carried both on a substitute basis and also or basis. For further information concerning substitute basis stations, see page (v) of the general instruct in the paper SA3 form.	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ES	PN, etc. Identify
ach multicast stream associated with a station according to its over-the-air designation. For example, m ast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately	

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

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

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

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

		CHANN	Al		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
	NONDER	STATION		(II Distant)	
					<u> </u>
					<u> </u>

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television staticarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis un	nder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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		Primary
substitute program basis, as explained in the next paragraph.	uona	Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute p	program	Television
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 or basis. For further information concerning substitute basis stations, see page (v) of the general instructions location in the paper SA3 form. 		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. I	dentify	
each multicast stream associated with a station according to its over-the-air designation. For example, report mul	ti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exan	nple	
WETA-simulcast).		

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

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

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

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

		CHANN	EL LINE-UP	AJ	
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	
					<u>+</u>
			†		†

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television sta carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis u FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sectio	nder	G
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 carrie 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	d on a	Primary Transmitters Television
pasis 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 basis. For further information concerning substitute basis stations, see page (v) of the general instructions loc in the paper SA3 form.		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc.	dentify	
each multicast stream associated with a station according to its over-the-air designation. For example, report mu	lti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exar NETA-simulcast).	nple	

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

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

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

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

1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION
SIGN	NUMBER				
	NUMBER	STATION		(If Distant)	
		†	••••••		
		••••••			t

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television s carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [secti	under	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carri	ed on a	Primary
ubstitute program basis, as explained in the next paragraph.		Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute asis under specifc FCC rules, regulations, or authorizations:	e program	Television
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.	ne	
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some	e other	
basis. For further information concerning substitute basis stations, see page (v) of the general instructions lo in the paper SA3 form.	cated	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc.	Identify	
ach multicast stream associated with a station according to its over-the-air designation. For example, report m	ulti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exa	ample	

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

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

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

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

	CHANNEL LINE-UP AL							
1. CALL SIGN	2. B'CAST CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION			
	NUMBER	STATION		(If Distant)				
		 						
		1						
		†						
			••••••					
		†	••••••		t			

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television si carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis	under	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [secti		
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carri	ed on a	Primary
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Transmitters Television
basis under specific FCC rules, regulations, or authorizations:	piogram	Television
 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if th station was carried only on a substitute basis. 	ne	
· List the station here, and also in space I, if the station was carried both on a substitute basis and also on some	e other	
basis. For further information concerning substitute basis stations, see page (v) of the general instructions lo in the paper SA3 form.	cated	
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 m	ulti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exa	ample	
WETA-simulcast).		
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-th	e-air in	

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

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

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

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

		CHANN	AM		
1. CALL SIGN		3. TYPE OF			6. LOCATION OF STATION
SIGN	CHANNEL		(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
	I				
			••••••		
					†

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television stations by your cable system during the accounting period, except (1) stations carried only on a part-time basis of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections]	under	G
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carri 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	ed on a	Primary Transmitters Television
pasis 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 th station was carried only on a substitute basis. 	e	
 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions lo 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 mi	ulti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exa	ample	
NETA-simulcast).		

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

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

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

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

		AN			
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	
		+			
	. <mark>.</mark>				
					<u> </u>
		<u>+</u>			1

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television staticarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis up	nder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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 carrie		Primary
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute p	program	Transmitters Television
pasis 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 basis. For further information concerning substitute basis stations, see page (v) of the general instructions location in the paper SA3 form.		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. I	dentify	
each multicast stream associated with a station according to its over-the-air designation. For example, report mul	ti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exan	nple	
NETA-simulcast).		
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the	-air in	

its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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

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

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

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

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
			,	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television staticarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis up	nder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section 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 carrie		Primary
substitute program basis, as explained in the next paragraph.	u on a	Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute p	program	Television
pasis under specifc FCC rules, regulations, or authorizations:	U	
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 loca in the paper SA3 form.	ated	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. I	dentify	
each multicast stream associated with a station according to its over-the-air designation. For example, report mul	ti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exan	nple	
NETA-simulcast).	- 1 1	

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

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

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

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

		CHANN	AP		
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	
		†			

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television scarried by your cable system during the accounting period, except (1) stations carried only on a part-time basis	under	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sect 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 carr		Primary
substitute program basis, as explained in the next paragraph.		Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitut	e program	Television
pasis 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 t station was carried only on a substitute basis. 	he	
 List the station here, and also in space I, if the station was carried both on a substitute basis and also on som basis. For further information concerning substitute basis stations, see page (v) of the general instructions lo 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 m	nulti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for ex	ample	
WETA-simulcast).		
Column 2: Give the channel number the ECC has assigned to the television station for broadcasting over-the	he-air in	

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

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

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

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

		CHANN	AQ		
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	
	_	1			

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television stations by your cable system during the accounting period, except (1) stations carried only on a part-time basis u	nder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section $26, 50(d)(2)$ and (4) $26, 54(d)(2)$ and (4) $27, 54(d)(2)$ and (4		During and
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 carrie substitute program basis, as explained in the next paragraph.	d on a	Primary Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Television
basis under specific FCC rules, regulations, or authorizations:		relevielen
 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. 	9	
• 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 loc in the paper SA3 form.	ated	
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. I	dentify	
each multicast stream associated with a station according to its over-the-air designation. For example, report mu	lti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exar	nple	
WETA-simulcast).		

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

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

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

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

		CHANN	AR		
1. CALL					6. LOCATION OF STATION
SIGN	CHANNEL		(Yes or No)	CARRIAGE	
	NUMBER	STATION		(If Distant)	
		1			
		+			
		1			
	···•	+			
	···				
		1			
	···	+			
		1			+
	T	Ι	Ι		Ι

RCN TELECOM SERVICES OF PHILADELPHIA INC 061497 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. Prima: Transmitter Trans	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	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 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 	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
 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 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 	PRIMARY TRANSMITTERS: TELEVISION		
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Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Televis 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			Transmitters
 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 		itute program	Television
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Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example	basis. For further information concerning substitute basis stations, see page (v) of the general instruction		
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example		etc. Identify	
	each multicast stream associated with a station according to its over-the-air designation. For example, report	rt multi-	
W/FTA-simulcast)		example	
Column 2: Give the channel number the ECC has assigned to the television station for broadcasting over-the-air in	WETA-simulcast).		

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

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

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

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

	-	CHANN	EL LINE-UP	AS	
1. CALL SIGN					6. LOCATION OF STATION
SIGN	CHANNEL NUMBER	STATION	(Yes or No)	CARRIAGE (If Distant)	
	NOWBER	STATION		(II Distant)	
	··•	+			
	•	+			
		-			
		[
		 			+
		†			1

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television st carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis	Inder	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sectio 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 carrie		Primary
substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute		Transmitters Television
pasis 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.	e	
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some basis. For further information concerning substitute basis stations, see page (v) of the general instructions loc 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 mu	ılti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exa	mple	
WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the	air in	

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

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

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

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

		CHANN	EL LINE-UP	AT	
1. CALL SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
	NUMBER	STATION		(If Distant)	
					+
					+

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television carried by your cable system during the accounting period, except (1) stations carried only on a part-time basi FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [se	is under	G
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 ca 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 substitu	rried on a	Primary Transmitters Television
pasis 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 station was carried only on a substitute basis. 	the	
 List the station here, and also in space I, if the station was carried both on a substitute basis and also on sol basis. For further information concerning substitute basis stations, see page (v) of the general instructions in the paper SA3 form. 		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, e	tc. Identify	
each multicast stream associated with a station according to its over-the-air designation. For example, report	multi-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for e WETA-simulcast).	example	

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

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

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

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

CHANNEL LINE-UP AU									
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
	NUMBER	STATION	· · · ·	(If Distant)					
				, , ,					
					•				
					······				

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	N
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
n General: In space G, identify every television station (including translator stations and low power television stat carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis u FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sectio	nder	G
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 carrie		Primary
substitute program basis, as explained in the next paragraph.		Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute provider provider provider and the stational st	orogram	Television
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 basis. For further information concerning substitute basis stations, see page (v) of the general instructions loc in the paper SA3 form.		
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. I	dentify	
each multicast stream associated with a station according to its over-the-air designation. For example, report mul	ti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exan	nple	
WETA-simulcast).		

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

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

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

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

		CHANN	EL LINE-UP	UP AV		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	NOWIDER	STATION		(II Distant)		

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	Name
PRIMARY TRANSMITTERS: TELEVISION		
In General: In space G, identify every television station (including translator stations and low power television st carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis	,	G
FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section	ons	
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carri	ed on a	Primary
substitute program basis, as explained in the next paragraph.		Transmitters
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute	program	Television
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 th station was carried only on a substitute basis. 	le	
• 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 log 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 mu	ulti-	
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for exa	ample	
WETA-simulcast).		
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the		
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the cl	hannel	
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 nonco	ommercial	

educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

ACCOUNTING PER	IOD: 2022/2							FORM SA3E. PAGE 4.		
Name		NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#TELECOM SERVICES OF PHILADELPHIA INC061497								
Н	PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.									
Primary Transmitters: Radio	 Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). 									
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION		
							-, -			

RCN TELECOM SERVI	CES OF F	PHILADELPH					061497	Name
SUBSTITUTE CARRIAGE	: SPECIA		NT AND PROGRAM LOG	i				
In General: In space I, identi	fy every nor	network televis	ion program broadcast by a	distant station	that your cable	system ca	arried on a	I
substitute basis during the ac explanation of the programm	ing that mus	t be included in	this log, see page (v) of the					Substitute Carriage:
SPECIAL STATEMENT During the accounting per	-			s any nonne	work television	program		Special
broadcast by a distant stat	tion?					Yes	XNo	Statement and Program Log
Note: If your answer is "No' log in block 2.			je blank. If your answer is "	Yes," you mu	ist complete the	e program		
2. LOG OF SUBSTITUTE			to line. I lee abbroviations	whorever pee	aibla if thair ma	ooning io		
In General: List each subst clear. If you need more spa Column 1: Give the title period, was broadcast by a	ce, please a of every no	attach addition nnetwork telev	al pages. ision program (substitute p	rogram) that,	during the acco	ounting	a n	
under certain FCC rules, re	gulations, o	r authorization	s. See page (vi) of the gen	eral instructio	ons located in th	ie paper	UII	
SA3 form for futher informatititles, for example, "I Love L	ucy" or "NE	BA Basketball:	76ers vs. Bulls."		List specific pr	ogram		
Column 3: Give the call	sign of the s	station broadca	r "Yes." Otherwise enter "N isting the substitute progra	m.				
Column 4: Give the broat the case of Mexican or Can			ne community to which the community with which the s			C or, in		
Column 5: Give the mon first. Example: for May 7 giv		when your sys	tem carried the substitute p	orogram. Use	numerals, with	the mont	h	
	es when the		gram was carried by your o				,	
stated as "6:00–6:30 p.m."	•				·			
to delete under FCC rules a	and regulation	ons in effect du		; enter the let	ter "P" if the list	ed pro		
gram was substituted for proeffect on October 19, 1976.		that your syste	em was permitted to delete	under FCC r	ules and regula	tions in		
				WHE	EN SUBSTITU	TE	7. REASON	
S	1		1	CARRIAGE OCCURRED				
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM —	то	DELETION	
				··				
					_			
					_			
					_			

FORM SA3E. PAGE 5.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

ACCOUNTING PERIOD: 2022/2

. .

SYSTEM ID#

ACCOUNTING PERIOD: 2022/2

FORM SA3E. PAGE 6.

			SYSTEM						SYSTEM ID#		
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC 06										
J Part-Time Carriage Log	 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m." 										
			DA	TES AND HO	URS OF	PART-TIME CAR	RIAGE				
	CALL SIGN	WHEN	I CARRIAGE O			CALL SIGN	WHEN	N CARRIAGE OC			
	CALL SIGN	DATE	H0 FROM	DURS TC)	CALL SIGN	DATE	HO FROM	URS TO		
		27112		-					-		
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FORM	SA3E. PAGE 7.		
LEGA	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
RC	N TELECOM SERVICES OF PHILADELPHIA INC	061497	Hamo
Inst all a (as i page	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount you pay. En amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmidentifed in space E) during the accounting period. For a further explanation of how to compute this are (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	nission service	K Gross Receipts
 Instru Con Con If yo feet If yo according 	YRIGHT ROYALTY FEE Joctions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. bur system did not carry any distant television stations, leave block 3 blank. Enter the amount of the r from block 1 on line 1 of block 4, and calculate the total royalty fee. bur system did carry any distant television stations, you must complete the applicable parts of the DS companying this form and attach the schedule to your statement of account.	E Schedule	L Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on ck 3 below.	line 1 of	
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on lin elow.	e 2 in block	
▶ If pa	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entere block 4 below.	d on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 per system's gross receipts for the accounting period.		
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	1,586,137.77	
	This is your minimum fee. \$	16,876.51	
Block 2 Block	 DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information y space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you mu "Yes" in this block. Did your cable system carry any distant television stations during the accounting period? X Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete line 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 	st check	
3	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	16,876.51	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 zero.	0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here \$	17,601.51	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) general instructions located in the paper SA3 form for more information.)	of the	

ACCOUNTING PERIO	JU: 2022/2	FORM SA3E. PAGE 8.						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497						
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.							
	1. Enter the total number of channels on which the cable system carried television broadcast stations	19						
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	289						
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED : (Identify an individual we can contact about this statement of account.)							
Be Contacted for Further Information	Name Greg Russo Telephone	732-580-6085						
	Address 650 College Road East, Suite 3100							
	(Number, street, rural route, apartment, or suite number) Princeton, NJ 08540							
	(City, town, state, zip)							
	Email gregory.russo@astound.com Fax (optional)							
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regula	ations.)						
O Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)							
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space E	3; or						
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s in line 1 of space B and that the owner is not a corporation or partnership; or	system as identified						
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	er of the cable system						
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained 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)] 	d herein						
	X /s/ Parisa Salehani							
	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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa							
	Typed or printed name: Parisa Salehani							
	Title: Senior Vice President - Controller (Title of official position held in corporation or partnership)							
	Date: March 1, 2023							

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

	NER OF CABLE SYSTEM: SYSTEM ID# 1061497	Name
The Satellite Ho lowing sentence "In deten service	CATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- e: mining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
paper SA3 form	nation on when to exclude these amounts, see the note on page (vii) of the general instructions in the n. punting period did the cable system exclude any amounts of gross receipts for secondary transmissions	Concerning Gross Receip Exclusion
made by satellit	te carriers to satellite dish owners?	
YES. Enter	the total here and list the satellite carrier(s) below	
Name Mailing Address	Name Mailing Address	
INTEDECT /	ASSESSMENTS	
You must comp	lete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
You must comp For an explana		Q Interest Assessment
You must comp For an explana Line 1 Enter th	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	
You must comp For an explanat Line 1 Enter th Line 2 Multiply	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q Interest Assessment
You must comp For an explanat Line 1 Enter th Line 2 Multiply Line 3 Multiply	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form. The amount of late payment or underpayment	
You must comp For an explanat Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form. The amount of late payment or underpayment	
You must comp For an explanat Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply * To view th contact th	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form. The amount of late payment or underpayment	
You must comp For an explanat Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply * To view th contact th ** This is the NOTE: If you an please list below	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form. The amount of late payment or underpayment	
You must comp For an explanat Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply * To view th contact th ** This is the NOTE: If you an please list below filing. Owner	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form. The amount of late payment or underpayment	
You must comp For an explanat Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply * To view th contact th ** This is the NOTE: If you an	tion of interest assessment, see page (viii) of the general instructions in the paper SA3 form. The amount of late payment or underpayment	

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 filing, a determination that would be made by a court of law.

