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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
2-23-23	\$ ALLOCATION NUMBER

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period		2022/2				
B	rate	tructions: Give the full legal name of the owner of the cable system. If the owner is a etitle of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines if there were different owners during the accounting period, only the owner ingle statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID	es of the cable syste on the last day of the cunting period.	m. ae accounting period should su		007417
	LE	EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
		CABLE ONE, INC.				
					007417	'20222
					007417	2022/2
		210 E. EARLL DRIVE				
		PHOENIX, AZ 85012-2626				
С		STRUCTIONS: In line 1, give any business or trade names used to id mes already appear in space B. In line 2, give the mailing address of	,			
System	1	IDENTIFICATION OF CABLE SYSTEM:				
		SPARKLIGHT MAILING ADDRESS OF CABLE SYSTEM:				
	2	19201 Pineville Rd - 786 Martin Luther King Blvd (Number, street, rural route, apartment, or suite number)	- 5100 Ma	acphelah Rd., PO Drav	wer 1818	
	4	(Number, street, rural route, apartment, or suite number) LONG BEACH, MS 39560 - BILOXI, MS 39530 - PA	SCAGOULA, N	MS 39568		
		(City, town, state, zip code)				
D	Ins	tructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and re	list on page	1b
Area	wit	h all communities.	1			
Served		CITY OR TOWN	STATE			
First Community		GULFPORT	MS			
	E	selow is a sample for reporting communities if you report multiple cha	annel line-ups in S	pace G. CH LINE UP	SUB (CDD#
	Ald	,	MD	A	1	
Sample		ance	MD	В	2	
		ring	MD	В	3	3
					4	

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 Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 007417 CABLE ONE, INC. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **GULFPORT** MS AD First **BILOXI** AA MS Community **D'IBERVILLE** MS AA 3 **ESCATAWPA** MS ΑE 2 **GAUTIER** MS ΑE HARRISON COUNTY MS ΑD 3 See instructions for HANCOCK CO-DIAMONDHEAD AC MS 5 additional information on alphabetization. HARRISON COUNTY-DIAMONDHEAD MS AD 4 MS 3 **KEESLER AFB** AA LONG BEACH MS AD 4 **MOSS POINT** ΑE MS Add rows as necessary. **NORTH BILOXI (HARRISON COUNTY)** MS AA 3 NORTH BILOXI (JACKSON COUNTY) MS AB **OCEAN SPRINGS** MS AB **PASCAGOULA** MS ΑE **PASS CHRISTIAN** MS AD 4 AB **VANCLEAVE** MS **SAUCIER** MS AD

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:			Economy IPTV	99	\$ 54.00
 Service to first set 	574	\$ 42.00			
 Service to additional set(s) 					
 FM radio (if separate rate) 					
Motel, hotel					
Commercial	177	\$ 79.95			
Converter					
Residential	729	\$ 5.00			
Non-residential	274	5.00-21.00			
I .	·····	7	1	•	T

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

	BLO	CK 1		BLOCK 2	2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	CATEGORY OF SERVICE	Έ	RATE	
Continuing Services:		Installation: Non-residential				
• Pay cable	10.99-19.00	Motel, hotel		Standard Cable	\$	67.75
 Pay cable—add'l channel 		Commercial		Standard IPTV	\$	67.75
Fire protection		Pay cable		Digital Value Pack	\$	16.00
•Burglar protection		Pay cable-add'l channel		Hispanic Tier	\$	6.00
Installation: Residential		Fire protection	 			
• First set	0-90.00	Burglar protection				
Additional set(s)		Other services:				
 FM radio (if separate rate) 		Reconnect	0-90.00			
Converter		Disconnect				
		Outlet relocation	\$ 90.00			
		Move to new address	\$ 90.00			•••••

FORM SA3E, PAGE 3 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name CABLE ONE, INC. 007417 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G 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 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. 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 WFTA-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 AA 1 CALL 2 B'CAST 3 TYPF 4 DISTANT? 5 BASIS OF 6 LOCATION OF STATION SIGN CHANNEL ΩF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) WLOX-2 32 N-M No **BILOXI, MS WLOX** 32 Ν No **BILOXI, MS** See instructions for additional information WMAH-SIMUL 16 Ε No BILOXI, MS on alphabetization. WXXV-2-SIMUL 25 N-M No **GULFPORT, MS** WXXV-3 25 I-M No **GULFPORT, MS BILOXI, MS** WLOX-3 32 I-M No WLOX-2-SIMUL 32 N-M No **BILOXI, MS WWL** 36 Ν No **NEW ORLEANS, LA WXXV** 25 I-M No **GULFPORT, MS** WXXV-SIMUL 25 I-M No **GULFPORT. MS** WXXV-2 25 N-M No **GULFPORT, MS WYES** 11 Ε Yes 0 **NEW ORLEANS, LA** WLOX-2-SIMUL 32 N-M No **BILOXI, MS** WLOX-6 32 I-M **BILOXI, MS** No

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

GULFPORT, MS

NEW ORLEANS, LA

WXXV-3-SIMUL

WWL-2

25

36

I-M

I-M

No

No

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AB 1. CALL 2 B'CAST 3 TYPF 4 DISTANT? 5 BASIS OF 6 LOCATION OF STATION SIGN CHANNEL ΩF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) **WLOX** 32 Ν No **BILOXI, MS** WMAH-SIMUL 16 Ε No BILOXI, MS WXXV-2-SIMUL 25 N-M No **GULFPORT, MS** WXXV-3-SIMUL 25 I-M No **GULFPORT, MS** WLOX-3 32 I-M No **BILOXI, MS** WLOX-6 32 I-M No **BILOXI, MS WXXV** 25 I-M No **GULFPORT, MS** WXXV-2 25 N-M No **GULFPORT, MS WYES** 11 Ε Yes 0 **NEW ORLEANS. LA** WXVO-LD 13 ı PASCAGOULA, MS No WGUD-LD 51 ı No PASCAGOULA, MS WXXV-SIMUL **GULFPORT, MS** 25 I-M No WLOX-SIMUL **BILOXI, MS** 32 N-M No WLOX-2 32 N-M **BILOXI, MS** No

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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.

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

		CHANN	EL LINE-UP	۸۲	
	1	CHANN	EL LINE-UP	AC	
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
WDSU	19	N	No		NEW ORLEANS, LA
WGNO	26	N	No		NEW ORLEANS, LA
WMAH-SIMUL	16	E	No		BILOXI, MS
WLOX	32	N	No		BILOXI, MS
WLOX-2	32	N-M	No		BILOXI, MS
WUPL	17	I	No		SLIDELL, LA
WVUE	29	I	No		NEW ORLEANS, LA
WWL	36	N	No		NEW ORLEANS, LA
WXXV-3	25	I-M	No		GULFPORT, MS
WYES	11	E	No		NEW ORLEANS, LA
WDSU-SIMUL	19	N	No		NEW ORLEANS, LA
WLOX-2-SIMUL	32	N-M	No		BILOXI, MS
WPXL-SIMUL	50	I	No		NEW ORLEANS, LA
WVUE-2	29	I	No		NEW ORLEANS, LA
WGNO-SIMUL	26	N	No		NEW ORLEANS, LA
WNOL-2	15	I	No		NEW ORLEANS, LA
WLOX-SIMUL	32	N-M	No		BILOXI, MS
WUPL-2	17	I-M	No		SLIDELL, LA

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC CONT	
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
WWL-SIMUL	36	N-M	No		NEW ORLEANS, LA
WNOL-2	15	I	No		NEW ORLEANS, LA
WUPL-3	17	I-M	No		SLIDELL, LA
WHNO	21	I	No		NEW ORLEANS, LA
WVUE-4	29	I-M	No		NEW ORLEANS, LA
WVUE-SIMUL	29	I-M	No		NEW ORLEANS, LA
WVUE-3	29	I-M	No		NEW ORLEANS, LA
WWL-2	36	I-M	No		NEW ORLEANS, LA
WPXL	50	I	No		NEW ORLEANS, LA
WVUE-5	29	I-M	No		NEW ORLEANS, LA
WWI-3	36	I-M	No		NEW ORLEANS, LA

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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- 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WMAH-SIMUL	16	Е	No		BILOXI, MS
WXXV-2-SIMUL	25	N-M	No		GULFPORT, MS
WXXV-3	25	I-M	No		GULFPORT, MS
WLOX	32	N	No		BILOXI, MS
WLOX-SIMUL	32	N-M	No		BILOXI, MS
WLOX-2	32	N-M	No		BILOXI, MS
WLOX-2-SIMUL	32	N-M	No		BILOXI, MS
WLOX-3	32	I-M	No		BILOXI, MS
WLOX-4	32	I-M	No		BILOXI, MS
WWL	36	N	No		NEW ORLEANS, LA
WXXV	25	I-M	No		GULFPORT, MS
WXXV-SIMUL	25	I-M	No		GULFPORT, MS
WXXV-2	25	N-M	No		GULFPORT, MS
WYES	11	E	Yes	0	NEW ORLEANS, LA
WLOX-6	32	I-M	No		BILOXI, MS