FORM SA3E. PAGE9.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

to June 25, 1981, pursuant to the former FCC rules. 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

DSE SCHEDULE. PAGE 11.

COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distantthat 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 DSF 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

and E

35 mile zone

· 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.

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

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows: • When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains

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

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

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

rent FCC ld be within th stations ity and Bo- the local D, and E.	STATION A (independent) B (independent) C (part-time) D (part-time) E (network)	DSE 1.0 1.0 0.083 0.139	CITY Santa Rosa Rapid City	OUTSIDE LOCAL SERVICE AREA OF Stations A, B, C, D, E Stations A and C		SS RECEIPTS UBSCRIBERS \$310,000.00		
th stations ity and Bo- the local	B (independent) C (part-time) D (part-time) E (network)	1.0 0.083 0.139	Rapid City	Stations A, B, C, D ,E	FROM S			
ity and Bo- the local	C (part-time) D (part-time) E (network)	0.083 0.139	Rapid City			\$310,000.00		
the local	D (part-time) E (network)	0.139		Stations A and C				
	E (network)		Dedese Deve			100,000.00		
D, and E.	```		Bodega Bay	Stations A and C		70,000.00		
		0.25	Fairvale	Stations B, D, and E		120,000.00		
	TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS		\$600,000.00		
· ~ 、	Minimum Fee Total Gross I	Receipts		\$600,000.00		<u> </u>		
A and C	x .01064							
e zone				\$6,384.00				
	First Subscriber Group		Second Subsc	riber Group	Third Subscriber Group			
-	(Santa Rosa)		(Rapid City and	l Bodega Bay)	(Fairvale)			
Fairvale								
Talivale	Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00		
	DSEs	2.472	DSEs	1.083	DSEs	1.389		
	Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03		
	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 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 .007	01 x .083 = 98.91	\$120,000 x .00701 x .389 =	327.23		
a /	Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03		
	airvale	Gross receipts DSEs Base rate fee \$310,000 x .01064 x 1.0 =	Gross receipts \$310,000.00 DSEs 2.472 Base rate fee \$6,497.20 \$310,000 x .01064 x 1.0 = 3,298.40 \$310,000 x .00701 x 1.472 = 3,198.80	Gross receipts \$310,000.00 Gross receipts DSEs 2.472 DSEs Base rate fee \$6,497.20 Base rate fee \$310,000 x .01064 x 1.0 = 3,298.40 \$170,000 x .010 \$310,000 x .00701 x 1.472 = 3,198.80 \$170,000 x .007	Gross receipts \$310,000.00 Gross receipts \$170,000.00 DSEs 2.472 DSEs 1.083 Base rate fee \$6,497.20 Base rate fee \$1,907.71 \$310,000 x .01064 x 1.0 = 3,298.40 \$170,000 x .01064 x 1.0 = 1,808.80 \$310,000 x .00701 x 1.472 = 3,198.80 \$170,000 x .00701 x .083 = 98.91	Gross receipts \$310,000.00 Gross receipts \$170,000.00 Gross receipts DSEs 2.472 DSEs 1.083 DSEs Base rate fee \$6,497.20 Base rate fee \$1,907.71 Base rate fee \$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 = \$310,000 x .00701 x 1.472 = 3,198.80 \$170,000 x .00701 x .083 = 98.91 \$120,000 x .00701 x .389 =		

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

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

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST RCN TELECOM SERVICES OF PHILADELPHIA INC 0											
	RCN TELECOM SERVICES OF PHILADELPHIA INC 061497 SUM OF DSEs OF CATEGORY "O" STATIONS: • Add the DSEs of each station. • Add the DSEs of each station. • D.25 Enter the sum here and in line 1 of part 5 of this schedule. 0.25											
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
Computation	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- mercial educational station, give the DSE as ".25."											
Category "O"	CATEGORY "O" STATIONS: DSEs											
Stations	CALL SIGN	DSE	CALL SIGN DSE									
	WNJN	0.250										
Add rows as												
necessary. Remember to copy all												
formula into new												
rows.												
	[I										

Name		OWNER OF CABLE SYSTEM: OM SERVICES OF PH	HILADELPH	IIA INC				:	8YSTEM ID# 061497
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should o Column 3 Column 4 be carried out Column 5 give the type-v Column 6	st the call sign of all distar Processing the station, give the correspond with the inform For each station, give the Divide the figure in colure at least to the third decime For each independent sign	e number of h nation given in le total numbe mn 2 by the fig al point. This tation, give the umn 4 by the f	nours your cable system a space J. Calculate only er of hours that the static gure in column 3, and gi is the "basis of carriage e "type-value" as "1.0." F figure in column 5, and g	carried the static one DSE for each on broadcast ove ve the result in do value" for the sta For each network	on during the a ch station. r the air during ecimals in colu ation. cor noncomme column 6. Rou	the accounti imn 4. This fig ercial education and to no less	ng period. gure must onal station, than the	
Capacity			CATEGOR	Y LAC STATIONS:	COMPUTAT	ION OF DS	Es		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	JRS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAO VALUE	GE	5. TYPE VALUE		SE
			÷		=	x		=	
								=	
			÷		=	X		=	
4 Computation of DSEs for Substitute- Basis Stations	Was carried tions in effe Broadcast of space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each sta I by your system in substit oct on October 19, 1976 (a one or more live, nonnetwo For each station give the r This figure should corresp Enter the number of days Divide the figure in column Fhis is the station's DSE (ution for a pro is shown by the rk programs d number of live bond with the in the calenda in 2 by the figu	ogram that your system in the letter "P" in column 7 uring that optional carria a, nonnetwork programs information in space I. ar year: 365, except in a re in column 3, and give	was permitted to of space I); and ge (as shown by t carried in substit leap year. the result in colu	delete under F he word "Yes" i ution for progr umn 4. Round	CC rules and in column 2 of ams that were to no less tha	e deleted an the third	
			JBSTITUT	E-BASIS STATION					
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA IN YEA	YS	1. CALL SIGN	2. NUN OF PRO	IBER IGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			-				÷ -		=
				=			÷		=
				=			÷		=
			••••••	=			÷ +		
	Add the DSEs	OF SUBSTITUTE-BASIS	S STATIONS:				0.00		
5		ER OF DSEs: Give the among sapplicable to your system		boxes in parts 2, 3, and	4 of this schedule	e and add them	to provide the	e total	
Total Number	1. Number	of DSEs from part 2 ●				►		0.25	
of DSEs	2. Number	of DSEs from part 3●				•		0.00	
	3. Number	of DSEs from part 4 ●				►		0.00	
	TOTAL NUMBE	R OF DSEs					•		0.25

DSE SCHEDULE. P.	AGE 13.							ACCOUNTIN	g Period: 2022/2
	WNER OF CABLE S		ELPHIA INC)			S	YSTEM ID# 061497	Name
In block A: • If your answer if ' schedule.	ck A must be comp 'Yes," leave the rer 'No," complete bloc	mainder of pa cks B and C b	elow.	of the DSE schedu		complete part :	8, (page 16) of the		6 Computation of
Is the cable system	n located wholly ou			TELEVISION M/ er markets as defin		ion 76.5 of EC	C rules and regula	tions in	3.75 Fee
effect on June 24,									
			O NOT COMP	LETE THE REMAII	NDER OF PA	RT 6 AND 7.			
X No—Comp	lete blocks B and (C below.							
		BLOO	CK B: CARF		MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	gulations prio e DSE Sched	r to June 25, 1 ule. (Note: Th	part 2, 3, and 4 of tl 1981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted statio	ns, see the	-	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rul A Stations carrie 76.61(b)(c)] B Specialty static	les and regula ed pursuant to on as defined	ations cited be the FCC mar in 76.5(kk) (76	sis on which you cau low pertain to those ket quota rules [76. 5.59(d)(1), 76.61(e)	e in effect on J 57, 76.59(b), (1), 76.63(a) r	June 24, 1981. 76.61(b)(c), 76 referring to 76.	5.63(a) referring to		
 C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream. 									
Column 3:		stations iden	tified by the le	parts 2, 3, and 4 of tter "F" in column 2			rksheet on page 14	4 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	
WNJN	С	0.25							
								0.25	
							<u> </u>	0.20	
		В	LOCK C: CC	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	total number of I	DSEs from p	oart 5 of this	schedule				0.25	
Line 2: Enter the	sum of permitted	d DSEs from	block B abo	ve				0.25	
				of DSEs subject 7 of this schedule		ate.		0.00	
Line 4: Enter gro	ess receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375 a	nd enter sur	n here						permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line (3				X	-	carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

EGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#RCN TELECOM SERVICES OF PHILADELPHIA INC061497									
								0.005	6
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
									Computatio 3.75 Fee
			+-						
			•						
			•			+			
			•		+	+			
			•						
			•· ••••••••			.			
			•			•			
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			+						
			+-						
					_				
		[II			[]			

ACCOUNTING PERIOD: 2022/2

	•									EDULE. PAGE 14.
Name	LEGAL NAME OF OWN								S	YSTEM ID#
	RCN TELECOM	SERVICES	OF PHILADEL	PHIA INC						061497
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:									
	1.0011				=D				6 0	
	1. CALL SIGN	2. PRIO DSE		COUNTING ERIOD		4. BASIS OF CARRIAGE	-	RESENT DSE	6. P	ERMITTED DSE
	SIGN	DSE	P	ERIOD		CARRIAGE		DSE		DSE
			•	•				•		
7	Instructions: Block A	must be comp	leted.							
	In block A:									
Computation		•	e blocks B and C, b							
of the	If your answer is '	'No," leave blo	cks B and C blank a	and complete pa	art	8 of the DSE schedule				
Syndicated			BLOCI	K A: MAJOR	TE	ELEVISION MARKE	ΕT			
Exclusivity										
Surcharge	 Is any portion of the c 	able system wit	thin a top 100 major	television marke	et a	s defned by section 76.	5 of FCC ru	les in effect June	e 24, 198	1?
	Yes—Complete	blocks B and (2			No—Proceed to	part 8			
				o:			(
	BLOCK B: C	arriage of VHF	/Grade B Contour S	Stations	4	BLOCK	CC: Compu	utation of Exem	pt DSEs	
	Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole or in part, over the cable system? Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (reference to former FCC rule 76.159)								(refer	
	Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8.							u DSE		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE
	C. LE OIOIT	552	0,122 01011	232		S, LE OIOIT	552	3, LE 510		502
		······		t1						
		······		<u>+</u>						
				<u>+</u>						
				<u>+</u>						
		······		<u> </u>						
				<u> </u>						
				<u> </u>						
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00

DSE SCHEDULE	E. PAGE15.
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LEGAL NA	ME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,586,137.77	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the 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 is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	E	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) \$		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here	_	
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here	_	
	G. Add lines A, C, and F. This is your surcharge.		
	Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	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		

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE, PAGE 16			
	DSE	SCHEDULE	E PAGE 16

Nome	LEGAL NAM		VSTEM ID#					
Name		RCN TELECOM SERVICES OF PHILADELPHIA INC	061497					
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.						
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)						
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)						
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.						
	Instru	ctions:						
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part						
		checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.						
Computation	• If you	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.						
of Base Rate Fee	 If you blank 	Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below						
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers						
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.						
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS						
	• Did y	• 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 following sections.							
	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1	Enter the amount of gross receipts from space K (page 7)	_					
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"						
		use the total number of DSEs from part 5.).						
	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)	0.00					
		Base Rate Fee						

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
RCN	TELECOM SERVICES OF PHILADELPHIA INC	061497	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	······································		8
	A. Enter 0.01064 of gross receipts		0
	(the amount in section 1)►	_	
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1)► \$		of Dece Data Free
	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	
		0.00	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcas	t signals shall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel	line-ups in	9
Space	o. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee,	to exclude	-
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take ad		Computation of
exclusi	on, you must:		Base Rate Fee
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to		and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine t and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for e		Exclusivity
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	saon group.	Surcharge for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in particular station is not exempt in particular static		Partially
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B bel cable system is wholly located outside all major television markets, complete block A only.	ow. However,	Distant Stations, and
			for Partially
	Identify a Subscriber Group for Partially Distant Stations : For each community served, determine the local service area of each wholly distant and each partially distant static	on vou	Permitted
-	to that community.	jou	Stations
	For each wholly distant and each partially distant station you carried, determine which of your subscribers were loc		
	the station's local service area. A subscriber located outside the local service area of a station is distant to that stat ne token, the station is distant to the subscriber.)	ion (and, by	
Step 3	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. E	ach	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note tha will have only one subscriber group when the distant stations it carried have local service areas that coincide.	t a cable	
groups	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syste	m s subscriber	
	a section:		
	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 in	parts 2, 3, and	
	s schedule; or,	l- D	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in bl 6 of this schedule.	OCK B,	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in	structions	
in the	paper SA3 form.		
	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the p In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (tha		
DSEs f	or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM II
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	06149
	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	e
	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.	