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions 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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AE	
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
WGUD-LD	51	I	No		PASCAGOULA, MS
WMAH-SIMUL	16	E	No		BILOXI, MS
WXXV-3	25	I-M	No		GULFPORT, MS
WLOX-SIMUL	32	N-M	No		BILOXI, MS
WLOX-2	32	N-M	No		BILOXI, MS
WLOX-2-SIMUL	32	N-M	No		BILOXI, MS
WLOX-3	32	I-M	No		BILOXI, MS
WMAH	16	E	No		BILOXI, MS
WLOX	32	N	No		BILOXI, MS
WXXV	25	I-M	No		GULFPORT, MS
WXXV-SIMUL	25	I-M	No		GULFPORT, MS
WXXV-2	25	N-M	No		GULFPORT, MS
WXXV-2-SIMUL	25	N-M	No		GULFPORT, MS
WXVO-LD	13	1	No		PASCAGOULA. MS

G

Primary Transmitters: Television

FORM SA3E. PAGE 3.					Accookii	NG FERIOD: 2022/2
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	Nume
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or .61(e)(2) and (4 sis, as explained	ne accounting 1 June 24, 198 4), or 76.63 (re d in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa l (e)(2) and (4))]; a	and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	G Primary Transmitters: Television
 basis under specifc FC Do not list the station station was carried 	here in space	G—but do list		e Special Stateme	nt and Program Log)—if the	
 List the station here, 	and also in spa formation conc	ce I, if the sta			ute basis and also on some other the general instructions located	
each multicast stream cast stream as "WETA	associated with	n a station acc	cording to its over	er-the-air designat	such as HBO, ESPN, etc. Identify ion. For example, report multi- stream separately; for example	
					on for broadcasting over-the-air in may be different from the channel	
educational station, by	in each case ventering the le	whether the state tter "N" (for ne	etwork), "N-M" (f	or network multica	pendent station, or a noncommercial st), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the Column 4: If the staplanation of local service	se terms, see pation is outside ce area, see pa	page (v) of the the local serv age (v) of the g	e general instruc rice area, (i.e. "d general instructi	ctions located in the listant"), enter "Yes ons located in the	e paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form.	
cable system carried the carried the distant stati	ne distant statio on on a part-tir	on during the a	accounting perionuse of lack of a	d. Indicate by ente	tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject	
of a written agreement the cable system and a	entered into or a primary transi	n or before Jui mitter or an as	ne 30, 2009, bet ssociation repres	tween a cable syst senting the primar	tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further	
Column 6: Give the	e location of eac canadian station	ch station. For ns, if any, give	r U.S. stations, I the name of th	ist the community e community with	to which the station is licensed by the which the station is identifed.	
Note: If you are unitary	g multiple chair	• •	EL LINE-UP		лаппот шо-чр.	
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)		
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				······		
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FORM SA3E. PAGE 3.					,	
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space Carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	G, identify every ystem during the ons in effect on .61(e)(2) and (4 sis, as explained tations: With record on a substand also in spate formation concern. In station's call associated with -2". Simulcast sechannel numbers the cast, "E" (for no see terms, see pation is outside to entered "Ye and a station on a part-timion of a distant tentered into or a primary transfer includes, also ree categories, a location of each	r television starte accounting a June 24, 1984, or 76.63 (red in the next perspect to any tions, or authors, or au	period, except of the period, except of the period, except of the period	(1) stations carrie e carriage of certa (e)(2) and (4))]; a carried by your context of the carried by	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizin	g multiple chan	nel line-ups, ι	use a separate s	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant statis For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	G, identify every	r television stane accounting in June 24, 1984), or 76.63 (red in the next prespect to any attitute basis. Indeed, if the stane accounting substitute basis. Indeed, if the stane arming substitute basis. Indeed, if the stane account in a station account in a station account in a station account in a station account in a station. In the local server in a stane in column in the local server in a station in the local server in a station. In the local server in a station in the local server in a station in the local server in a station. In the local server in a station in the local server in a station in the local server in a station. In the local server in a station in the local server in a station in the local server in a station. In the local server in a station in the local server in the local server in a station in the local server in the local server in the local server in a station in the local server in the loca	period, except in period, except in permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried by the period of the general instruction of the general instruction.	(1) stations carried e carriage of certa (e)(2) and (4))]; at carried by your carried statement of the second of the program services exthe-air designat column 1 (list each the television static ington, D.C. This rack station, an indepor network multicar "E-M" (for noncontions located in the inplete column 5, sad. Indicate by entectivated channel cubject to a royalty tween a cable system than the program of the primary channel on any other structions located ist the community	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizin	g multiple chan	nel line-ups, ι	use a separate s	space G for each o	channel line-up.	
		CHANN	EL LINE-UP	AH		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
		ļ				
		ļ				

FORM SA3E. PAGE 3.						NO FERIOD. 2022/		
CABLE ONE, IN		STEM:			SYSTEM ID# 007417	Name		
PRIMARY TRANSMITTE		N			307417			
In General: In space G carried by your cable s FCC rules and regulation	6, identify every ystem during thons in effect on	television stane ne accounting June 24, 198	period, except (31, permitting th	(1) stations carried e carriage of certa	and low power television stations) only on a part-time basis under in network programs [sections	G Primary		
substitute program bas	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 carried on a 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							
basis under specifc FC	C rules, regula	tions, or auth	orizations:	, ,	nt and Program Log)—if the	Television		
station was carried	only on a subst	itute basis.	. ,		ute basis and also on some other			
basis. For further in in the paper SA3 for		erning substit	ute basis statior	ns, see page (v) of	the general instructions located			
		-			such as HBO, ESPN, etc. Identify on. For example, report multi-			
WETA-simulcast).			·	`	stream separately; for example			
its community of licens	e. For example	, WRC is Cha	-		on for broadcasting over-the-air in nay be different from the channel			
	in each case w	whether the st			pendent station, or a noncommercial			
(for independent multic	ast), "E" (for no	oncommercial	educational), o	r "E-M" (for noncor	st), "I" (for independent), "I-M" nmercial educational multicast).			
	ation is outside	the local serv	rice area, (i.e. "d	listant"), enter "Ye	s". If not, enter "No". For an ex-			
7	ave entered "Ye	es" in column	4, you must con	nplete column 5, s	tating the basis on which your			
carried the distant stati	on on a part-tin	ne basis beca	use of lack of a	ctivated channel c	• •			
of a written agreement	entered into or	n or before Ju	ne 30, 2009, be	tween a cable syst	payment because it is the subject em or an association representing y transmitter, enter the designa-			
tion "E" (exempt). For s	simulcasts, also	enter "E". If	you carried the	channel on any oth	her basis, enter "O." For a further I in the paper SA3 form.			
Column 6: Give the	location of each	ch station. Fo	r U.S. stations, l	list the community	to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing				•				
	T	CHANN	EL LINE-UP	Al				
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)				
	I	1	I	1	1			

EODM SASE DAGE S					ACCOUNT	ING PERIOD: 2022
FORM SA3E. PAGE 3. LEGAL NAME OF OWN	ED OF CARLE SV	OTEM:			SYSTEM ID#	
CABLE ONE, IN		STEWI.			007417	Name
PRIMARY TRANSMITTE		N				
					and low power television stations) I only on a part-time basis under	G
•				•	in network programs [sections	
76.59(d)(2) and (4), 76 substitute program bas	. , . ,	,	-	i(e)(2) and (4))]; ai	nd (2) certain stations carried on a	Primary Transmitters:
				carried by your ca	able system on a substitute program	Television
basis under specifc FC Do not list the station				e Special Stateme	nt and Program Log)—if the	
station was carried	•					
basis. For further in	formation conc				the general instructions located	
in the paper SA3 for		eian Donot r	enart origination	nrogram services	such as HBO ESPN etc. Identify	
		-			such as HBO, ESPN, etc. Identify ion. For example, report multi-	
			-	-	stream separately; for example	
WETA-simulcast).						
			-		on for broadcasting over-the-air in	
on which your cable sy	•	•	annei 4 in vvasn	ington, D.C. This r	nay be different from the channel	
			ation is a netwo	rk station, an inder	pendent station, or a noncommercial	
educational station, by	entering the le	tter "N" (for ne	etwork), "N-M" (f	or network multica	st), "I" (for independent), "I-M"	
•	,		, .	`	mmercial educational multicast).	
For the meaning of the Column 4: If the sta					e paper 5A3 form. s". If not, enter "No". For an ex-	
planation of local servi			,			
					tating the basis on which your	
					ering "LAC" if your cable system	
carried the distant stati	•				payment because it is the subject	
					tem or an association representing	
					y transmitter, enter the designa-	
, , ,			•	•	ner basis, enter "O." For a further	
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	I in the paper SA3 form. to which the station is licensed by the	
					which the station is identifed.	
Note: If you are utilizin	g multiple chan	nel line-ups,	use a separate s	space G for each o	channel line-up.	
		CHANN	EL LINE-UP	AJ		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF OF	(Yes or No)	CARRIAGE	o. Eddy(flow of di)(flow	
5.5.1	NUMBER	STATION	(10001110)	(If Distant)		
				(
				<u> </u>	<u> </u>	
					ļ	
				†	<u> </u>	
					ļ	