LEGAL NAME OF OWNE RCN TELECOM SI			IA INC			S	61497 O61497	Name
I		COMPUTATION OF		TE FEES FOR EAC				
	FIRST	SUBSCRIBER GROU	P	SECOND SUBSCRIBER GROUP				^
COMMUNITY/ AREA	Philade	elphia		COMMUNITY/ AREA 0				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
						•	·····	for
							·····	Partially Distant
							·····	Stations
						•		Stations
						•	·····	
						+		
						†		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	<u>\$</u> 1,586	,137.77	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р		UP			
COMMUNITY/ AREA			0	FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•	·····	
							·····	
						•		
		1						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th	e base rat	e fees for each subscri	ber group as	H s shown in the boxes al	bove.			
Enter here and in block			- ·			\$	0.00	

LEGAL NAME OF OWNE RCN TELECOM SI			HIA INC			\$	61497 O61497	Name
E				TE FEES FOR EAG		IBER GROUP		
COMMUNITY/ AREA	FIFIH	SUBSCRIBER GRO	0P 0	COMMUNITY/ ARE	0P 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
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Second Group \$ 0.00				
	SEVENTH	SUBSCRIBER GRO	UP					
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Fotal DSEs		1	0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	o hace rat	o foos for each subsc	ribor group a	s shown in the boxes	abaya			

FORM SA3E. PAG	GE 19.
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RCN TELECOM			HIA INC			\$	61497 O61497	Name
				ATE FEES FOR EAG				
COMMUNITY/ AREA		SUBSCRIBER GRC	0	COMMUNITY/ AREA 0			9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and Syndicated
	•••••							Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
			0.00				0.00	
otal DSEs	_		0.00	Total DSEs			0.00	
Bross 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	
	ELEVENTH	SUBSCRIBER GRO)UP					
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	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
		·			P	- <u>-</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloc	the base rat k 3, line 1, s	e fees for each subse pace L (page 7)	criber group a	us shown in the boxes	above.	\$		

FORM SA3E. PA	GE 19.
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97								
	IP	IBER GROUP		TE FEES FOR EAC		COMPUTATION O		
	COMMUNITY/ AREA 0			0			OMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DOL		DOL	CALL SIGN	DOL		DOL	CALL SIGN
)	0.00			Total DSEs	0.00			al DSEs
)	0.00	\$	ond Group	Gross Receipts Seco	0.00	oss Receipts First Group \$ 0.00		
					ase Rate Fee First Group \$ 0.00			•
	0.00	\$	ond Group	Base Rate Fee Seco	0.00	\$	Group	
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			SIXTEENTH	Base Rate Fee Second			FIFTEENTH	e Rate Fee First G
0	JP		SIXTEENTH		JP		FIFTEENTH	e Rate Fee First G F IMUNITY/ AREA
0	JP 0	I SUBSCRIBER GRO	SIXTEENTH	COMMUNITY/ ARE/	JP 0	SUBSCRIBER GRO	FIFTEENTH	Rate Fee First G F MUNITY/ AREA
0	JP 0	I SUBSCRIBER GRO	SIXTEENTH	COMMUNITY/ ARE/	JP 0	SUBSCRIBER GRO	FIFTEENTH	e Rate Fee First G F IMUNITY/ AREA
0	JP 0	I SUBSCRIBER GRO	SIXTEENTH	COMMUNITY/ ARE/	JP 0	SUBSCRIBER GRO	FIFTEENTH	e Rate Fee First G F MUNITY/ AREA
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0	JP 0	I SUBSCRIBER GRO	SIXTEENTH	COMMUNITY/ ARE/	JP 0	SUBSCRIBER GRO	FIFTEENTH	e Rate Fee First G F MMUNITY/ AREA
0	JP 0	I SUBSCRIBER GRO	SIXTEENTH	COMMUNITY/ ARE/	JP 0	SUBSCRIBER GRO	FIFTEENTH	e Rate Fee First G F MMUNITY/ AREA
0	JP 0	I SUBSCRIBER GRO	SIXTEENTH	COMMUNITY/ ARE/	JP 0	SUBSCRIBER GRO	FIFTEENTH	e Rate Fee First G F MUNITY/ AREA
0	JP 0	I SUBSCRIBER GRO	SIXTEENTH	COMMUNITY/ ARE/	JP 0	SUBSCRIBER GRO	FIFTEENTH	e Rate Fee First G F MMUNITY/ AREA
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	JP 0	I SUBSCRIBER GRO	SIXTEENTH DSE	COMMUNITY/ ARE/	JP 0 DSE	SUBSCRIBER GRO		se Rate Fee First G

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RCN TELECOM SE		E SYSTEM: OF PHILADELP	HIA INC				SYSTEM ID# 061497	Name
				TE FEES FOR EA				
SEVE	ITEENTH	SUBSCRIBER GRC	OUP 0	COMMUNITY/ ARE	UP 0	9		
COMMONITI / AREA			v		Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						•		Base Rate Fe
						•		and Syndicated
								Exclusivity
								Surcharge
						•		for Partially
								Distant
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otal DSEs		11	0.00	Total DSEs		11	0.00	
Gross Receipts First Gr	0110	¢	0.00	Gross Receipts Sec	and Croup	¢	0.00	
	oup	<u> </u>	0.00	Gloss Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	ase Rate Fee First Group \$ 0.00			Base Rate Fee Sec	ond Group	\$	0.00	
	ITEENTH	SUBSCRIBER GRO)UP	TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark>.</mark>	4	·····			••••	·····	
otal DSEs			0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third G	roup	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	s	0.00	
	roup	s			Inth Group	S		
		s				s s		
ross Receipts Third G	roup	<u>\$</u>	0.00	Gross Receipts Fou Base Rate Fee Fou	rth Group		0.00	

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LEGAL NAME OF OWNER			IA INC			S	YSTEM ID# 061497	Name
				TE FEES FOR EACH				
TWEN COMMUNITY/ AREA	TY-FIRST	SUBSCRIBER GROU	P 0	TWENT	Y-SECONE	SUBSCRIBER GROU	IP 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	II		0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
TWENT	Y-THIRD	SUBSCRIBER GROU	Р	TWENT	Y-FOURTH	I SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3			ber group a	us shown in the boxes abo	ove.	\$		

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497								
	UP	IBER GROUP		TE FEES FOR EAC		COMPUTATION O		
0								OMMUNITY/ AREA
SE		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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00				Total DSEs	0.00			al DSEs
~~	0	\$	nd Group	Gross Receipts Seco	0.00	\$	Croup	
00			la croup			·	Gloup	s Receipts First G
00		\$		Base Rate Fee Seco	0.00	\$		
	C	\$	nd Group	Base Rate Fee Seco		\$ SUBSCRIBER GROU	Group	e Rate Fee First G
	C		nd Group	Base Rate Fee Seco			Group Y-SEVENTH	Rate Fee First G
00	UP		nd Group	Base Rate Fee Seco	JP		Group Y-SEVENTH	Rate Fee First G TWENTY IUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY IUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY /UNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY MUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY MUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	e Rate Fee First G TWENTY IMUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY IMUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY MUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY IMUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	e Rate Fee First G TWENTY IMUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY IMUNITY/ AREA
00	UP	I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	Rate Fee First G TWENTY MUNITY/ AREA
00		I SUBSCRIBER GRO	nd Group	Base Rate Fee Seco TWE	JP 0	SUBSCRIBER GROU	Group 7-SEVENTH	PRate Fee First G
00 0 3E		I SUBSCRIBER GRO	ITY-EIGHTH	Base Rate Fee Seco	JP 0 DSE	SUBSCRIBER GROU	Group	e Rate Fee First G TWENTY MUNITY/ AREA
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LEGAL NAME OF OWNER			IIA INC			S	61497 O61497	Name
				TE FEES FOR EACH				
TWEN COMMUNITY/ AREA	<u>FY-NINTH</u>	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			U	COMMUNITY/ AREA			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
T 1 1 DOF			0.00	TILDOS			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
THIR	TY-FIRST	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						•••		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	II is shown in the boxes al	bove.	\$		

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Computati		BER GROUP	LSUBSCRI					
Computati						COMPUTATION C		
Computati		SUBSCRIBER GROU	Y-FOURTH		UP 0	SUBSCRIBER GRO		
••	U	COMMUNITY/ AREA 0						COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and Syndicate								
Exclusivi							•••••	
Surcharg								
for								
Partially Distant								
Stations								
_								
-	0.00			Total DSEs	0.00			otal DSEs
-	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	Group	ross Receipts First
	0.00	\$	d Group	Base Rate Fee Secor	0.00	\$	Group	ise Rate Fee First (
	JP	SUBSCRIBER GROU	RTY-SIXTH	ТН	UP	I SUBSCRIBER GRO	IIRTY-FIFTH	TH
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
_	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						•		
_	0.00	···		Total DSEs	0.00	···		otal DSEs
-	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	oss Receipts Third
11	0.00	\$	ı Group	Base Rate Fee Fourth	0.00	\$	Group	ase Rate Fee Third

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111111110		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EA		IBER GROUP	I IP
MMUNITY/ AREA			0	COMMUNITY/ ARE		T COBCORIBEIT ONO	0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	DOL		DGL	CALL SIGN	DGL	CALL SIGN	DOL
				-			
l DSEs			0.00	Total DSEs			0.00
ss Receipts First Gro	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
e Rate Fee First Gro		\$	0.00	Base Rate Fee Sec		\$	0.00
	Y-NINTH	SUBSCRIBER GRO				H SUBSCRIBER GRO	
MMUNITY/ AREA			0	COMMUNITY/ ARE	A		0
ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u> </u>					
I DSEs			0.00	Total DSEs			0.00
	oup	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00
ss Receipts Third Gr							
ss Receipts Third Gr							11

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	RVICES		HIA INC				61497 O61497	Name
				ATE FEES FOR EAG			15	
FOR COMMUNITY/ AREA	TY-FIRST	SUBSCRIBER GRO	<u>UP</u> 0	FOI COMMUNITY/ ARE		D SUBSCRIBER GRO	JP 0	9
			<u> </u>		<u> </u>	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe and
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Sec		\$	0.00	
	ry-third	SUBSCRIBER GRO		11		SUBSCRIBER GRO	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		U	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		···	0.00	Total DSEs			0.00	
otal DSEs						•	0.00	
	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Gross Receipts Third G		\$						
Gross Receipts Third G		\$\$	0.00	Gross Receipts Fou Base Rate Fee Fou		\$	0.00	
Total DSEs Gross Receipts Third G Base Rate Fee Third G Base Rate Fee: Add th	roup	\$\$	0.00	Base Rate Fee Fou	rth Group			

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061497						SERVICES		
OUP	IBER GROUP		TE FEES FOR EAC		COMPUTATION O SUBSCRIBER GROU			
0		COMMUNITY/ AREA	0			OMMUNITY/ AREA		
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	ALL SIGN DSE		
0.00			Total DSEs	0.00			otal DSEs	
0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	oss Receipts First G	
	Base Rate Fee Second Group \$ 0.00							
0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	ase Rate Fee First G	
	\$		FO		\$ SUBSCRIBER GROU		FORTY	
							FORTY	
OUP			FO	JP			FORTY MMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY MMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY MMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY MMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY DMMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY DMMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY DMMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY DMMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY DMMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY OMMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY DMMUNITY/ AREA	
OUP 0	I SUBSCRIBER GROU	RTY-EIGHTH	FO COMMUNITY/ ARE/	JP 0	SUBSCRIBER GROU	-SEVENTH	FORTY DMMUNITY/ AREA CALL SIGN	
DUP 0 DSE	I SUBSCRIBER GROU		FO COMMUNITY/ AREA CALL SIGN	JP 0 DSE	SUBSCRIBER GROU		FORTY OMMUNITY/ AREA CALL SIGN	
DUP 0 DSE	SUBSCRIBER GROU CALL SIGN	DSE	CALL SIGN	JP 0 DSE 0	SUBSCRIBER GROU	Group	CALL SIGN	

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LEGAL NAME OF OWNER			HIA INC			ł	SYSTEM ID# 061497	Name	
				TE FEES FOR EAC					
FOR COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GRO	0 0			H SUBSCRIBER GRO		9	
COMMUNITY AREA			U		COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE CALL SIGN DSE CALL SIGN			DSE	Computation of		
								Base Rate Fee	
			••••					and Syndicated	
								Exclusivity	
								Surcharge	
								for Partially	
								Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00		
	TY-FIRST	SUBSCRIBER GRO				D SUBSCRIBER GRO			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						•••••			
Total DSEs			0.00	Total DSEs	·		0.00		
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add th Enter here and in block	e base rat e 3, line 1, s	e fees for each subsc pace L (page 7)	criber group a	u s shown in the boxes a	above.	\$			

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	061497				HIA INC	E SYSTEM: SOF PHILADELP		RCN TELECOM SE
				TE FEES FOR EACH				
9	лр О	SUBSCRIBER GROU	FIF COMMUNITY/ AREA	JP 0	SUBSCRIBER GRC	TY-THIRD	FIF	
Computatio								
of Base Rate F	DSE	CALL SIGN DSE CALL SIGN DSE				CALL SIGN	DSE	CALL SIGN
and								
Syndicate								
Exclusivit Surcharge								
for								
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Distant Stations								
	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$	nd Group	Base Rate Fee Secor	0.00	\$	roup	a se Rate Fee First Gr
	JP	SUBSCRIBER GROU	IFTY-SIXTH	F	JP	SUBSCRIBER GRC	TY-FIFTH	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	0.00			Total DSEs	0.00			otal DSEs
	0.00	<u>\$</u>	n Group	Total DSEs Gross Receipts Fourtl	0.00	<u>s</u>	Group	otal DSEs Gross Receipts Third G

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07							SERVICES	
	IP			TE FEES FOR EAC		COMPUTATION C SUBSCRIBER GRO		
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_	0.00			Total DSEs	0.00			otal DSEs
_	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	oss Receipts First G
	Base Rate Fee Second Group \$ 0.00							
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	ase Rate Fee First G
		\$		Base Rate Fee Seco	4	\$ SUBSCRIBER GRO	FIFTY-NINTH	FIF
				Base Rate Fee Seco	4		FIFTY-NINTH	FIF
⊐) 	JP				UP		FIFTY-NINTH	FIF MMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF MMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF MMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF MMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF MMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF DMMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF DMMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF DMMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF OMMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF OMMUNITY/ AREA
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	ase Rate Fee First G FIF OMMUNITY/ AREA CALL SIGN
⊐) 	JP 0	I SUBSCRIBER GRO	SIXTIETH	COMMUNITY/ ARE/	UP 0	SUBSCRIBER GRO	FIFTY-NINTH	FIF DMMUNITY/ AREA
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FORM SA3E. PA	GE 19.
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	ERVICES	OF PHILADELP	HIA INC				61497 O61497	Name	
				ATE FEES FOR EAG					
SIX COMMUNITY/ AREA	TY-FIRST	SUBSCRIBER GRC	0 0	SI. COMMUNITY/ ARE	SIXTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0				
		0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DS				
								Base Rate Fe and	
								Syndicated	
								Exclusivity	
								Surcharge for	
								Partially	
								Distant	
								Stations	
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
ase Rate Fee First G	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	TY-THIRD	SUBSCRIBER GRC		11		H SUBSCRIBER GRO			
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs	ļ		0.00	Total DSEs			0.00		
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee Third G									
ase Rate Fee Third G				Ш					

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RCN TELECOM SE			IA INC				6YSTEM ID# 061497	Name
				TE FEES FOR EACH				
	TY-FIFTH	FTH SUBSCRIBER GROUP SIXTY-SIXTH SUBSCRIBER GROUP 0 COMMUNITY/ AREA 0						9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	_ SIGN DSE CALL SIGN DSE			CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
							0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secor	nd Group	\$	0.00	
SIXTY-	SEVENTH	SUBSCRIBER GROU		SIX	TY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rate 3, line 1, sj	e fees for each subscri bace L (page 7)	ber group a	II is shown in the boxes ab	oove.	\$		

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LEGAL NAME OF OWNER			IA INC			S	061497	Name
				ATE FEES FOR EACH				
SIXT COMMUNITY/ AREA	Y-NINTH	SUBSCRIBER GROU	SEVENTIETH SUBSCRIBER GROUP O COMMUNITY/ AREA O				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	11		0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	id Group	\$	0.00	
SEVEN	TY-FIRST	SUBSCRIBER GROU	Р	SEVENT	Y-SECONE) SUBSCRIBER GROL	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the		e fees for each subscri bace L (page 7)	ber group a	H Is shown in the boxes ab	ove.	\$		

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EGAL NAME OF OWN		S OF PHILADELP					61497 O61497	Name
SEVE		SUBSCRIBER GRC	0 0	SEVENTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
		++						for
								Partially
								Distant Stations
				-				otations
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	
SEVE	ENTY-FIFTH	SUBSCRIBER GRO	UP	SE				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL 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	
		e fees for each subso	criber group a	II is shown in the boxes	above.	\$		

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_	IP	IBER GROUP I SUBSCRIBER GRO		TE FEES FOR EAC		COMPUTATION C		
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
E	DOL		DOL	CALL OIGN	DOL		DOL	
_								
_	0.00	0.00 Total DSEs 0.			0.00			otal DSEs
_	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	
_	0.00	\$\$			0.00	\$ \$		ross Receipts First G
-	0.00		ond Group	Gross Receipts Secc	0.00	\$ \$	Group	oss Receipts First G I se Rate Fee First G
-	0.00	\$	nd Group	Gross Receipts Secc	0.00	Ľ	Group	oss Receipts First G Ise Rate Fee First G SEVEN
	0.00 JP	\$	nd Group	Gross Receipts Seco	0.00	Ľ	Group	oss Receipts First G se Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	oss Receipts First G se Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	oss Receipts First G se Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	oss Receipts First G Ise Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN DMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN OMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN OMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN OMMUNITY/ AREA
	0.00 JP 0	\$	IGHTIETH	Gross Receipts Seco Base Rate Fee Seco COMMUNITY/ AREA	0.00	I SUBSCRIBER GRC	Group	ross Receipts First G ase Rate Fee First G SEVEN DMMUNITY/ AREA CALL SIGN
	0.00	\$	Ind Group	Gross Receipts Second	0.00	I SUBSCRIBER GRC	Sroup	ross Receipts First G ase Rate Fee First G SEVEN OMMUNITY/ AREA CALL SIGN CALL SIGN
	0.00	SUBSCRIBER GRO	Ind Group	Gross Receipts Second Base Rate Fee Second COMMUNITY/ AREA CALL SIGN	0.00 DSE DSE	I SUBSCRIBER GRC	Sroup	ross Receipts First G ase Rate Fee First G SEVEN OMMUNITY/ AREA

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		S OF PHILADELP					061497	Name
		COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SUBSCRIBER GROUP EIGHTY-SECOND SUBSCRIBER GROUP						
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computati of
								Base Rate
								and Syndicate
								Exclusivi
								Surcharg
								for Partially
								Distant
								Stations
		++						
otal DSEs			0.00	Total DSEs			0.00	
			0.00				0.00	
ross Receipts First Gr	oup	<u>></u>		Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GRO		EIGHTY-FOURTH SUBSCRIBER GROUP				
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>							
btal DSEs			0.00	Total DSEs			0.00	
	roup	s	0.00	Total DSEs Gross Receipts Fou	rth Group	s	0.00	
otal DSEs ross Receipts Third G	roup	<u>\$</u>			rth Group	S		
		<u>\$</u>				<u>S</u>		
oss Receipts Third G		<u>\$</u>	0.00	Gross Receipts Fou			0.00	

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LEGAL NAME OF OWNE RCN TELECOM S			HIA INC				SYSTEM ID# 061497	Name
				TE FEES FOR EAG		IBER GROUP I SUBSCRIBER GRO		
EIGI	HTY-FIFTH	SUBSCRIBER GRC	0 0	E COMMUNITY/ ARE	9			
			<u> </u>				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
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY	-SEVENTH	SUBSCRIBER GRO	UP	EIC				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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 C	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
		e fees for each subso pace L (page 7)	criber group a	II is shown in the boxes	above.	\$		

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LEGAL NAME OF OWNER			HIA INC			S	61497 O61497	Name
				TE FEES FOR EACH				
	TY-NINTH	SUBSCRIBER GRO	UP 0		JP 0	9		
COMMUNITY/ AREA			U	COMMUNITY/ AREA				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 Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
		-				- <u>-</u>		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	TY-FIRST	SUBSCRIBER GRO		11	Y-SECOND	SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	I Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rate 3, line 1, sj	e fees for each subsc bace L (page 7)	riber group a	s shown in the boxes ab	ove.	\$		

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LEGAL NAME OF OWN RCN TELECOM S			HIA INC				61497 O61497	Name
				TE FEES FOR EAG				
NINI COMMUNITY/ AREA	ETY-THIRD	SUBSCRIBER GRO	0UP 0	NIN COMMUNITY/ ARE		I SUBSCRIBER GRO	UP 0	9
			<u> </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
								Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	ETY-FIFTH	SUBSCRIBER GRO	UP	N	IINETY-SIXTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
	••••							
otal DSEs			0.00	Total DSEs			0.00	
Bross 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	
		e fees for each subso pace L (page 7)	criber group a	II is shown in the boxes	above.	\$		

LEGAL NAME OF OWNER			IA INC			S	YSTEM ID# 061497	Name
				TE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GROU			Y-EIGHTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	0.00
	TY-NINTH	SUBSCRIBER GROU		1	NDREDTH	SUBSCRIBER GROU	ROUP	
COMMUNITY/ AREA		0		COMMUNITY/ AREA 0			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	<u> </u>		0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts Third Gr	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	II is shown in the boxes abo	ove.	\$		

LEGAL NAME OF OWNER			IIA INC			S	VSTEM ID# 061497	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
	ED FIRST	SUBSCRIBER GROU			D SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
					•			Stations
					•			
								0.00 0.00 0.00
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRE	ED THIRD	SUBSCRIBER GROU	JP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	us shown in the boxes abo	ove.	\$		

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LEGAL NAME OF OWNER			IIA INC			S	61497 O61497	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
	ED FIFTH	SUBSCRIBER GROU			RED SIXTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								Partially Distant
								Stations
			•					
							0.00 0.00 0.00	
Total DSEs			0.00	Total DSEs				
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$		
ONE HUNDRED S	SEVENTH	SUBSCRIBER GROU	JP	ONE HUNDR	ED EIGHTH	SUBSCRIBER GROU	UP	
COMMUNITY/ AREA		0		COMMUNITY/ AREA	ONE HUNDRED EIGHTH SUBSCRIBER GROUP	0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•					
Total DSEs		·	0.00	Total DSEs	•		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	I Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	II is shown in the boxes ab	ove.	\$		

LEGAL NAME OF OWNER			IA INC			S	YSTEM ID# 061497	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
	D NINTH	SUBSCRIBER GROU			ED TENTH	I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED EL	EVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	ER GROUP	
COMMUNITY/ AREA	OMMUNITY/ AREA		0		ONE HUNDRED TWELVTH SUBSCRIBER GROUP 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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	us shown in the boxes abo	ove.	\$		

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# 7 ^{Name}	061497							
4				TE FEES FOR EACH				
9		I SUBSCRIBER GROU	JRTEENTH			SUBSCRIBER GROU	RTEENTH	
Computa	Comp DSE C			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and Syndica								
Exclusiv								
Surcha								
for								
Partial Distar								
Station								
			<mark></mark>					
_	0.00			Total DSEs	0.00			otal DSEs
		\$	d Group	Gross Receipts Seco	0.00	\$	oup	ross Receipts First Gr
-				-		· ·		1000 NOOCIPIO FIISI GI
-]						·		
	0.00	\$		Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro
	0.00 JP	\$		Base Rate Fee Secon	IP	\$ SUBSCRIBER GROU	oup	ase Rate Fee First Gro
	0.00			Base Rate Fee Secon	•		oup	ase Rate Fee First Gro
	0.00 JP			Base Rate Fee Secon	IP		oup	ase Rate Fee First Gro ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gra ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gra ONE HUNDRED FIF DMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gra ONE HUNDRED FIR DMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gra ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gra ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gra ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gro ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gra ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gro ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gro ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gro ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gro ONE HUNDRED FIF OMMUNITY/ AREA
	0.00 JP 0	I SUBSCRIBER GROU	SIXTEENTH	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA	IP 0	SUBSCRIBER GROU	oup	ase Rate Fee First Gro ONE HUNDRED FII OMMUNITY/ AREA CALL SIGN
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	0.00 JP 0 DSE 0 0 0.00	CALL SIGN	SIXTEENTH DSE DSE	Base Rate Fee Secon	UP 0 DSE 0.00	SUBSCRIBER GROU	oup FTEENTH DSE	ase Rate Fee First Gro

LEGAL NAME OF OWNER RCN TELECOM SE			IA INC			SI	YSTEM ID# 061497	Name
				ATE FEES FOR EACH				
ONE HUNDRED SEVEN	NTEENTH	SUBSCRIBER GROU		ONE HUNDRED EIG	9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
	••••••							Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED NIN	NTEENTH	SUBSCRIBER GROU	Р	ONE HUNDRED T	VENTIETH	SUBSCRIBER GROUI	Ρ	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						+	···	
Total DSEs	<u> </u>		0.00	Total DSEs	<u> </u>	11	0.00	
Gross Receipts Third Gr	nun	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
	Jup	<u>*</u>			Group	<u>*</u>		
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the	e base rate	e fees for each subscri	ber group a	as shown in the boxes abo	ove.			
Enter here and in block 3						\$		

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Name	61497 O61497						R OF CABLE	RCN TELECOM SE
		BER GROUP	SUBSCRI	TE FEES FOR EACH				
9	ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP					SUBSCRIBER GROU	NTY-FIRST	
Computatio	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
of	DSE	CALL SIGN	CALL SIGN	CALL SIGN DSE		DSE CALL SIGN		
Base Rate F								
and Syndicated								
Exclusivity								
Surcharge								
for								
Partially Distant								
Stations								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secor	0.00	\$	oup	3ase Rate Fee First Gr
)	SUBSCRIBER GROUP	ITY-FOURTH	ONE HUNDRED TWE		SUBSCRIBER GROUP	NTY-THIRD	ONE HUNDRED TWE
	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	•••••							
						11		
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	<u>\$</u>	Group	Total DSEs Gross Receipts Fourth	0.00	<u>\$</u>	roup	Fotal DSEs Gross Receipts Third G

FORM SA3E. PA	GE 19.
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LEGAL NAME OF OWNER RCN TELECOM SE			HIA INC			:	SYSTEM ID# 061497	Name	
				TE FEES FOR EAC	H SUBSCR	IBER GROUP			
	NTY-FIFTH	SUBSCRIBER GROU		ONE HUNDRED T	9				
COMMUNITY/ AREA			0	COMMUNITY/ ARE/			0	Computation	
CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee	
								and Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially Distant	
		+						Stations	
otal DSEs			0.00	Total DSEs	·		0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
NE HUNDRED TWENTY	-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TW	ENTY-EIGHT	H SUBSCRIBER GROUP	>		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		++							
otal DSEs	Į	11	0.00	Total DSEs		11	0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	s	0.00	Base Rate Fee Four	th Group	\$	0.00		
	·	<u>_</u> ₹	0.00		h	<u> </u>	0.00		
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subso pace L (page 7)	criber group a	s shown in the boxes a	above.	\$			