FORM SA3E. PAGE 3.						ACCOUNTIN	NG PERIOD: 2022/2
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			S	SYSTEM ID#	Name
CABLE ONE, II	NC.					007417	INAITIE
PRIMARY TRANSMITTI	ERS: TELEVISIO	N					
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas	system during the ions in effect or 5.61(e)(2) and (4 sis, as explained	ne accounting n June 24, 198 4), or 76.63 (r d in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa I (e)(2) and (4))]; a	and low power television static lonly on a part-time basis und in network programs [sections nd (2) certain stations carried o	er on a	G Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA- WETA-simulcast). Column 2: Give th its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi- For the meaning of the Column 4: If the st planation of local servi Column 5: If you cable system carried t carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	CC rules, regular here in space only on a substand also in spanformation concorm. ch station's call associated with a-2". Simulcast e channel numbers. For example ystem carried the in each case was entered "Ye entering the le cast), "E" (for no ese terms, see pation is outside ice area, see paave entered "Ye ave entered "Ye icion on a part-tirision of a distant the entered into or a primary transisimulcasts, also aree categories, e location of each canadian station canadian station and	ottions, or authors, or a station acceptate and or a station. The station acceptate and or a station acceptate and or a station. The station acceptate and or a station acceptate and or a station. The station acceptate and or a station acceptate and or a station. The station acceptate and or a station acceptate and ac	orizations: It in space I (the It in space I	e Special Statemer I both on a substitute, see page (v) of a program services er-the-air designaticolumn 1 (list each the television staticington, D.C. This result of the television staticington, an independent of the television sociated in the instruction of the television staticing the primarchannel on any other structions located is the community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable systemapacity. payment because it is the subtem or an association represer transmitter, enter the designater basis, enter "O." For a furth in the paper SA3 form. to which the station is licensed which the station is identifed.	ner ed ntify le r in nel nercial etc.).	Television
		CHANN	EL LINE-UP	AK			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.						ING PERIOD: 20	
LEGAL NAME OF OV	VNER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE,	INC.				007417	Hamo	
PRIMARY TRANSMIT	TERS: TELEVISIO	N					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. *List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "							
				•	-		
Note: If you are utiliz				•			
		CHANN	EL LINE-UP	AL			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					Accoont	ING PERIOD. 2022/2
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007417	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable sy FCC rules and regulation	ystem during thons in effect on	ne accounting June 24, 198	period, except (31, permitting th	(1) stations carried e carriage of certa	and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	G Primary
substitute program bas	is, as explaine	d in the next p	oaragraph.	. , , , , , , , , , , , , , , , , , , ,	able system on a substitute program	Transmitters: Television
basis under specifc FC • Do not list the station station was carried of	here in space	G—but do list		e Special Stateme	ent and Program Log)—if the	
· List the station here, a	and also in spa formation conc	ce I, if the sta			ute basis and also on some other f the general instructions located	
Column 1: List each	h station's call	-		. •	s such as HBO, ESPN, etc. Identify ion. For example, report multi-	
WETA-simulcast).			·	`	stream separately; for example	
its community of license	e. For example	, WRC is Cha	-		on for broadcasting over-the-air in may be different from the channel	
	in each case w	whether the st		· · · · · · · · · · · · · · · · · · ·	pendent station, or a noncommercial ast), "I" (for independent), "I-M"	
	ast), "E" (for no	oncommercial	educational), o	r "E-M" (for nonco	mmercial educational multicast).	
planation of local service	ce area, see pa	age (v) of the	general instructi	ons located in the		
cable system carried th	ne distant statio	on during the	accounting perio	od. Indicate by ente	tating the basis on which your ering "LAC" if your cable system	
	ion of a distant	multicast stre	eam that is not s	ubject to a royalty	payment because it is the subject tem or an association representing	
the cable system and a	a primary transr	mitter or an as	ssociation repres	senting the primar	y transmitter, enter the designa- ner basis, enter "O." For a further	
explanation of these the	ree categories,	see page (v)	of the general i	nstructions located	d in the paper SA3 form. to which the station is licensed by the	
FCC. For Mexican or C Note: If you are utilizing		, ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AM		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC.				007417		
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 07.66.16(e)(2) and (4), 07.66.16(e)(2) and (4), 07.66.16(e)(2) and (4), 07.66.16(e)(2) and (4))]; and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). **Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. **Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "E" (for independent), "I-M" (for independent multicast), "E							
		CHANN	EL LINE-UP	AN			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.					ACCOUNT	ING PERIOD: 2022/2
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Nama
CABLE ONE, IN	NC.				007417	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space (carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify every system during the ions in effect or 6.61(e)(2) and (6.5is, as explained stations: With record only on a substant and also in spanformation concurr. In the station's call associated with associated with a carried the in each case very entering the lecast), "E" (for no ese terms, see pation is outside ice area, see pation of a distant the entered "Ye entered "The ion of a distant is entered into or a primary transis simulcasts, also aree categories, e location of each	y television stand accounting in June 24, 1984), or 76.63 (may be accounting in June 24, 1984), or 76.63 (may be accounted in the next prespect to any attitute basis. In the standard in the standard in the standard in the standard in commercial basis because (v) of the standard in commercial basis b	period, except of all, permitting the eferring to 76.61 paragraph. In distant stations orizations: It it in space I (the station was carried ute basis station cording to its over be reported in or as assigned to the annel 4 in Wash ation is a network etwork), "N-M" (freducational), or egeneral instruction of a general instruction of a seam that is not some 30, 2009, be a sociation repressivou carried the cordinal of the general in truction of the general in truction.	(1) stations carried e carriage of certa (e)(2) and (4))]; all carried by your case Special Statement both on a substitute, see page (v) of a program services er-the-air designation of the television static ington, D.C. This rock that station, an indeptor network multicator "E-M" (for noncontions located in the distant"), enter "Yes ions located in the inplete column 5, so d. Indicate by entertivated channel couple to a royalty tween a cable systemating the primary channel on any off instructions located in the community the primary channel on any off instructions located list the community	s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing		. ,		•		
-	· ·	CHANN	EL LINE-UP	AO	·	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWI		STEM:			SYSTEM ID#	Name
CABLE ONE, I	NC.				007417	
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
In General: In space carried by your cable FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis: basis under specific Fe Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fc Column 1: List ear each multicast stream cast stream as "WETA-simulcast). Column 2: Give the its community of licen on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you he cable system carried the distant state For the retransmiss of a written agreement the cable system and tion "E" (exempt). For	G, identify every system during the tions in effect or 6.61(e)(2) and (esis, as explaine Stations: With rCC rules, regular here in space only on a substand also in spanformation concorm. Ch station's call associated with A-2". Simulcast echannel numbers in each case we are the cast, "E" (for not ese terms, see pattern to a control of a distant tentered into or a primary transis simulcasts, also	r television starte accounting a June 24, 198 4), or 76.63 (r d in the next prespect to any tions, or auth G—but do list itute basis. In the starter of the station account of the station account of the station. It is station account of the station. It is station. It is station account of the station. It is station account of the station. It is station account of the station of t	period, except (al., permitting the eferring to 76.61 paragraph. distant stations orizations: tit in space I (the stion was carried ute basis station eport origination cording to its over be reported in coas assigned to tannel 4 in Washi ation is a network etwork), "N-M" (freducational), or egeneral instructive area, (i.e. "digeneral instructive area, (i.e. "digeneral instructive, you must contaccounting period accounting	(1) stations carried e carriage of certa (e)(2) and (4))]; at carried by your case Special Statement both on a substitute, see page (v) of a program services er-the-air designation of the television static ington, D.C. This result in the television static ington, D.C. This result is located in the listant"), enter "Yes on located in the instant"), enter "Yes on located in the instant" in the instant in the instant" in the instant in the	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further	Primary Transmitters: Television
					d in the paper SA3 form. to which the station is licensed by the	
FCC. For Mexican or Note: If you are utilizing		. ,		•	which the station is identifed.	
Note. If you are utilizing	ng multiple chai			<u> </u>	лаппенте-ир.	
		CHANN	EL LINE-UP	AP		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC.				007417		
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sosociated 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 pour cable system carried the distant station or one of the station is outside the local service area, in the pa							
Note: If you are utilizin	g multiple chan	nel line-ups, ເ	use a separate s	space G for each o	channel line-up.		
	1	CHANN	EL LINE-UP	AR			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
		l					
		l			<u> </u>		
		<u> </u>					