FORM SA3E. PA	GE 19.
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Name	061497											
-				TE FEES FOR EAC								
9	ONE HUNDRED THIRTIETH SUBSCRIBER GROUP				0	SUBSCRIBER GROUP	ENTY-NINTH	ONE HUNDRED TWE				
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN				
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and Syndicat												
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	0.00			Total DSEs				Total DSEs 0.00				
					0 00	Gross Receipts First Group \$ 0.00						
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	0.00	\$		Gross Receipts Seco	0.00	\$ \$						
	0.00		nd Group	Base Rate Fee Seco	0.00	\$ \$ SUBSCRIBER GROUP	Group	ase Rate Fee First G				
-	0.00	\$	nd Group RTY-SECOND	Base Rate Fee Seco	0.00		Group	ase Rate Fee First G				
	0.00	\$	nd Group RTY-SECOND	Base Rate Fee Seco	0.00		Group	ase Rate Fee First G ONE HUNDRED TH OMMUNITY/ AREA				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ase Rate Fee First G ONE HUNDRED TH OMMUNITY/ AREA				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ONE HUNDRED TH				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ONE HUNDRED TH				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ONE HUNDRED TH				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ONE HUNDRED TH				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ase Rate Fee First G ONE HUNDRED TH OMMUNITY/ AREA				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ase Rate Fee First G ONE HUNDRED TH OMMUNITY/ AREA				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ase Rate Fee First G ONE HUNDRED TH OMMUNITY/ AREA				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ONE HUNDRED TH				
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	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ase Rate Fee First G ONE HUNDRED TH OMMUNITY/ AREA				
	0.00	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco ONE HUNDRED TH COMMUNITY/ ARE/	0.00	SUBSCRIBER GROUI	Group HIRTY-FIRST	ase Rate Fee First G				
	0.00 0 0	\$ 9 SUBSCRIBER GROUP	nd Group	Base Rate Fee Seco	0.00	SUBSCRIBER GROUI	Sroup	ase Rate Fee First G ONE HUNDRED TH OMMUNITY/ AREA CALL SIGN				
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		HIA INC				061497	Na
BLOCK					IBER GROUP	D	
COMMUNITY/ AREA	D SUBSCRIBER GROU	<u> </u>	COMMUNITY/ ARE		1 SUBSCRIBER GROUP	0	ļ
							Comp
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base F
							asen
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							Surc f
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							Stat
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		\$	0.00	
ONE HUNDRED THIRTY-FIF	TH SUBSCRIBER GROU	P 0	ONE HUNDREE		I SUBSCRIBER GROUP		
				0			
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN CALL SIGN		CALL SIGN		
	S			DSE	S		
Total DSEs	CALL SIGN	0.00	Total DSEs	DSE		DSE	
Total DSEs	S S	0.00	Total DSEs	DSE		DSE	

ACCOUNTING PERIOD: 2022/2

LEGAL NAME OF OWNER RCN TELECOM SE			HIA INC			S	641497 O61497	Name
В	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
ONE HUNDRED THIRTY	-SEVENTH	SUBSCRIBER GROUF	•	ONE HUNDRED TH	9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
		-						Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	<u>\$</u>	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second		\$	0.00	
	RTY-NINTH	SUBSCRIBER GROUP				SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
]						
Total DSEs	·		0.00	Total DSEs	•	<u> </u>	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rate 3, line 1, s	e fees for each subsc pace L (page 7)	riber group a	II is shown in the boxes al	bove.	\$		

		OF PHILADELP					061497	Name
BL ONE HUNDRED FOR						IBER GROUP		
COMMUNITY/ AREA		SOBSCILLER GROOM	0	COMMUNITY/ ARE		SOBSCINER GROU	0	9
								Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate
								and
								Syndicate
								Exclusivi
								Surcharg for
								Partially
								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gro	up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gro	up	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	-	Ľ	•					
ONE HUNDRED FOR	I Y-THIRD	SUBSCRIBER GROU	<u> </u>	COMMUNITY/ ARE		I SUBSCRIBER GROUP	<u> </u>	
			Ŭ					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
otal DSEs		4	0.00	Total DSEs		11	0.00	
ross Receipts Third Gro	oup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
ase Rate Fee Third Gro	oup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				11				

LEGAL NAME OF OWNER RCN TELECOM SE			IIA INC			S	YSTEM ID# 061497	Name
В	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FOR	RTY-FIFTH	SUBSCRIBER GROUP			ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE				of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	pup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FORTY-	SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTH	I SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			ļ					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block :			iber group a	s shown in the boxes ab	ove.	\$		

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LEGAL NAME OF OWNER RCN TELECOM SE			A INC			SY	STEM ID# 061497	Name
				ATE FEES FOR EACH				
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU			FIFTIETH	SUBSCRIBER GROUP	, 0	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				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 Gro	oup	\$	0.00	Gross Receipts Second	l Group	\$	0.00	
Base Rate Fee First Gro		\$	0.00	Base Rate Fee Second		\$	0.00	
	TY-FIRST	SUBSCRIBER GROU			-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
Total DSEs	11		0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			per group a	II as shown in the boxes abo	ove.	\$		

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	6YSTEM ID# 061497				IIA INC		R OF CABLI	RCN TELECOM SI			
				TE FEES FOR EAC							
9	JP 0	SUBSCRIBER GRO	TY-FOURTH	ONE HUNDRED FIF	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0						
Computatio	U				OMMUNITY/ AREA 0						
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
Base Rate F											
and Syndicate							•••				
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Surcharge											
for Partially											
Distant											
Stations											
	0.00			Total DSEs	0.00			otal DSEs			
	0.00		d Croup	Gross Receipts Seco	0.00	e	roup	Gross Receipts First G			
	0.00	\$	id Group	Gloss Receipts Seco	0.00	<u>\$</u>	ioup				
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	roup	Base Rate Fee First G			
	JP	SUBSCRIBER GRO	IFTY-SIXTH	1	JP 0	SUBSCRIBER GRO	TY-FIFTH	ONE HUNDRED FI			
	0	COMMUNITY/ AREA 0						COMMUNITY/ AREA			
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	0.00			Total DSEs	0.00			Total DSEs			
	0.00	<u>s</u>	n Group	Total DSEs Gross Receipts Fourt	0.00	<u>s</u>	Group	otal DSEs Gross Receipts Third G			

ACCOUNTING PERIOD: 2022/2

LEGAL NAME OF OWN			HIA INC			,	SYSTEM ID# 061497	Name
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
	TY-SEVENTH	SUBSCRIBER GROUI		11		I SUBSCRIBER GROUF		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	of			
								Base Rate Fee
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								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 (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	FIFTY-NINTH	SUBSCRIBER GROUI		11		H SUBSCRIBER GROUP		
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 t Enter here and in bloc			criber group a	II s shown in the boxes	above.	\$		

LEGAL NAME OF OWNE RCN TELECOM S			HIA INC			5	61497 O61497	Name
	BLOCK A	COMPUTATION C	F BASE R	ATE FEES FOR EA	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECONE	SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	Philad	elphia		COMMUNITY/ ARE	Α		0	9 Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicate Exclusivi
								Surcharg
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	<u>\$</u> 1,58	6,137.77	Gross Receipts Sec	cond Group	\$	0.00	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
Base Rate Fee: Add th			riber group a	as shown in the boxes	above.		0.00	
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LEGAL NAME OF OW RCN TELECOM		.E SYSTEM: S OF PHILADELP	HIA INC			\$	SYSTEM ID# 061497	Name
				ATE FEES FOR EA	CH SUBSCR	IBER GROUP		
	FIFTH	SUBSCRIBER GRO			SIXTH	I SUBSCRIBER GRO	UP	9
COMMUNITY/ ARE/	Α		0	COMMUNITY/ ARE	A		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	DUP		EIGHTH	I SUBSCRIBER GRO	UP	
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GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497								Nam
				TE FEES FOR EA				
		SUBSCRIBER GRO				I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computa
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otal DSEs			0.00	Total DSEs			0.00	
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ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	ELEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	I SUBSCRIBER GRO	UP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs		ļļ	0.00			11	0.00	
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Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
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D -1 D	41 I. ····	- f f		is shown in the boxes	- 1			

GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497							
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		0.00	Total DSEs			0.00	
Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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IFTEENTH	SUBSCRIBER GRO				I SUBSCRIBER GROU		
		0	COMMUNITY/ ARE	A		0	
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		•••••					
		0.00	Total DSEs			0.00	
Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	IRTEENTH DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	IRTEENTH SUBSCRIBER GRO DSE CALL SIGN DSE S DSE CALL SIGN DSE CALL SIGN	IIRTEENTH SUBSCRIBER GROUP 0 DSE CALL SIGN DSE DSE CALL SIGN DSE DSE CALL SIGN DSE DSE CALL SIGN DSE DSE DSE DSE CALL SIGN DSE DSE DSE DSE DSE DSE DSE DSE DSE CALL SIGN DSE DSE O.00 O.00	IIRTEENTH SUBSCRIBER GROUP F DSE CALL SIGN DSE CALL SIGN Stroup S 0.00 Total DSEs Gross Receipts Sec Stroup Stroup Community/ ARE DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	IIRTEENTH SUBSCRIBER GROUP FOURTEENTH DSE CALL SIGN DSE CALL SIGN DSE January	0 COMMUNITY/ AREA 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 S 0.00 Total DSEs Correst Receipts Second Group S Sroup S 0.00 Base Rate Fee Second Group S S DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 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 SI	IRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP DSE CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN DSE CALL SIGN DSE Image: Strate

	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497									
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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 Sec	ond Group	\$	0.00			
NI	NTEENTH	SUBSCRIBER GRO	UP		TWENTIETH	SUBSCRIBER GROU	UP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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	ļ		0.00				0.00			
Total DSEs			0.00	Total DSEs		. <u> </u>	0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00			
Base Rate Fee: Add th			riber group a	as shown in the boxes	above.					
nter here and in block						\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 061497									
		COMPUTATION OF								
	TY-FIRST	SUBSCRIBER GROU		TWE		9				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation		
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00			
TWEN	TY-THIRD	SUBSCRIBER GROU	IP	TWE	NTY-FOURTH	I SUBSCRIBER GRO	UP			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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	roup	¢	0.00		urth Crour	e				
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00			
Base Rate Fee: Add the	e base rate	e fees for each subscr	iber group a	s shown in the boxes	above.					
Enter here and in block	3, line 1, sj	pace L (page 7)				\$				

EGAL NAME OF OW		E SYSTEM: OF PHILADELP	HIA INC				61497 O61497
				ATE FEES FOR EAG			
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tal DSEs		11	0.00	Total DSEs		11	0.00
oss Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
		·			ond Group	- -	
e Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
		SUBSCRIBER GRO		11		SUBSCRIBER GRO	
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ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
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tal DSEs		··	0.00	Total DSEs		···	0.00
oss Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00
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ase Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00
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e Rate Fee: Add er here and in blo			riber group a	as shown in the boxes	above.	\$	
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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# RCN TELECOM SERVICES OF PHILADELPHIA INC 061497								
			ATE FEES FOR EA					
	H SUBSCRIBER GRC	0 0	COMMUNITY/ ARE		SUBSCRIBER GRO	0 0	ļ	
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otal DSEs		0.00	Total DSEs			0.00		
Bross Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00		
ase Rate Fee First Group	s	0.00						
	Ŧ	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
THIRTY-FIRS	T SUBSCRIBER GRC				SUBSCRIBER GRO			
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OMMUNITY/ AREA	11	0 0	COMMUNITY/ ARE	RTY-SECOND	SUBSCRIBER GRO	UP 0		
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COMMUNITY/ AREA	11	0 0	COMMUNITY/ ARE	RTY-SECOND	SUBSCRIBER GRO	UP 0		
COMMUNITY/ AREA	11	0 0	COMMUNITY/ ARE	RTY-SECOND	SUBSCRIBER GRO	UP 0		
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	LE SYSTEM: S OF PHILADELP					8YSTEM ID# 061497	
			11				
THIRTY-THIRI COMMUNITY/ AREA) SUBSCRIBER GRO	0UP 0	THIRTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
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tal DSEs		0.00	Total DSEs			0.00	
oss Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
se Rate Fee First Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
THIRTY-FIFT							
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MMUNITY/ AREA					SUBSCRIBER GRO		
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	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497								
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	SEVENTH	SUBSCRIBER GROU				I SUBSCRIBER GRO	UP 0	9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		U	Computation	
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00		
THIR	TY-NINTH	SUBSCRIBER GROU	Р		FORTIETH	I SUBSCRIBER GRO	UP		
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Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	Irth Group	\$	0.00		
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Boos Bots From Add 4	. hee		hor arous -		chovo				
Base Rate Fee: Add the Enter here and in block	3, line 1, s	pace L (page 7)	ber group a		abuve.	\$			

LEGAL NAME OF OWN RCN TELECOM S						:	SYSTEM ID# 061497	
				TE FEES FOR EA	CH SUBSCRI	BER GROUP		
	RTY-FIRST	SUBSCRIBER GRO		1		SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First G	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
ase Rate Fee First G	Froup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
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FOR OMMUNITY/ AREA		SUBSCRIBER GRO	0P 0	COMMUNITY/ ARE		SUBSCRIBER GRO	0	
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otal DSEs			0.00				0.00	
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ross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
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Base Rate Fee Third (Jroup	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
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			criber group a	s shown in the boxes	above.			
nter here and in bloc	k 3, line 1, s	space L (page 7)				\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER G FORTY-FIFTH SUBSCRIBER GROUP FORTY-SIXTH SUBSCRIBER COMMUNITY/ AREA O COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CAL Image: Computation of the state of the s	
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ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
FORTY-SEVENTH SUBSCRIBER GROUP FORTY-EIGHTH SUBSC	CRIBER GROUP
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otal DSEs Total DSEs	0.00
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ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	

IGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497								Na
				TE FEES FOR EA				
		SUBSCRIBER GRO				SUBSCRIBER GROU		ļ
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ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
F	FIFTY-FIRST	SUBSCRIBER GRO	DUP	FI	FTY-SECONE	SUBSCRIBER GRO	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
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ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
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nter here and in blo			onner dronh s		abuve.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497								
				TE FEES FOR EA					
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		9	
COMMUNITY/ AREA	۱ 		0	COMMUNITY/ ARE	A		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
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Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00		
F	FIFTY-FIFTH	SUBSCRIBER GRO			FIFTY-SIXTH	SUBSCRIBER GRO	UP		
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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Total DSEs	Į	···	0.00	Total DSEs		···	0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00		
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Base Rate Fee: Add			criber group a	is shown in the boxes	above.				
Enter here and in blo	ck 3, line 1, s	space L (page 7)				\$			

EGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#RCN TELECOM SERVICES OF PHILADELPHIA INC061497									
				TE FEES FOR EA					
		SUBSCRIBER GRO				SUBSCRIBER GRO		9	
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ross Receipts First Group \$ 0.0				Gross Receipts Sec	cond Group	\$	0.00		
ase Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	cond Group	\$	0.00		
F	IFTY-NINTH	SUBSCRIBER GRO	DUP		SIXTIETH	I SUBSCRIBER GRO	UP		
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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	irth Group	\$	0.00		
ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00		
Base Rate Fee: Add	the base rat	e fees for each subs	criber aroup a	II is shown in the boxes	above.				
nter here and in blo			J 10 0			\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497									
				ATE FEES FOR EAG						
		SUBSCRIBER GRO		11		SUBSCRIBER GRO				
COMMUNITY/ ARE/	4		0	COMMUNITY/ ARE	A		0	Com		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
								Base		
								_		
		•						Syn -		
								Exc Sur		
								oui		
								Ра		
								Di		
		•						Sta		
		1		1		1				
				1						
otal DSEs			0.00	Total DSEs			0.00			
ross Receipts First	ross Receipts First Group \$ 0.00				cond Group	\$	0.00			
ase Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	cond Group	\$	0.00			
Ş	SIXTY-THIRD	SUBSCRIBER GRO	OUP	SI	XTY-FOURTH	I SUBSCRIBER GRO	UP			
OMMUNITY/ ARE/	۹		0	COMMUNITY/ ARE	Ά		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
				1						
				1						
				1						
otal DSEs	i		0.00	Total DSEs	;		0.00			
oross Receipts Thire	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00			
ase Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00			
				11						
			criber group a	as shown in the boxes	above.	\$				
nter here and in blo	JUK J, IINE T, S	space L (page /)				φ				

IGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CN TELECOM SERVICES OF PHILADELPHIA INC 061497										
				TE FEES FOR EAG						
		SUBSCRIBER GRO			SIXTY-SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computat		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate		
								and		
								Syndicate		
								Exclusivi		
								Surcharg		
								for		
	•••••		•••••					Partially Distant		
								Stations		
	•••••		•••••					otation		
		Π								
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			0.00	Base Rate Fee Sec	ond Group	\$	0.00			
SIXT	-SEVENTH	SUBSCRIBER GRO	DUP	s	SIXTY-EIGHTH	I SUBSCRIBER GRO	UP			
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			
ross Receipts Third	Group	\$	0.00	Gross Receipts Fou	urth Group	¢	0.00			
	Joup	<u>*</u>	0.00			*	0.00			
			1							
ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
				μ						
				s shown in the boxes			,			

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# RCN TELECOM SERVICES OF PHILADELPHIA INC 061497										
				ATE FEES FOR EA						
COMMUNITY/ AREA	KTY-NINTH	SUBSCRIBER GRO	0 0	SEVENTIETH SUBSCRIBER GROUP						
								Com		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	_		
								Base		
		++						Syn		
								Exc		
								Sur		
								Pa		
								Di		
								Sta		
otal DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group <u>\$ 0.00</u>				Gross Receipts Sec	cond Group	\$	0.00			
ase Rate Fee First G	Froup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00			
							I			
	NTY-FIRST	SUBSCRIBER GRO	0UP 0			SUBSCRIBER GRO	JP 0			
OMMUNITY/ AREA			U	COMMUNITY/ ARE	A		U			
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	ırth Group	\$	0.00			
ase Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00			
Base Rate Fee: Add t		e fees for each subs pace L (page 7)	criber group a	s shown in the boxes	above.	\$				

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# RCN TELECOM SERVICES OF PHILADELPHIA INC 061497										
		COMPUTATION OF		11						
	TY-THIRD	SUBSCRIBER GROU		11		I SUBSCRIBER GRO		9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fe		
								and		
								Syndicated Exclusivity		
								Surcharge		
								for		
								Partially		
								Distant Stations		
								otations		
Total DSEs			0.00	Total DSEs		11	0.00			
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00			
					·					
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	cond Group	\$	0.00			
	TY-FIFTH	SUBSCRIBER GROU				I SUBSCRIBER GRO				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		-								
		_								
	<u> </u>									
Total DSEs		-	0.00	Total DSEs			0.00			
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00			
						<u>L'</u>				
Deep Date Dev Allo	. h		ih an	a alaassar to the U	ah au -					
Base Rate Fee: Add the Enter here and in block	e base rate 3, line 1, si	e tees tor each subscr pace L (page 7)	iber group a	is shown in the boxes	apove.	\$				
	. ,=									

LEGAL NAME OF OWNER RCN TELECOM SE			•				6YSTEM ID# 061497	Name
		COMPUTATION O						
	SEVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computatior
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group \$ 0.0				Gross Receipts Sec	cond Group	\$	0.00	
	Base Rate Fee First Group \$ 0.00			Base Rate Fee Sec		\$	0.00	
SEVEN COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GROU		COMMUNITY/ ARE		I SUBSCRIBER GRO	0P 0	
COMMUNIT I/ AREA			0				U	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
]]				
			.					
Total DSEs	•	·	0.00	Total DSEs		••	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
,	•				r	·		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				11				
Base Rate Fee: Add the	e base rate	e fees for each subscr	iber group a	is shown in the boxes	above.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# ICN TELECOM SERVICES OF PHILADELPHIA INC 061497									
				TE FEES FOR EA					
		SUBSCRIBER GRO				SUBSCRIBER GRO	UP 0		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		U	Com	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
								Base	
								Cum	
		•						Syn Exc	
								Sur	
								1	
								Pa	
								Di: Sta	
								318	
otal DSEs			0.00	Total DSEs			0.00		
	Creation								
ross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00		
ase Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	cond Group	\$	0.00		
EIC	HTY-THIRD	SUBSCRIBER GRO	DUP	EIG	HTY-FOURTH	I SUBSCRIBER GRO	UP		
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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 Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00		
					·				
ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	irth Group	s	0.00		
		L *	0.00			L *	0.00		
			criber group a	is shown in the boxes	above.				
nter here and in blo	ск 3, line 1, s	space ∟ (page /)				\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#RCN TELECOM SERVICES OF PHILADELPHIA INC061497										
				TE FEES FOR EA						
		SUBSCRIBER GRO		1		SUBSCRIBER GRO		9		
COMMUNITY/ AREA	•		0	COMMUNITY/ ARE	A		0	Compu		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rat		
								and		
								Syndica		
		•				•••••		Exclusi Surcha		
								for		
								Partial		
								Distar		
								Statio		
						••••				
otal DSEs			0.00	Total DSEs			0.00			
Gross Receipts First	ross Receipts First Group \$ 0.00				cond Group	\$	0.00			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00			
EIGHT	Y-SEVENTH	SUBSCRIBER GRO		EIG	GHTY-EIGHTH	SUBSCRIBER GRO	UP			
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		•								
						•				
				-						
otal DSEs	ł	····	0.00	Total DSEs		···	0.00			
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00			
	-									
ase Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00			
				ļļ						
			criber group a	is shown in the boxes	above.					
nter here and in blo	ck 3, line 1, s	space L (page 7)				\$				

EIGHTY COMMUNITY/ AREA		COMPUTATION C						
COMMUNITY/ AREA	′-NINTH :			TE FEES FOR EAC				
····		SUBSCRIBER GRO				I SUBSCRIBER GROU		9
······			0	COMMUNITY/ ARE	Α		0	Comput
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndica
								Exclusiv Surchar
								for
								Partial
								Distan
								Station
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Group \$ 0.00				Gross Receipts Sec	ond Group	\$	0.00	
			0.00	Base Rate Fee Sec		\$	0.00	
	Y-FIRST	SUBSCRIBER GRO		1		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				1				
			0.00			11	0.00	
otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts Third Gro	up	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third Grou	up	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				11				
Base Rate Fee: Add the t	naen rata	face for each subsc	riber group a	is shown in the boyce	above			
nter here and in block 3,			nnei dionb a	is shown in the doxes a	ລມບາປ.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# RCN TELECOM SERVICES OF PHILADELPHIA INC 061497									
				ATE FEES FOR EA					
	ETY-THIRD	SUBSCRIBER GRO				I SUBSCRIBER GRO		9	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fe	
								and	
								Syndicated	
								Exclusivity Surcharge	
								for	
								Partially	
								Distant	
	•••••					•••••••••••••••••••••••••••••••••••••••		Stations	
		++				1			
			0.00				0.00		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	cond Group	\$	0.00		
NIN	ETY-FIFTH	SUBSCRIBER GRO	DUP	1	NINETY-SIXTH	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	irth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00		
				11					
Base Rate Fee: Add t			criber group a	as shown in the boxes	above.				
Enter here and in bloc	к 3, line 1, s	space ∟ (page 7)				\$			

LEGAL NAME OF OWNER RCN TELECOM SE			•				61497 O61497	Name
				TE FEES FOR EAG				
	SEVENTH	SUBSCRIBER GROU				I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	ross Receipts First Group \$ 0.00				ond Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GROU	JP	ONE	HUNDREDTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
T () DOF	Į		0.00	T L L DOT		11		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				11				
Base Rate Fee: Add the	e base rate	e fees for each subscr	iber group a	s shown in the boxes	above.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OWNER RCN TELECOM SE							6YSTEM ID# 061497	Name
		COMPUTATION OF						
	ED FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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
						H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	ross Receipts First Group \$ 0.0				ond Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Sec		\$	0.00	
	ED THIRD	SUBSCRIBER GROU		11		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 G	roup	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				++				
Base Rate Fee: Add the			iber group a	s shown in the boxes	above.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OWN RCN TELECOM S			-			;	SYSTEM ID# 061497	Nan
	BLOCK A:	COMPUTATION	OF BASE RA	TE FEES FOR EA		BER GROUP		
	RED FIFTH	SUBSCRIBER GRO		1		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Compu
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	comput
6,122 01011								Base Rat
								and
								Syndica
								Exclusi
								Surcha
							•••••	for
								Partia Dista
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		•						
][
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
		[T					
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	DUP	ONE HUND	DRED EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	••••	•	•••••					
	••••		•••••					
		1				+		
						11		
Otal DSEs 0.00			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
			•					
Base Rate Fee: Add t			criber group a	s shown in the boxes	above.			
Enter here and in bloc	к 3, Iine 1, s	space ∟ (page /)				\$		

LEGAL NAME OF OWN			•			S	641497 O61497	Nam
				TE FEES FOR EA	CH SUBSCR	IBER GROUP		
ONE HUNDRED NINTH SUBSCRIBER GROUP ONE HUNDRED TENTH SUBSCRIBER GROUP								9
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				Compu
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rat
								and
								Syndica
								Exclusi
								Surcha for
								Partia
		•	•••••					Dista
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			·····				·····	
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First (Group	\$	0.00	Gross Receipts Sec	\$	0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED	ELEVENTH	SUBSCRIBER GRO	DUP	ONE HUNDR	ED TWELVTH	I SUBSCRIBER GRO	UP	
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 Fou	uth Group	¢	0.00		
	Sioup	\$	0.00		aran Group	\$	0.00	
ase Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00	
			criber group a	II is shown in the boxes	above.			
Enter here and in bloc			<u> </u>			\$		

LEGAL NAME OF OW RCN TELECOM		LE SYSTEM: S OF PHILADELP	•			S	645750 SYSTEM ID# 061497	Name
				ATE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		I SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ ARE	0	-		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
ONLE OIGH	DOL		DOL		DOL		DOL	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge for
		•						Partially
								Distant
								Stations
				1				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Second Group <u>\$</u> 0.				
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	D FIFTEENTH	I SUBSCRIBER GRO	UP	ONE HUNDRE	D SIXTEENTH	I SUBSCRIBER GROU	UP	
COMMUNITY/ ARE	A		0	COMMUNITY/ ARE	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		ļ.	0.00	Total DSEs		11	0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add	d the base rat	e fees for each subsc	riber group a	ns shown in the boxes	above.			
Enter here and in blo			· · ·			\$		

LEGAL NAME OF OW RCN TELECOM						5	61497 O61497	Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		I SUBSCRIBER GROU		ONE HUNDRE	D EIGHTEENTH	I SUBSCRIBER GROUF		9
COMMUNITY/ AREA	•		0	COMMUNITY/ ARE	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								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	0.00			
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				I SUBSCRIBER GRO	_	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			••••					
				-				
		++						
				1				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
[+!				
			criber group a	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OW RCN TELECOM						\$	61497 O61497	Name	
	BLOCK A	COMPUTATION	OF BASE RA	ATE FEES FOR EA	CH SUBSCR	IBER GROUP			
ONE HUNDRED T	WENTY-FIRST	SUBSCRIBER GROU	P	11		D SUBSCRIBER GROUF		9	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of	
								Base Rate Fe	
								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	cond Group	\$	0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	cond Group	\$	0.00		
ONE HUNDRED TV	VENTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TW	ENTY-FOURT	H SUBSCRIBER GROUF)		
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		