FORM SA3E. PAGE	3.				,	
LEGAL NAME OF C	OWNER OF CABLE SY	STEM:			SYSTEM ID#	Name
CABLE ONE	, INC.				007417	
PRIMARY TRANSMI	TTERS: TELEVISIO	N				
In General: In space carried by your cable FCC rules and regut 76.59(d)(2) and (4) substitute Bas basis under specife. Do not list the station was carred. List the station was carred. List the station has basis. For further in the paper SACOlumn 1: List each multicast stree cast stream as "WI WETA-simulcast). Column 2: Give its community of licon which your cable. Column 3: Indiceducational station (for independent meaning of Column 4: If the planation of local second for independent meaning of Column 5: If yo cable system carried the distants. For the retransn of a written agreem the cable system attion "E" (exempt). Fexplanation of thes Column 6: Give	ce G, identify every ble system during the ulations in effect on 76.61(e)(2) and (4 basis, as explained is Stations : With respect to the control of the co	r television state accounting a June 24, 198 4), or 76.63 (nd in the next pespect to any tions, or authors, or aut	period, except to period, except to permitting the eferring to 76.6° paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its own be reported in origination is an entwork to the educational), or equipment of large area, (i.e. "or general instruction as a sample of lack of a sam that is not some 30, 2009, be essociation representations, of the general in truction of the general in truction.	(1) stations carrie e carriage of certa (e)(2) and (4))]; a carried by your content of the carried state of the carr	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. / payment because it is the subject stem or an association representing ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. / to which the station is licensed by the	G Primary Transmitters: Television
Note: If you are uti					which the station is identifed. channel line-up.	
,			EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						ACCOUNTIN	NG PERIOD: 2022/2
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			S	YSTEM ID#	Name
CABLE ONE, IN	IC.					007417	INAITIE
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulation 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or .61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 4), or 76.63 (r d in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa l (e)(2) and (4))]; a	and low power television statio only on a part-time basis unde in network programs [sections nd (2) certain stations carried o	er É	G Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, a basis. For further in in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	C rules, regular here in space only on a substand also in space formation concern. In station's call associated with associated with 2.2". Simulcast a channel number of the cast, "E" (for not see terms, see pation is outside the cast, "E" (for not see terms, see pation is outside to no no a part-tirion of a distant entered into or a primary transistimulcasts, also ree categories, a location of each canadian station of	tions, or authors, or authors, or authors, or authors, or authors, or authors, or a station acceptation and a station acceptation and a station acceptation. Whether the station, whether the station, or a station acceptation and authors, or a station acceptation and authors, or a station and authors, and a station are basis becamen and authors, and a station are a station and authors, and a station are a station are also and a station. For an association, and authors, and are also and a station. For an association, and authors, and are also and a station. For an association, and are also and a station. For an association, and are also and a station. For any, given a station, and are also a station.	orizations: It in space I (the It in space I	e Special Stateme I both on a substitus, see page (v) of a program services er-the-air designation column 1 (list each the television static ington, D.C. This r k station, an indep or network multicar "E-M" (for noncortions located in the instant"), enter "Ye ons located in the nplete column 5, s id. Indicate by ente ctivated channel c ubject to a royalty tween a cable syst senting the primary channel on any oth nstructions located ist the community e community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable systemapacity. payment because it is the sublem or an association representation transmitter, enter the designater basis, enter "O." For a furth I in the paper SA3 form. to which the station is licensed which the station is identifed.	ner d ntify e r in nel ercial) m iect ting t- er	Television
		CHANN	EL LINE-UP	AT			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 4.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

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
	 						
	 						
	 						
							
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FORM SA3E. PAGE 5.						4	ACCOUNTING	PERIOD: 2022/2
LEGAL NAME OF OWNER OF	CABLE SYST	EM:				S۱	STEM ID#	Name
CABLE ONE, INC.							007417	
SUBSTITUTE CARRIAGE								l
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe	riod, under spec	cific present and former FC0	C rules, regula	ations, or authoriz	ations. Fo	r a further	Substitute
1. SPECIAL STATEMENT				-				Carriage:
During the accounting per broadcast by a distant state	iod, did you			s, any nonne			XNo	Special Statement and Program Log
Note: If your answer is "No' log in block 2.			e blank. If your answer is "	Yes," you mu	ust complete the	program		
2. LOG OF SUBSTITUTE In General: List each subst clear. If you need more spa	itute progra	m on a separa		wherever pos	sible, if their me	aning is		
Column 1: Give the title period, was broadcast by a	of every no distant stati	nnetwork televi on and that yo	sion program (substitute p ur cable system substituted	d for the prog	ramming of anot	ther statio	n	
under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L	tion. Do no .ucy" or "NB	t use general c A Basketball:	ategories like "movies", or	"basketball".				
Column 3: Give the call s Column 4: Give the broa	sign of the s idcast statio	station broadca on's location (th	sting the substitute progra e community to which the	m. station is lice		or, in		
the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 giv	th and day		community with which the sem carried the substitute p			the month	l	
Column 6: State the time to the nearest five minutes.	es when the		gram was carried by your o ed by a system from 6:01:1					
stated as "6:00–6:30 p.m." Column 7: Enter the letter	er "R" if the	listed program	was substituted for progra	mming that y	our system was	required		
to delete under FCC rules a gram was substituted for pro	and regulation	ons in effect du	ring the accounting period	; enter the let	ter "P" if the liste	ed pro		
effect on October 19, 1976.		,						
S	UBSTITUT	E PROGRAM	1		EN SUBSTITUT		7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES		FOR DELETION	
	ļ							
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	SA3E. PAGE				OVOTEM ID#	
	BLE ONE	NNER OF CABLE SYSTEM: , INC.			SYSTEM ID# 007417	Name
all a (as page	imounts (gro identifed in e (vii) of the Gross rece during the	The figure you give in this space determines the form you fle and the amount you so receipts) paid to your cable system by subscribers for the system's secondary space E) during the accounting period. For a further explanation of how to core general instructions. eipts from subscribers for secondary transmission service(s) accounting period.	dary tra	nsmissi nis amo \$	on service unt, see 5,551,779.29	K Gross Receipts
IMP	ORTANT: \	You must complete a statement in space P concerning gross receipts.	(.	Amount o	f gross receipts)	
InstruConConIf your feetIf your feet	nplete block nplete block pur system of from block bur system of	e the blocks in this space L to determine the royalty fee you owe: (1, showing your minimum fee. (2, showing whether your system carried any distant television stations. did not carry any distant television stations, leave block 3 blank. Enter the amount of block 4, and calculate the total royalty fee. did carry any distant television stations, you must complete the applicable part this form and attach the schedule to your statement of account.				L Copyright Royalty Fee
	art 8 or part k 3 below.	9, block A, of the DSE schedule was completed, the base rate fee should be	entered	on line	1 of	
	art 6 of the Delow.	DSE schedule was completed, the amount from line 7 of block C should be en	tered or	n line 2	in block	
	art 7 or part block 4 bel	9, block B, of the DSE schedule was completed, the surcharge amount should ow.	d be ent	tered or	line	
Block 1	least the m system's g Line 1. Ent	FEE: All cable systems with semiannual gross receipts of \$527,600 or more a ninimum fee, regardless of whether they carried any distant stations. This fee i gross receipts for the accounting period. ter the amount of gross receipts from space K ltiply the amount in line 1 by 0.01064				
		nter the result here. his is your minimum fee.	\$		59,070.93	
Block 2 Block 3	space G. If "Yes" in thi Did your or X Yes—	TELEVISION STATIONS CARRIED: Your answer here must agree with the in f, in space G, you identifed any stations as "distant" by stating "Yes" in column is block. cable system carry any distant television stations during the accounting period Complete the DSE schedule. No—Leave block 3 below blank and color part 9, block A of the DSE schedule. If none, enter zero	4, you l? mplete l	must cl	neck	
		75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE chedule. If none, enter zero	_		0.00	
	_	dd lines 1 and 2 and enter ere	\$		11,156.89	
Block 4	fro wh	ASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee om block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, hichever is larger	_	\$	59,070.93	Cable systems
	(bl	YNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 lock D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter			0.00	submitting additional
	Line 3. Lir	ne 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 nterest Worksheet)	-		0.00	deposits under Section 111(d)(7) should contact the Licensing
	Line 4. FII	LING FEE	_	\$	725.00	additional fees. Division for the appropriate
		DYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. 1, 2 and 3 of block 4 and enter total here	\$		59,795.93	form for submitting the
		emit this amount via <i>electronic payment</i> payable to Register of Copyrights. (So eneral instructions located in the paper SA3 form for more information.)	ee page	e (i) of th	ne	additional fees.

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007417

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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

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

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

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

DATES AND HOURS OF PART-TIME CARRIAGE

CALL SIGN	WHEN	N CARRIAGE O			CALL SIGN	WHEN	N CARRIAGE O		
	DATE	HOUF TE FROM		RS TO		DATE	FROM	OUF	RS TO
			_					_	
			_						
			=						
			=						

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 8.

Name		SYSTEM ID# 007417
	CABLE ONE, INC.	007417
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	
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name JENAE HECK Telephone 602-364-6092	······································
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)	
	PHOENIX, AZ 85012-2626 (City, town, state, zip)	
	Email JENAE.HECK@CABLEONE.BIZ Fax (optional) 602-364-6013	······
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	n
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ Quynh Tran	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	"F2"
	Typed or printed name: QUYNH TRAN	
	Title: VICE PRESIDENT & TREASURER (Title of official position held in corporation or partnership)	······························
	Date: February 23, 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 Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	# Name						
CABLE ONE, INC. 00741	7 Name						
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?							
X NO							
YES. Enter the total here and list the satellite carrier(s) below	_						
Name Mailing Address Mailing Address Mailing Address Mailing Address							
INTEREST ASSESSMENTS							
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q						
Line 1 Enter the amount of late payment or underpayment	Interest						
	Assessment						
x	_						
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_						
xdays							
Line 3 Multiply line 2 by the number of days late and enter the sum here							
x 0.00274	_						
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,							
space L, (page 7)	_						
(interest charge)							
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.							
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.							
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.							
Owner Address							
First community served							
Accounting period ID number							

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 Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE. PAGE 10.

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.

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have 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, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any 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, 198l, 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.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

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

 1.064% of gross receipts
 Each of the second, third, and fourth DSEs
 0.701% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

0.330% of gross receipts

· If any of the stations were partially distant:

The fifth and each additional DSE

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using (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:

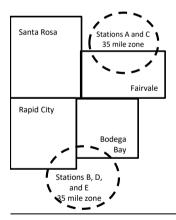
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

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



Distant Stations Carr	ied	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600.000.00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00
 \$6.384.00

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

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

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

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE CABLE ONE, INC.	SYSTEM:			S	YSTEM ID# 007417						
			15:									
			schedule		0.25							
	Liner the sum here and in line	r or part o or tillo	Scriculic.	Ŀ								
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).	· for each indene	endent station, give the DSE	as "1 N"· for ea	ch network or noncom-							
of DSEs for	mercial educational station, give	e the DSE as ".2	5."	45 1.0 , 101 00	on notwork of noncom							
Category "O"	, 5		CATEGORY "O" STATION	IS: DSEs								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
	WYES		0.122 0.011		07.22 0.0.1							
						<u>-</u>						
		TF DSEs OF CATEGORY "O" STATIONS: The DSEs of each station. The sum here and in line 1 of part 5 of this scheduce in the sum headed "Call Sign": list the call signs of the G (page 3). The column headed "DSE": for each independent stational station, give the DSE as ".25." CATE CALL SIGN DSE										
Add rows as												
necessary.				 								
Remember to copy all												
formula into new												
rows.												
												
												
						<u>-</u>						
						<u> </u>						
						<u>-</u>						
				 								
				 								
				 								
				 								
												
												
				<u> </u>								

Name	CABLE ONE,	, INC.					007	7417
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-v Column 6	t the call sign of all distar : For each station, give the correspond with the inform : For each station, give the Divide the figure in column at least to the third decime in For each independent state as ".25." : Multiply the figure in column at least to the third decime in the third decime	te number of hours you nation given in space to tal number of hou min 2 by the figure in a lal point. This is the "It tation, give the "typeumn 4 by the figure in a land of the second	our cable system J. Calculate only urs that the station column 3, and give pasis of carriage v value" as "1.0." F	carried the station one DSE for each broadcast over e the result in devalue" for the stator each network	n during the accounting poth station. the air during the accountecimals in column 4. This t	ting period. figure must ional station, s than the	
Capacity	67 to 101111.	(CATEGORY LAC	STATIONS:	COMPUTATION	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. NU JRS OF ED BY ST M OF	JMBER HOURS ATION NAIR	4. BASIS OF CARRIAG VALUE	5. TYPE VALUE		
						x x		
			÷			X	=	
							=	
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			<u> </u>			x	=	
	Add the DSEs of	OF CATEGORY LAC ST of each station. on here and in line 2 of pa			▶	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effer Broadcast or space I). Column 2: Fat your option. Tolumn 3: Ecolumn 4: Eco	ct on October 19, 1976 (a ne or more live, nonnetwo For each station give the r This figure should correst Enter the number of days Divide the figure in column this is the station's DSE (l	ution for a program the shown by the letter rk programs during the number of live, nonnecond with the information the calendar year: 1 2 by the figure in conformation	etwork programs of tion in space I. 365, except in a lumn 3, and give on rounding, see	ras permitted to of space I); and se (as shown by the carried in substitute eap year. the result in colurpage (viii) of the	Telete under FCC rules are word "Yes" in column 2 of attion for programs that we mn 4. Round to no less the general instructions in the	of re deleted nan the third	
	1. CALL		JBSTITUTE-BAS 3. NUMBER	4. DSE	1. CALL	2. NUMBER	2 NUMBER 4 D	<u>ег</u>
	SIGN	2. NUMBER OF PROGRAMS	OF DAYS IN YEAR		SIGN	OF PROGRAMS	3. NUMBER 4. DS OF DAYS IN YEAR	SE
		÷				÷	= =	
		÷				÷	=	
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	Add the DSEs of	OF SUBSTITUTE-BASIS of each station. on here and in line 3 of pa				0.00		
5 Total Number of DSEs	number of DSEs	R OF DSEs: Give the ame applicable to your system of DSEs from part 2 ● of DSEs from part 3 ●		in parts 2, 3, and 4	of this schedule	and add them to provide the	0.25 0.00	
-		of DSEs from part 4 ●				-	0.00	
	TOTAL NUMBE	R OF DSEs					0.	.25

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

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/2

CABLE ONE, I		SYSTEM:					S'	YSTEM ID# 007417	Name
Instructions: Bloc In block A: • If your answer if ' schedule. • If your answer if '	'Yes," leave the re	mainder of pa		of the DSE schedu	ıle blank and	complete part 8	3, (page 16) of the		6
				ELEVISION MA					Computation of 3.75 Fee
	1981?	schedule—D0 C below.	O NOT COMPI	er markets as defin ETE THE REMAII	NDER OF PA	RT 6 AND 7.	C rules and regula	tions in	
Column 1: CALL SIGN	FCC rules and re	egulations pric ne DSE Sched	or to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refact of 2010.)	planation of p	ermitted statior	ns, see the	,	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursus *F A station pre	ales and reguled pursuant to on as defined al educationa d station (76.6 or DSE schedu pursus) carried the station with the station will be st	ations cited be to the FCC mark in 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC d on a part-time thin grade-B co	e or substitute basi ontour, [76.59(d)(5)	e in effect on 557, 76.59(b), (1), 76.63(a) is a stitution of grass prior to June	June 24, 1981.) 76.61(b)(c), 76 referring to 76.6 to 76.61(d)] ndfathered stat	.63(a) referring to 61(e)(1) tions in the		
Column 3:	*(Note: For those this schedule to d	e stations ider determine the	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2	, you must co	mplete the wor	Т.	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	
WYES	С	0.25							
<u></u>									
	1		1			1		0.25	
		Е	BLOCK C: CC	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from բ	oart 5 of this s	schedule					
Line 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve					
Line 3: Subtract (If zero, l				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter su	m here				х		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DSI	Es from line	3						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	

BLE ONE,	OWNER OF CABLE S	SYSTEM:						S'	YSTEM ID# 007417	Name
		BLOC	K	A: TELEVIS	SION MARKETS	(CONTINI	JED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
 			$\ \ $							Computation of 3.75 Fee
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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE, INC. 007417 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. the DSE Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Schedule for Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B. column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 6. PERMITTED 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT SIGN DSE **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? No—Proceed to part 8 X Yes—Complete blocks B and C. BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE 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. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 **TOTAL DSEs** TOTAL DSEs

BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1 Enter the amount of gross receipts from space K (page 7)	779.29
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	Surcharge 0.00
• Is any portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.	
SECTION 3: TOP 50 TELEVISION MARKET	
Did your cable gratem retransmit the signals of any partially distant talevision stations during the accounting paried?	
Section 3a Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X No—Complete the applicable section below.	
If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
A. Enter 0.00599 of gross receipts (the amount in section1)	
B. Enter 0.00377 of gross receipts (the amount in section 1) \$	
C. Subtract 1.000 from total permitted DSEs (the figure on	
line C in section 2) and enter here	
D. Multiply line B by line C and enter here	
E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
Section 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 Yes—Complete part 9 of this schedule. X 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 DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	
B. Enter 0.00189 of gross receipts (the amount in section 1)	
C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
D. Multiply line B by line C and enter here	
E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	

Name		IE OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. 007417
7	Section	
7	4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)
Syndicated 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
8 Computation of Base Rate Fee	6 was of In blo In blo If you blank. What if were located to the ware located to the w	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. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS
	• Did yo	our cable system retransmit the signals of any partially distant television stations during the accounting period?
		Yes—Complete part 9 of this schedule. No—Complete the 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) Base Rate Fee

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/2

Name	SYSTEM ID# 007417				E OF OWNER OF CABLE SYSTEM: ONE, INC.	
		tion 3 blank.	e and leave section	r base rate fee here	he figure in section 2 is more than 4.000, compute your base	on If the
8						
J					A. Enter 0.01064 of gross receipts	Α.
			▶ <u>\$</u>		(the amount in section 1)	
Computation					3. Enter 0.00701 of gross receipts	В.
of				<u> </u>	(the amount in section 1)	
Base Rate Fee			▶\$		C. Multiply line B by 3.000 and enter here	C.
						D.
				▶ <u>\$</u>	(the amount in section 1)	
					E. Subtract 4.000 from total DSEs	E.
				<u> </u>	(the figure in section 2) and enter here	
		<u></u> ▶ <u>\$</u>			F. Multiply line D by line E and enter here	F.
					G. Add lines A, C, and F. This is your base rate fee.	G.
	0.00	▶ \$		e 7)	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	

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

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

First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. **Finally:** Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.

NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.

How to Identify a Subscriber Group for Partially Distant Stations

Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.

Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)

Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.

Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.

In each section:

- Identify the communities/areas represented by each subscriber group.
- Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.
- If
- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

9

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007417 CABLE ONE, INC. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

CABLE ONE, INC.		E SYSTEM:				S	YSTEM ID# 007417	Name	
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP			
	FIRST	SUBSCRIBER GROU	Р		SECOND	SUBSCRIBER GROU	Р		
COMMUNITY/ AREA	OCEAN	I SPRINGS, PORT	IONS OF	COMMUNITY/ AREA	PASCAG	GOULA, ESCATAV	VPA, PORT	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
WYES	0.25							Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
	···						••••		
					<u> </u>				
							····		
							····		
Total DSEs			0.25	Total DSEs			0.00		
Gross Receipts First G	roup	\$ 853,	012.43	Gross Receipts Secon	d Group	\$ 1,18	84,962.88		
Base Rate Fee First G	roup	\$ 2,	269.01	Base Rate Fee Second	d Group	\$	0.00		
	THIRD	SUBSCRIBER GROU	P		FOURTH	SUBSCRIBER GROU	P		
COMMUNITY/ AREA	BILOXI	, HARRISON COU	NTY	COMMUNITY/ AREA	HARRIS	ON CO (DIAMONE	HEAD), GI		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
WYES	0.25			WYES	0.25				
							<mark></mark>		
							<mark></mark>		
							<mark></mark>		
					<u>-</u>				
					<u>-</u>				
					<u>-</u>				
Total DSEs			0.25	Total DSEs			0.25		
Gross Receipts Third G	Proup	\$ 1,289,408.46 Gross Receipts Fourth Group \$ 2,051,897.16							
Gross Neceipts Third C	эгоир	φ 1,203,	700.70	Gloss Neceipis i ouitii	Group	φ 2,0	31,037.10		
Base Rate Fee Third G	Group	\$ 3,	3,429.83 Gross Receipts Fourth Group \$ 2,051,897.16						
			ber group a	II as shown in the boxes ab	ove.				
Enter here and in block	3, line 1, s	pace L (page 7)				\$	11,156.89		

	ON OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP					I OCK A		
1	JP	IBER GROUP I SUBSCRIBER GROU		 		SUBSCRIBER GROU		
9	0			COMMUNITY/ AREA		OCK COUNTY (DIA		COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and		<u> </u>	<u>.</u>					
Syndica		<u> </u>					-	
Exclusiv Surchar		<u> </u>						
for			<u></u>				<u> </u>	
Partial								
Distan								
Station								
							-	
		<u> </u>	-				<u> </u>	
•								
-								
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	,498.36	<u>\$ 172</u>	oup	iross Receipts First Gr
	0.00	\$	d Group	Gross Receipts Secon	,498.36	\$ 172	oup	ross Receipts First Gr
	0.00	\$		Gross Receipts Secon Base Rate Fee Secon	0.00	<u>\$</u> 172		
	0.00		d Group		0.00	\$ 172	oup	dase Rate Fee First Gr
=	0.00	\$	d Group		0.00	\$	oup	Base Rate Fee First Gr
-	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	dase Rate Fee First Gr
= - - -	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	Base Rate Fee First Gr
= - - - -	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
= - - - - 	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	iase Rate Fee First Gr
= - - - - - -	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	iase Rate Fee First Gr
-	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	iase Rate Fee First Gr
= - - - - - - - - - -	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	iase Rate Fee First Gr
-	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	ase Rate Fee First Gr
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	iase Rate Fee First Gr
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	iase Rate Fee First Gr
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	ase Rate Fee First Gr
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP 0	\$ I SUBSCRIBER GROU	d Group EIGHTH	Base Rate Fee Secon	0.00 JP 0	SUBSCRIBER GROU	SEVENTH	CALL SIGN
	0.00 JP O DSE	\$ I SUBSCRIBER GROU	d Group EIGHTH DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	0.00 JP O DSE	SUBSCRIBER GROU	DSE	CALL SIGN Cotal DSEs
	0.00 DSE 0.00	SUBSCRIBER GROU	d Group EIGHTH DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 JP 0 DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 DSE 0.00	SUBSCRIBER GROU	d Group EIGHTH DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 JP 0 DSE	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	007417	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	IP	•
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 G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Cross resempts riner cr	очр	<u>, </u>		Cross resorpts costs.	ій Огойр	•		
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
					····			
			 		···-	-	····	
						H		
		H	-		·	 		
			-		·			
					···			
					<u> </u>			
			<u> </u>					
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
				•				
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes a	bove.	\$		
2 2 2.0010	.,	· /I3- · /						

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	RTEENTH	SUBSCRIBER GROU		11	JRTEENTH	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
					<u></u>			Syndicated
						 		Exclusivity Surcharge
					<u> </u>			for
								Partially
								Distant
					<u></u>			Stations
					<u> </u>	1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gre	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FII	FTEENTH	SUBSCRIBER GROU	IP	S	IXTEENTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
						 		
				-	<u> </u>			
					<mark></mark>			
					<u> </u>			
					<u></u>	1		
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	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
SEVE	NTEENTH	SUBSCRIBER GROU		EIC	HTEENTH	SUBSCRIBER GROUI	Р	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
					<mark></mark>			Syndicated
								Exclusivity Surcharge
					<mark></mark>			for
								Partially
								Distant
					<mark></mark>			Stations
					<u>.</u>			
					<mark></mark>			
							2.22	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NI	NTEENTH	SUBSCRIBER GROU	IP	TV	WENTIETH	SUBSCRIBER GROUI	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u>-</u>			
					<mark></mark>			
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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 th Enter here and in block			ber group	as shown in the boxes ab	oove.	\$		

		IBER GROUP	SUBSCRI		DASENA	COMPUTATION O	LOCK A: (В	
	JP	SUBSCRIBER GROU				SUBSCRIBER GRO			
.	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
Computa	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate						0.122.51011			
and									
Syndicat									
Exclusiv			<u>.</u>						
Surchar		<u> </u>							
for Partiall									
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		1	<u> </u>						
	0.00			Total DSEs	0.00		1	otal DSEs	
	0.00			TOTAL DOES	0.00	0.00			
-		-							
-	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr	
- - 		\$	d Group	Gross Receipts Secon	0.00	\$	oup	iross Receipts First Gr	
- - 		\$		Gross Receipts Secon	0.00	\$			
- - - 	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	dase Rate Fee First Gro	
- - - - -	0.00		d Group	Base Rate Fee Secon	0.00		oup	Base Rate Fee First Gro	
- - - - - -	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro	
-	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
- - - - - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
- - - - - - - - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
-	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
- - - - - - - - - - - - - - - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT	
- - - - - - - - - - - - - - - - - - -	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT	
-	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT	
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro TWENT OMMUNITY/ AREA	
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Base Rate Fee Secon TWENT COMMUNITY/ AREA CALL SIGN	0.00 UP 0 DSE	\$ SUBSCRIBER GRO	oup	TWENT COMMUNITY/ AREA CALL SIGN	
	0.00 0.00 DSE 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH DSE	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	\$ SUBSCRIBER GRO	DSE DSE	TWENT COMMUNITY/ AREA CALL SIGN otal DSEs	
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group Y-FOURTH DSE	Base Rate Fee Secon TWENT COMMUNITY/ AREA CALL SIGN	0.00 UP 0 DSE	\$ SUBSCRIBER GRO	DSE DSE	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	d Group Y-FOURTH DSE	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	SUBSCRIBER GRO CALL SIGN	DSE DSE	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	d Group Y-FOURTH DSE	TWENT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	SUBSCRIBER GRO CALL SIGN	DSE DSE	COMMUNITY/ AREA	