		•							
Total DSEs		11	0.00	Total DSEs			0.00		
		0.00	Gross Receipte For	Gross Receipts Fourth Group		0.00			
		<u>\$</u>				<u>*</u>			
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	urth Group	\$	0.00		
Base Rate Fee: Add	I the base ra t	te fees for each subs	criber group a	as shown in the boxes	above.				
Enter here and in blo			5			\$			

LEGAL NAME OF OW RCN TELECOM		E SYSTEM: SOF PHILADELP	HIA INC			\$	6YSTEM ID# 061497	Name
	BLOCK A:	COMPUTATION C	DF BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
ONE HUNDRED T	WENTY-FIFTH	SUBSCRIBER GROU	Р	ONE HUNDRED	TWENTY-SIXTH	SUBSCRIBER GROUF)	9
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	A		0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
				1				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED TWEN		SUBSCRIBER GROU		11		SUBSCRIBER GROUF	>	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				1				
]				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
]	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				<u> </u>				
			criber group a	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OW RCN TELECOM		LE SYSTEM: 5 OF PHILADELP	•				SYSTEM ID# 061497	Name
	BLOCK A	COMPUTATION	OF BASE RA	TE FEES FOR EA	CH SUBSCR	IBER GROUP		
		I SUBSCRIBER GROU				SUBSCRIBER GROUF		9
COMMUNITY/ ARE/	4		0	COMMUNITY/ ARE	:A		0	Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								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	cond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
ONE HUNDRED		SUBSCRIBER GROU	P 0	ONE HUNDRED TI		SUBSCRIBER GROUF	, 0	
	۰		U					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		11	0.00	Total DSEs			0.00	
			0.00		with Creaking	•	0.00	
Gross Receipts Thire	u Group	\$	0.00	Gross Receipts Fou	arui Gioup	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				μ				
			criber group a	as shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OWNER RCN TELECOM SE						Ş	061497
				TE FEES FOR EAC			
ONE HUNDRED THI	RTY-THIRD	SUBSCRIBER GROUP	0	ONE HUNDRED TH		I SUBSCRIBER GROUF	0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	DOL		DOL	ONLE CICIL	DOL		DOL
otal DSEs			0.00	Total DSEs			0.00
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
B ase Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
ONE HUNDRED THIR	TY-FIFTH	SUBSCRIBER GROU	JP	ONE HUNDRED TH	HIRTY-SIXTH	SUBSCRIBER GRO	JP
OMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	.						
						ll	
			••				
otal DSEs	_	11	0.00	Total DSEs		11	0.00
				11			
iross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00
Bross Receipts Third G	ìroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00
Gross Receipts Third G Base Rate Fee Third G		\$ \$	0.00	Gross Receipts Four Base Rate Fee Four		\$\$	0.00
ase Rate Fee Third G	Group	\$	0.00		th Group		

LEGAL NAME OF OW RCN TELECOM		.E SYSTEM: S OF PHILADELP	HIA INC			· · · · · · · · · · · · · · · · · · ·	SYSTEM ID# 061497	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EA		IBER GROUP		
		SUBSCRIBER GROU		1		SUBSCRIBER GROUF		9
COMMUNITY/ ARE/	4		0	COMMUNITY/ ARE	A		0	J Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								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	cond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
		SUBSCRIBER GRO		1		I SUBSCRIBER GRO	UP	
COMMUNITY/ ARE/	A		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			•••••					
		•						
		++						
		+						
				1				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	d Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
]	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				<u>++</u>				
			criber group a	is shown in the boxes	above.			
Enter here and in blo	ock 3, line 1, s	space L (page 7)				\$		

LEGAL NAME OF OW RCN TELECOM		E SYSTEM: SOF PHILADELP	HIA INC			:	SYSTEM ID# 061497	Na
				ATE FEES FOR EA				
ONE HUNDRED		SUBSCRIBER GROU	P 0	ONE HUNDRED F		SUBSCRIBER GROUF	<u> </u>	ļ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comp
CALL SIGN	DSE	CALL SIGN	DSE		DSE		DSE	Base R
								a
								Synd
								Exclu Surc
								f
								Part
								Dis Stat
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED	FORTY-THIRD	SUBSCRIBER GROU	P	ONE HUNDRED F	ORTY-FOURTH	I SUBSCRIBER GROUP	þ	
COMMUNITY/ ARE	A		0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<u> </u>						
		1						
Fotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	rd Group	\$	0.00	Gross Receipts Fou	irth Group	\$	0.00	
Base Rate Fee Thir	rd Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				11				
Base Rate Fee: Ade Enter here and in bl			criber group a	as shown in the boxes	above.	\$		
	, . <u> </u> , ·							

7 ^{Nai}	61497 O61497				IIA INC			LEGAL NAME OF OWNE RCN TELECOM S
_				TE FEES FOR EAC				
- (0	SUBSCRIBER GROUF		ONE HUNDRED	0	SUBSCRIBER GROUP	ORTY-FIFTH	ONE HUNDRED FO
Comp								
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base F								
a Synd								
Exclu								
Surc								
fo Part								
Dis								
Stat								
_								
-	0.00			Total DSEs	0.00			Total DSEs
-	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	Group	Gross Receipts First G
	0.00	\$	nd Group	Base Rate Fee Seco	0.00	\$	Group	3ase Rate Fee First G
		SUBSCRIBER GROUP	ORTY-EIGHTH	ONE HUNDRED F		SUBSCRIBER GROUP	Y-SEVENTH	ONE HUNDRED FORT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
-	DSE	CALL SIGN			DSE	CALL SIGN	DSE	CALL SIGN
			DSE	CALL SIGN				
			DSE	CALL SIGN				
				CALL SIGN				
			DSE					
····			DSE	CALL SIGN				
····				CALL SIGN				
				CALL SIGN				
				CALL SIGN				
	0.00			CALL SIGN	0.00			Fotal DSEs
	0.00	<u>s</u>			0.00	s	Group	
				Total DSEs		S	Group	Total DSEs Gross Receipts Third (

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUBSCRIBER COMMUNITY/ AREA 0 COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN A A A A A A B CALL SIGN DSE CALL SIGN DSE CALL SIGN	
COMMUNITY/ AREAO COMMUNITY/ AREA	
	0
	N DSE
otal DSEs 0.00 Total DSEs	0.00
Gross Receipts First Group Scond Group Gross Receipts Second Group Scond Group	0.00
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00
ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER	_
OMMUNITY/ AREA 0 COMMUNITY/ AREA	0
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	N DSE
Total DSEs 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
	0.00
ase Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	
nter here and in block 3, line 1, space L (page 7)	

EGAL NAME OF OWNE			HIA INC			S	61497 O61497	Nan
				TE FEES FOR EA				
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GRC		1		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comput of
	DOL		DOL		DOL		DOL	Base Rat
								and
								Syndica
								Exclusi
								Surcha
								for Dertic
						••••		Partia Dista
	•••							Statio
							·····	
	···		<mark></mark>					
			0.00	TILDOF			0.00	
otal DSEs			0.00	Total DSEs			0.00	
Bross Receipts First G	roup	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
ONE HUNDRED FI	TY-FIFTH	SUBSCRIBER GRC	UP	ONE HUNDRED	FIFTY-SIXTH	I SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						••••		
	···		<mark></mark>					
	•••							
otal DSEs	-		0.00	Total DSEs	<u>.</u>		0.00	
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
	P	·			h	·		
ase Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
Base Rate Fee: Add th	e base rat	e fees for each subsc	riber aroup a	H Is shown in the boxes	above			
		pace L (page 7)	noor group a			\$		

LEGAL NAME OF OWN			HIA INC			\$	61497 O61497	Name
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROUI		ONE HUNDRED	FIFTY-EIGHTH	SUBSCRIBER GROUF)	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	-
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
		+		-				
		1		1				
-								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec	cond Group	\$	0.00	
	FTY-NINTH	SUBSCRIBER GRC				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	irth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
				11				
Base Rate Fee: Add t	ha haco rot	a face for each outer	riber group a	as shown in the bayes	above			
Enter here and in bloc			anner Group s			\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM I 0614
	BLOCK B: COMPLITATION OF SYNDICATED FXCL	USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	d the station is not exempt in Part 7, you must also compute a
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber grou Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the 	nercial VHF Grade B contour stations listed in block A, part 9 of p for the VHF Grade B contour stations that were classified as nter zero. r of DSEs used to compute the surcharge.
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs.	Line 2: Enter the Exempt DSEs.
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group subject to the surcharge computation	this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo in the boxes above. Enter here and in block 4, line 2 of space L (page	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM 061				
	BLOCK B: COMPLITATION OF SYNDICATED EXCL	USIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP				
9	If your cable system is located within a top 100 television market ar Syndicated Exclusivity Surcharge. Indicate which major television n by section 76.5 of FCC rules in effect on June 24, 1981:	nd the station is not exempt in Part 7, you must also compute a				
Computation of	First 50 major television market	Second 50 major television market				
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 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 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 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. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. 					
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs				
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs				
	Line 2: Enter the Exempt DOES	Line 2: Line the Exempt DoEs				
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group				
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs				
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation				
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group				
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM II 06149
	BLOCK B: COMPLITATION OF SYNDICATED EXCLU	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	the station is not exempt in Part 7, you must also compute a
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commethis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none entities the subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the 	ercial VHF Grade B contour stations listed in block A, part 9 of for the VHF Grade B contour stations that were classified as er zero. of DSEs used to compute the surcharge.
	NINTH SUBSCRIBER GROUP	TENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	computation SYNDICATED EXCLUSIVITY SURCHARGE Third Group \$ SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for	computation
	in the boxes above. Enter here and in block 4, line 2 of space L (page	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	FORM SA3E. PAGE 20 SYSTEM ID: 061497
	BLOCK B: COMPUTATION OF SYNDICATED EXC	CLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market a Syndicated Exclusivity Surcharge. Indicate which major television by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for cor this schedule.	mmercial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity Surcharge for	 Step 2: In line 2, give the total number of DSEs by subscriber gr Exempt DSEs in block C, part 7 of this schedule. If none Step 3: In line 3, subtract line 2 from line 1. This is the total num 	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using	
	THIRTEENTH SUBSCRIBER GROUP	FOURTEENTH 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 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge computation	subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	FIFTEENTH SUBSCRIBER GROUP	SIXTEENTH 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 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	

	·,-	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
inallie	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market as Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	of First 50 major television market Second 50 major television market Rate Fee INSTRUCTIONS: and Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. lusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. rtially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	SEVENTEENTH SUBSCRIBER GROUP	EIGHTEENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge f in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497	
	BLOCK B: COMPUTATION OF SYNDICATED EX	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9		t and the station is not exempt in Part 7, you must also compute a n market any portion of your cable system is located in as defined	
Computation of	First 50 major television market	Second 50 major television market	
of Image: First SU major television market Base Rate Fee and INSTRUCTIONS: Syndicated Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part this schedule. Surcharge for Partially Distant Stations Inline 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of the schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need your actual calculations on this form.		group for the VHF Grade B contour stations that were classified as ne enter zero. mber of DSEs used to compute the surcharge. g the formula outlined in block D, section 3 or 4 of part 7 of this	
	TWENTY-FIRST SUBSCRIBER GROUP	TWENTY-SECOND SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs	
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1	
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for	
	this subscriber group	this subscriber group	
	subject to the surcharge	subject to the surcharge	
		computation	
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group	
	TWENTY-THIRD SUBSCRIBER GROUP	TWENTY-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 and enter here. This is the total number of DSEs for this subscriber group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	
	subject to the surcharge computation	subject to the surcharge computation	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE	
	Third Group	Fourth Group	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (

	·,-	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
inallie	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market as Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	Eirst 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	f	
	TWENTY-FIFTH SUBSCRIBER GROUP	TWENTY-SIXTH SUBSCRIBER GROUP
	TWENTY-FIFTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group subject to the surcharge computation	this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge f in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	··,-	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market a Syndicated Exclusivity Surcharge. Indicate which major television is by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	And dicated usivityStep 1:In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.Step 2:In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.Step 3:In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.Step 4:Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	TWENTY-NINTH SUBSCRIBER GROUP	THIRTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group \$
	THIRTY-FIRST SUBSCRIBER GROUP	THIRTY-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
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge t in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
of First 50 major television market Second 50 major television market Base Rate Fee and INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A this schedule. Surcharge for Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were cla Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Partially Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Stations Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 or schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not n your actual calculations on this form.		mercial VHF Grade B contour stations listed in block A, part 9 of up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge. ne formula outlined in block D, section 3 or 4 of part 7 of this
	THIRTY-THIRD SUBSCRIBER GROUP	THIRTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	,_	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: d Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. stivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. r Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. ally Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	THIRTY-SEVENTH SUBSCRIBER GROUP	THIRTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group \$	Second Group
	THIRTY-NINTH SUBSCRIBER GROUP	FORTIETH 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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fi in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television n by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
of Image relevision market Base Rate Fee and INSTRUCTIONS: Syndicated Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block this schedule. Surcharge for Partially Distant Stations In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part schedule. In making this computation, use gross receipts figures applicable to the particular group. You do no your actual calculations on this form.		up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge. ne formula outlined in block D, section 3 or 4 of part 7 of this
	FORTY-FIRST SUBSCRIBER GROUP	FORTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF 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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	
	SURCHARGE First Group	Second Group
	FORTY-THIRD SUBSCRIBER GROUP	FORTY-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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group \$	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	··,-	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Maille	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	Rate Fee and INSTRUCTIONS: and Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. slusivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. intrially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	FORTY-FIFTH SUBSCRIBER GROUP	FORTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 computation	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	FORTY-SEVENTH SUBSCRIBER GROUP	FORTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation SYNDICATED EXCLUSIVITY	computation
		SURCHARGE
	Third Group \$	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	··, -	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	And dicated usivityStep 1:In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.Step 2:In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.Step 3:In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.Step 4:Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	FORTY-NINTH SUBSCRIBER GROUP	FIFTIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF 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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group \$
	FIFTY-FIRST SUBSCRIBER GROUP	FIFTY-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 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (particular to the surcharge for the boxes above. Enter here and in block 4, line 2 of space L (particular to the boxes) and the boxes above.	

	·,-	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	Rate Fee and 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 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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero. For Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. stant Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	FIFTY-THIRD SUBSCRIBER GROUP	FIFTY-FOURTH SUBSCRIBER GROUP
	FIFTY-THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs	FIFTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo in the boxes above. Enter here and in block 4, line 2 of space L (pag	

	··,-	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	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 this schedule. usivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. stant Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	FIFTY-SEVENTH SUBSCRIBER GROUP	FIFTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF 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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	FIFTY-NINTH SUBSCRIBER GROUP	SIXTIETH 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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group \$	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fi in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	,_	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	· · ·
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 Ate Fee diamondle for the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show 	
	SIXTY-FIRST SUBSCRIBER GROUP	SIXTY-SECOND SUBSCRIBER GROUP
	SIXI 1-FIKST SUBSCRIDER GROUP	SIXI T-SECOND SUBSCRIDER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF 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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	Second Group
	SIXTY-THIRD SUBSCRIBER GROUP	SIXTY-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 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market	the station is not exempt in Part 7, you must also compute a
Computation of	by section 76.5 of FCC rules in effect on June 24, 1981:	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: and Syndicated Syndicated Exclusivity Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 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 a Exempt DSEs in block C, part 7 of this schedule. If none enter zero. For Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to a	
	SIXTY-FIFTH SUBSCRIBER GROUP	SIXTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge
	computation	computation
	SIXTY-SEVENTH SUBSCRIBER GROUP	SIXTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

	,_	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
or Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 Ate Fee ate Fee atte Fee atte	
	SIXTY-NINTH SUBSCRIBER GROUP	SEVENTIETH SUBSCRIBER GROUP
		SEVENTIETH SUBSCRIDER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF 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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group
	SEVENTY-FIRST SUBSCRIBER GROUP	SEVENTY-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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID#
		061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
•	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a	
9	Syndicated Exclusivity Surcharge. Indicate which major television	
	by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	First 50 major television market	Second 50 major television market
of Base Rate Fee	INSTRUCTIONS:	
and		mmercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule.	
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber gr	roup for the VHF Grade B contour stations that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total num	
Partially Distant	Step 4: Compute the surcharge for each subscriber group using	s figures applicable to the particular group. You do not need to show
Stations	your actual calculations on this form.	s lightes applicable to the particular group. Fou do not need to show
olutions		
	SEVENTY-THIRD SUBSCRIBER GROUP	SEVENTY-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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	• • • • • • • • • • • • • • • • • • •	
	SEVENTY-FIFTH SUBSCRIBER GROUP	SEVENTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs.
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge	page 7)
		Jage 7)

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	☐ First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for com this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group to the subscriber group to the subscriber of the subscriber group using the schedule. If none of the subscriber group using the schedule. In making this computation, use gross receipts 	mercial VHF Grade B contour stations listed in block A, part 9 of up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.
Stations	your actual calculations on this form.	
	SEVENTY-SEVENTH SUBSCRIBER GROUP	SEVENTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2. Enter the Exempt DSES Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2. Effer the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SURCHARGE First Group	SURCHARGE Second Group
	SEVENTY-NINTH SUBSCRIBER GROUP	EIGHTIETH 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fr in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market ar Syndicated Exclusivity Surcharge. Indicate which major television n by section 76.5 of FCC rules in effect on June 24, 1981:	nd the station is not exempt in Part 7, you must also compute a
Computation of	First 50 major television market	Second 50 major television market
of □ First 50 major television market □ Second 50 major television Base Rate Fee and INSTRUCTIONS: Syndicated Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour statistics Syndicated Exclusivity Surcharge for Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour statistics Partially Distant Stations In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge for each subscriber group using the formula outlined in block D, sec schedule. In making this computation, use gross receipts figures applicable to the particular your actual calculations on this form.		mercial VHF Grade B contour stations listed in block A, part 9 of up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge. he formula outlined in block D, section 3 or 4 of part 7 of this
	EIGHTY-FIRST SUBSCRIBER GROUP	EIGHTY-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
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fr in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	d the station is not exempt in Part 7, you must also compute a
Computation	□ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	and Syndicated ExclusivityStep 1:In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, partially Distantand Syndicated ExclusivityStep 1:In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, partially Distantand Syndicated ExclusivityStep 2:In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified 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.Step 4:Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of the schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need	
	EIGHTY-FIFTH SUBSCRIBER GROUP	EIGHTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	EIGHTY-SEVENTH SUBSCRIBER GROUP	EIGHTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge fo in the boxes above. Enter here and in block 4, line 2 of space L (page	

	·,-	FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
inallie	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	· · ·
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	ate Fee INSTRUCTIONS: d Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. sivity Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. r Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. ally Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	EIGHTY-NINTH SUBSCRIBER GROUP	NINETIETH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF 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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	Surcharge Second Group
	NINETY-FIRST SUBSCRIBER GROUP	NINETY-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 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	Base Rate Fee and INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, this schedule. Surcharge for Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were class Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Partially Distant Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 or schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to	
	NINETY-THIRD SUBSCRIBER GROUP	NINETY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined	
Computation	by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for com this schedule.	nmercial VHF Grade B contour stations listed in block A, part 9 of
Exclusivity	Step 2: In line 2, give the total number of DSEs by subscriber gro	
Surcharge for	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.	
Partially	•	
Distant Stations	nt schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	NINETY-SEVENTH SUBSCRIBER GROUP	NINETY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF 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
	SURCHARGE	SURCHARGE
	First Group	Second Group \$
	NINETY-NINTH SUBSCRIBER GROUP	ONE HUNDREDTH 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 and enter here. This is the	Line 3: Subtract line 2 from line 1 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
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge in the boxes above. Enter here and in block 4, line 2 of space L (p	for each subscriber group as shown age 7)

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID#
		061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 Rate Fee and step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 1: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show 	
	ONE HUNDERED FIRST SUBSCRIBER GROUP	ONE HUNDERED SECOND SUBSCRIBER GROUP
	ONE HUNDERED FIRST SUBSCRIDER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 -
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	ONE HUNDERED THIRD SUBSCRIBER GROUP	ONE HUNDERED 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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	SYNDICATED EXCLUSIVITY	
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa	

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID#
		061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	isse Rate Fee and INSTRUCTIONS: syndicated Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 c this schedule. Syndicated Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified at Execlusivity Surcharge for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to streption	
	ONE HUNDRED FIFTH SUBSCRIBER GROUP	ONE HUNDRED SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the 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
	First Group \$	Second Group \$
	ONE HUNDRED SEVENTH SUBSCRIBER GROUP	ONE HUNDRED EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa	

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF PHILADELPHIA INC	SYSTEM ID# 061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market ar Syndicated Exclusivity Surcharge. Indicate which major television n by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commutis schedule. Step 2: In line 2, give the total number of DSEs by subscriber ground Exempt DSEs in block C, part 7 of this schedule. If none exempt 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the	up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.
Distant Stations	schedule. In making this computation, use gross receipts f your actual calculations on this form.	figures applicable to the particular group. You do not need to show
	ONE HUNDRED NINTH SUBSCRIBER GROUP	ONE HUNDRED TENTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF 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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	SURCHARGE Second Group
	ONE HUNDRED ELEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWELVTH 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 and enter here. This is the	Line 3: Subtract line 2 from line 1 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
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pa	

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Humo	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	Eiret 50 maier television merket	Second 50 major tolovision market
of Base Rate Fee	First 50 major television market INSTRUCTIONS:	Second 50 major television market
and	Step 1: In line 1, give the total DSEs by subscriber group for commo	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated	this schedule.	
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially Distant Stations	Iv Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP	ONE HUNDRED FOURTEENTH 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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP	ONE HUNDRED SIXTEENTH 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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)

		FORM SA3E. PAGE 20.
Name		SYSTEM ID#
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none e Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the 	nercial VHF Grade B contour stations listed in block A, part 9 of up for the VHF Grade B contour stations that were classified as nter zero. er of DSEs used to compute the surcharge.
	ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP	ONE HUNDRED EIGHTEENTH 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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group	Second Group
	ONE HUNDRED NINTEENTH SUBSCRIBER GROUP	ONE HUNDRED TWENTIETH 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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SURCHARGE Third Group \$	SURCHARGE Fourth Group \$
	11/1/d Gloup	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	pr each subscriber group as shown ge 7)

		FORM SA3E. PAGE 20.
Name		SYSTEM ID#
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television r by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for com this schedule. Step 2: In line 2, give the total number of DSEs by subscriber gro Exempt DSEs in block C, part 7 of this schedule. If none of Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the s	mercial VHF Grade B contour stations listed in block A, part 9 of up for the VHF Grade B contour stations that were classified as enter zero. er of DSEs used to compute the surcharge.
	ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED TWENTY-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 this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	
	SURCHARGE First Group	Second Group
	ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED TWENTY-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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
		SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge f in the boxes above. Enter here and in block 4, line 2 of space L (pa	age 7)

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Humo	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	☐ First 50 major television market	Second 50 major television market
of Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme	
Syndicated	this schedule.	
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none ent	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	of DSEs used to compute the surcharge.
Partially Distant Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SURCHARGE Third Group	SURCHARGE Fourth Group \$
	a	a
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 7)

	<u> </u>	FORM SA3E. PAGE 20.
Name		SYSTEM ID#
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market an Syndicated Exclusivity Surcharge. Indicate which major television m by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commuthis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group 	mercial VHF Grade B contour stations listed in block A, part 9 of
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none e Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to	
	ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED THIRTIETH 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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge computation
	SYNDICATED EXCLUSIVITY	
	SURCHARGE First Group \$	SURCHARGE Second Group
	ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED THIRTY-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 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group subject to the surcharge computation	this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	ge 7)

		FORM SA3E. PAGE 20.
Name		SYSTEM ID#
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	☐ First 50 major television market	Second 50 major television market
of Base Rate Fee and Syndicated	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	
Exclusivity Surcharge for	Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none end	ter zero.
Partially Distant Stations	ally antStep 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED THIRTY-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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE First Group	SURCHARGE Second Group \$
	ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Humo	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and a Syndicated Exclusivity Surcharge. Indicate which major television mar by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme	
Syndicated Exclusivity Surcharge	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none enter	
for Destionly	Step 3: In line 3, subtract line 2 from line 1. This is the total number of	
Partially Distant Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP
	ONE HUNDRED THIRTT-SEVENTH SUBSCRIBER GROUP	
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF 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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED FORTIETH 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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation SYNDICATED EXCLUSIVITY	computation SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group \$	SURCHARGE Fourth Group \$
	1111d Gloup	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	ach subscriber group as shown 7)

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
or Base Rate Fee and Syndicated	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none end	ter zero.
for Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF 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 subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FORTY-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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation SYNDICATED EXCLUSIVITY
	SURCHARGE Third Group	SURCHARGE Fourth Group
	•	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown

		FORM SA3E. PAGE 20.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Humo	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	· · ·
Computation	□ First 50 maior talavision market	Second 50 major tolovision motivat
of Base Rate Fee	First 50 major television market	Second 50 major television market
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group	for the VHE Grade B contour stations, that were classified as
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none ent	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	of DSEs used to compute the surcharge.
Partially Distant Stations	stant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
		11
	ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the	and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 9 7)

		FORM SA3E. PAGE 20.
Name		SYSTEM ID#
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	
Computation	First 50 major television market	Second 50 major television market
of Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm	
Syndicated Exclusivity Surcharge	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en	•
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	
Partially Distant Stations	step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED FIFTIETH 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 total number of DSEs for	and enter here. This is the
	this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	First Group	Second Group
	ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FIFTY-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 total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (pag	r each subscriber group as shown ge 7)

		FORM SA3E. PAGE 20.
Name		SYSTEM ID#
	RCN TELECOM SERVICES OF PHILADELPHIA INC	061497
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the Syndicated Exclusivity Surcharge. Indicate which major television market system 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee and Syndicated Exclusivity	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group 1 	
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of	er zero. of DSEs used to compute the surcharge.
Partially Distant Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show	
	ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 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 SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	

		FORM SA3E. PAGE 20.					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name	RCN TELECOM SERVICES OF PHILADELPHIA INC 0614						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP						
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:						
Computation							
of	First 50 major television market	Second 50 major television market					
Base Rate Fee and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of						
Exclusivity	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						
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.						
Partially	 Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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 Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show						
	ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP	ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP					
	ONE HUNDRED FIFTT-SEVENTH SUBSCRIDER GROUP						
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF 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 total number of DSEs for	and enter here. This is the 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					
	First Group	Second Group					
	ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP	ONE HUNDRED SIXTIETH 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 subject to the surcharge	this subscriber group subject to the surcharge					
	computation	computation					
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE					
	Third Group	Fourth Group \$					
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown 9 7)					

C	Cable Worksheet		Total amount of Number of SAs rec'd remittance			Initials		
			Date of remittance	_ Check	EFT	FILI	NG FEES	
Cable ID #						Amount	Initials	
Examined by		Reviewed by	Date examination completed	Allocation	number			
Space A Accounting Period								
	January 1 - June 30, 2017 July 1 - December 31, 2013				ver 31, 2017			
	Letter sent			Information received				
		Accepted Phone call/Date/Contact						
Space B Owner								
	Letter sent		[Information received				
		epted	[Phone call/Date	/Contact			
Space D Area Served								
	Letter sent			Information received				
	Accepted Phone			Phone call/Date	one call/Date/Contact			
Space E Secondary Transission								
Service Subscribers:	Letter sent			Information received				
and Rates	Accepted Phone call/Date/Contact							
Space G Primary Transmitters:								
Television	Image: Letter sent Information			Information rec	eived			
		Accepted Phone call/Date/Contact						
Space H Primary Transmitters:								
Radio		Accepted Phone call/Date/Contact						

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