CABLE ONE, INC.	R OF CABLI	E SYSTEM:				S	O07417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
		SUBSCRIBER GROU		THE STATE OF THE S		SUBSCRIBER GROUP	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0,122 0.011	332	07122 07011	552	07.122 07011		07.22 0.0.1	332	Base Rate Fee
						-		and
						·	···	Syndicated
							•••	Exclusivity
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	······································							for
							•••	Partially
							•••	Distant
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
TWENTY-S	SEVENTH	SUBSCRIBER GROU	P	TWENT	Y-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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T			0.00	T			0.00	
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	
Dana Bata 5		. for a few and the second	h					
Enter here and in block			ner group a	as shown in the boxes ab	ove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EACH				
TWEN COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GROU	1P 0	COMMUNITY/ AREA	THIRTIETH	SUBSCRIBER GROU	P 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
					.			Syndicated
								Exclusivity
					<u>.</u>			Surcharge
					<mark></mark>			for Partially
	•••••••				.			Distant
								Stations
					<u> </u>			
					<u>-</u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIR	TY-FIRST	SUBSCRIBER GROU	IP	THIRT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
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						H	<u> </u>	
	···				<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				**				
Base Rate Fee: Add th Enter here and in block			iber group	as shown in the boxes at	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EACH	SUBSCR	BER GROUP		
	TY-THIRD	SUBSCRIBER GROU		11	Y-FOURTH	SUBSCRIBER GROUI		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
					<u> </u>			for
								Partially
		-				 		Distant
					<u> </u>			Stations
	•••••••				<u> </u>			
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
THIR	TY-FIFTH	SUBSCRIBER GROU	Р	THII	RTY-SIXTH	SUBSCRIBER GROUI	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>	-		
					<u> </u>			
					<u></u>			
		-			<u>-</u>			
					<u>-</u>	-		
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	Groun	\$	0.00	
	. 2up	Ψ	3.00	Suco nato i se i oditii	J. Sup	L	0.00	
Rase Rate Feet Add the	a haso rate	foos for each subser	iher aroun	as shown in the boxes al	nove			
Enter here and in block			iser group	as snown in the boxes at		\$		

		IRER GROUP	SHRSCPI			(.() \/ P \D \ \	I OCK A.	H
1	JP	SUBSCRIBER GROU				COMPUTATION O SUBSCRIBER GRO		
9	DSE			COMMUNITY/ AREA	0			OMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
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Exclusiv						-	-	
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=	0.00			Total DSEs	0.00			otal DSEs
		¢	d Group	Gross Pagaints Sacon	0.00	e	oun	roce Pacainte Eiret Gr
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
		\$		Gross Receipts Secon	0.00	\$		
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	l ase Rate Fee First Gro
	0.00		d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gro
	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gro
	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	ase Rate Fee First Gro THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIRT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	ase Rate Fee First Gro THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	THIR
	0.00 0.00	\$ SUBSCRIBER GROU	d Group FORTIETH	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup TY-NINTH	THIRT COMMUNITY/ AREA CALL SIGN
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	SUBSCRIBER GRO	DSE DSE	THIRTOMMUNITY/ AREA CALL SIGN otal DSEs
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	0.00 UP 0 DSE	\$ SUBSCRIBER GRO	DSE DSE	THIRTOMMUNITY/ AREA CALL SIGN otal DSEs
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	DSE Group	Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	SUBSCRIBER GRO	DSE DSE	COMMUNITY/ AREA

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	TY-FIRST	SUBSCRIBER GROU		11	Y-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
					<u></u>			Syndicated
						<u> </u>		Exclusivity Surcharge
					<u> </u>			for
								Partially
								Distant
		-			<mark></mark>			Stations
					<u> </u>	1		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FOR'	TY-THIRD	SUBSCRIBER GROU	IP	FORT	Y-FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
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					<u> </u>	<u> </u>		
					<mark></mark>			
					<u>-</u>			
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	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
FOR	TY-FIFTH	SUBSCRIBER GROU	IP	FOI	RTY-SIXTH	SUBSCRIBER GROU	Р	•
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
					<mark></mark>			Stations
					<mark></mark>	<u> </u>		otation:
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
·	•	-			·			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FORTY-S	SEVENTH	SUBSCRIBER GROU	IP	FOR1	Y-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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	as shown in the boxes at	ove.	\$		

CABLE ONE, INC		E SYSTEM:				5	007417	Name
				ATE FEES FOR EAC			ID	
COMMUNITY/ AREA	KIY-NINIH	SUBSCRIBER GRO	0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	0 0	9 Computation
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
		<u> </u>						
Total DSEs			0.00	Total DSEs		II	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
·	·							
Base Rate Fee First (\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		†		SUBSCRIBER GROU		
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 Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
FIF	TY-THIRD	SUBSCRIBER GROU	JP	FIFT	Y-FOURTH	SUBSCRIBER GROU	Р	•
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
					<u></u>			Distant Stations
								Stations
								
		H						
			-		<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FIF	TY-FIFTH	SUBSCRIBER GROU	JP	FI	FTY-SIXTH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
			iber group	as shown in the boxes al	oove.	¢		
Enter here and in block	. J, IIIIE I, S	pace L (page /)				\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
Е	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	SEVENTH	SUBSCRIBER GROU		Ti .	TY-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
			0.00	T			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 Secon	nd Group	\$	0.00	
FIF	TY-NINTH	SUBSCRIBER GROU	ΙP		SIXTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						 		
			<u> </u>					
			l			H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	¢	0.00	Base Rate Fee Fourth	Group	¢	0.00	
Dase Nate i ee miid G	- Jup	\$	0.00	Dase Nate i ee Foulti	. Огоир	\$	0.00	
Base Bate 5				and the same to the transfer	L			
Enter here and in block			iver group	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABLI	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
SIX	TY-FIRST	SUBSCRIBER GROU	JP	SIXT	Y-SECOND	SUBSCRIBER GROU	Р	•
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 Gr	oup	•	0.00	Gross Receipts Secon	d Group	¢	0.00	
Gioss Receipts Filst Gi	oup	\$	0.00	Gioss Receipts Secon	la Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GROU	JP	SIXT	Y-FOURTH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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	
				Ш				
Base Rate Fee: Add the	e base rate	e fees for each subscr	iber aroup :	as shown in the boxes at	bove.			
Enter here and in block			- 5.5ap			\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
SIX	TY-FIFTH	SUBSCRIBER GROU	JP	SI	XTY-SIXTH	SUBSCRIBER GROU	Р	0
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
					<mark></mark>			Surcharge
					<mark></mark>			for
		-						Partially
					<mark></mark>			Distant
								Stations
					<mark></mark>			
		L			<u> </u>	+		
	<u> </u>				<u>-</u>	<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SIXTY-	SEVENTH	SUBSCRIBER GROU	JP	SIXT	Y-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs		11	0.00	
Gross Receipts Third G	iroup	\$	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 th	e hase rate	e fees for each subscr	iber group	as shown in the boxes at	nove			
Enter here and in block			group	55 III allo 50x03 di		\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
SIX	TY-NINTH	SUBSCRIBER GROU		SE	VENTIETH	SUBSCRIBER GROU	Р	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
					<mark></mark>			Syndicated
								Exclusivity Surcharge
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		-			<mark></mark>			Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gre	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SEVEN	TY-FIRST	SUBSCRIBER GROU	IP	SEVENT	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
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					<u> </u>			
					<mark></mark>			
					<u>-</u>			
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	as shown in the boxes ab	oove.	\$		

SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rat	SEVENTY-THIRD SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 9 COMMUNITY/ AREA 9 COMMUNITY/ AREA 1 COMMUNITY/ AREA 0 COMMUNITY/ AREA	SEVENTY-THIRD SUBSCRIBER GROUP DMMUNITY/ AREA 0 COMMUNITY/ AREA 0 C	SEVENTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 CALL SIGN DECALL SIGN D	BLOCK A	A: COMPUTATION (ノニ ひみるに ベケ	ATE FEES FOR EAG	Π			
SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate DSE DSE	ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee Second Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL S	Compute CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE GRALL SIGN DSE Base Rate Fee Group SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE GRALL S	CALL SIGN DSE CALL SIGN CALL S				TI .			JP	_
SIGN DSE	ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0 C	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COM	CALL SIGN DSE CALL SIGN	OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	_
and Syndical Exclusive Surchar for Partial Distan Station SES 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0	and Syndical Exclusive Surchar for Partial Distan Station	and Syndical Exclusive Surchar for Partiall Distan Station Station Syndical Exclusive Surchar for Partiall Distan Station Station	and Syndical Security Syndical Distant Station	CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
SES 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Syndicat Exclusive Surchar for Partial Distan Station al DSEs se Rate Fee First Group se Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA	Syndicat Exclusive Surchar for Partial Distan Station Ital DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Syndical Exclusive Surchard for Partial Distan Station otal DSEs								Base Rate
Partial Distant Station SEES 0.00 Gross Receipts Second Group \$ 0.00 Agree Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0	Exclusive Surchary for Partiall Distant Station all DSEs	Exclusive Surchary for Partiall Distant Station Intal DSEs	Exclusive Surchar for Partial Distan Station Stal DSEs								and
Surchar for Partiall Distan Station SES 0.00 Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Secepts First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0	Surchar for Partiall Distan Station al DSEs se Rate Fee First Group se Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Surchar for Partiall Distan Station tal DSEs oss Receipts First Group see Rate Fee First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 OMMUNITY/ AREA 0	Surchar for a part of the part								Syndicat
for Partiall Distant Station SES 0.00 Gross Receipts Second Group \$ 0.00 ate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0	for Partiall Distant Station al DSEs ss Receipts First Group se Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	tal DSEs oss Receipts First Group see Rate Fee Second Group see Rate Fee First Group see Rate Fee First Group see Rate Fee Second Group see Rate Fee Second Group see Rate Fee First Group see Rate Fee First Group see Rate Fee Second Group see Rate Fee First Group see	For Partial Distant Station								
Partially Distant Station: SES 0.00 Gross Receipts Second Group \$ 0.00 Acte Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0	Partially Distant Station: Al DSEs 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0	Partially Distant Station: Atal DSEs Oss Receipts First Group SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-FIFTH SUBSCRIBER GROUP OMMUNITY/ AREA O OMMUNITY/ AREA	Partial Distant Station Distant								
Distant Station: SES 0.00 Total DSES 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0	Distant Station: Distant Station: Distant Stat	Distant Station: Distant Station: Distant Stat	Distant Station Distan								
SES 0.00 Total DSES 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA 0 COMMUNITY/ AREA 0	Station: Station: Station: Al DSEs D.00 Total DSEs Serecipts First Group Serecipts First Group Serecipts First Group Seventy-Fifth Subscriber Group COMMUNITY/ AREA O COMMUNITY/ AREA O O O O O O O O O O O O O	Stations Statio	Station Sta					·····			
SES	al DSEs	tal DSEs	Mai DSEs John DSE John D								
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SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA COMMUNITY/ AREA O COMMUNITY/ AREA O	SEVENTY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0	SEVENTY-FIFTH SUBSCRIBER GROUP DMMUNITY/ AREA 0 COMMUNITY/ AREA 0	SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN			_			\$	0.00	
SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA COMMUNITY/ AREA O COMMUNITY/ AREA O	SEVENTY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0	SEVENTY-FIFTH SUBSCRIBER GROUP DMMUNITY/ AREA 0 COMMUNITY/ AREA 0	SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	<u>*</u>		
SEVENTY-FIFTH SUBSCRIBER GROUP UNITY/ AREA O COMMUNITY/ AREA O	SEVENTY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0 COMMUNITY/ AREA 0	SEVENTY-FIFTH SUBSCRIBER GROUP DMMUNITY/ AREA 0 COMMUNITY/ AREA 0	SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	<u>*</u>		
UNITY/ AREA 0 COMMUNITY/ AREA 0	MMUNITY/ AREA 0 COMMUNITY/ AREA 0	DMMUNITY/ AREA 0 COMMUNITY/ AREA 0	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE C		\$						
			CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SIGN DSE CALL SIGN DSE CALL SIGN DSE	ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	otal DSEs	ase Rate Fee First Group SEVENTY-FIFT	\$	0.00	Base Rate Fee Seco	nd Group ENTY-SIXTH	\$	0.00	
SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	otal DSEs	ase Rate Fee First Group SEVENTY-FIFT	\$	0.00	Base Rate Fee Seco	nd Group ENTY-SIXTH	\$	0.00	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
				SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SES 0.00 Total DSEs 0.00	al DSEs 0.00 Total DSEs 0.00	tal DSEs 0.00 Total DSEs 0.00		SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE	\$ H SUBSCRIBER GRO	0.00 DSE	Base Rate Fee Second SEVI COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	DSE	
			ase Rate Fee Third Group s 0.00 Base Rate Fee Fourth Group s 0.00	SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE Datal DSEs	S H SUBSCRIBER GRO	0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN	DSE	\$ CALL SIGN	0.00 JP	
			ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE Datal DSEs	S H SUBSCRIBER GRO	0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN	DSE	\$ CALL SIGN	0.00 JP	
Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	ss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	soss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00		SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE Datal DSEs ross Receipts Third Group	S H SUBSCRIBER GRO	0.00 DSE 0.00 0.00 0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN CALL SIGN Total DSEs Gross Receipts Four	DSE	\$ CALL SIGN	0.00 JP OSE O.00 O.00 O.00	
			oss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			s Seceipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT DMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			oss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			s Seceipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT DMMUNITY/ AREA	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
			s oss Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
				SEVENTY-FIFT	\$ H SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second SEVICOMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	0.00 JP 0	
SES 0.00 Total DSEs 0.00	al DSEs 0.00 Total DSEs 0.00	tal DSEs 0.00 Total DSEs 0.00		SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE	\$ H SUBSCRIBER GRO	0.00 DSE	Base Rate Fee Second SEVI COMMUNITY/ AREA	nd Group	\$ I SUBSCRIBER GROU	DSE	
			ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE Datal DSEs	S H SUBSCRIBER GRO	0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN	DSE	\$ CALL SIGN	0.00 JP	
			ase Rate Fee Third Group s 0.00 Base Rate Fee Fourth Group s 0.00	SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE Datal DSEs	S H SUBSCRIBER GRO	0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN	DSE	\$ CALL SIGN	0.00 JP	
			0:00 200 4	SEVENTY-FIFT OMMUNITY/ AREA CALL SIGN DSE Datal DSEs	S H SUBSCRIBER GRO	0.00	Base Rate Fee Second SEVI COMMUNITY/ AREA CALL SIGN	DSE	\$ CALL SIGN	0.00 JP	

-		IBER GROUP	SUBSCRI				LOCK A: (
	JP	SUBSCRIBER GROU				SUBSCRIBER GRO		
9	007417 UP 0 DSE 0.00 0.00 0.00			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and			<u>.</u>					
Syndica						-		
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for			<u></u>				·	
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	-		Total DOES	_			
	_	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
	_	\$	d Group		0.00	\$	oup	ross Receipts First Gr
	0.00	\$			0.00	\$		
	0.00		d Group	Gross Receipts Secon	0.00	\$ SUBSCRIBER GRO	oup	dase Rate Fee First Gro
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Base Rate Fee First Gro SEVENT
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	SEVENTOMMUNITY/ AREA
	0.00 0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	ase Rate Fee First Gro SEVENTOMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENTOMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENT OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENT OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENT OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENT OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENT OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENT OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENT OMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	ase Rate Fee First Gro SEVENTOMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	Base Rate Fee First Gro
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	SEVENTOMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP	\$ SUBSCRIBER GRO	oup	SEVENTOMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	0.00 UP O DSE	\$ SUBSCRIBER GRO	oup	Sase Rate Fee First Gro SEVENT COMMUNITY/ AREA
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	d Group EIGHTIETH DSE	Gross Receipts Secon Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	SUBSCRIBER GRO	DSE DSE	SEVENT COMMUNITY/ AREA CALL SIGN Total DSEs
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group EIGHTIETH DSE	Gross Receipts Secon Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN	0.00 UP O DSE	\$ SUBSCRIBER GRO	DSE DSE	SEVENT COMMUNITY/ AREA
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	d Group	Gross Receipts Secon Base Rate Fee Secon COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP	SUBSCRIBER GRO	DSE DSE	Sase Rate Fee First Gro SEVENT COMMUNITY/ AREA CALL SIGN

		IBER GROUP	SUBSCINI			COMPUTATION O	LOCK A: (В
	JP	SUBSCRIBER GROU				SUBSCRIBER GRO		
9	DSE			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate						J. 122 2.2.1		
and								
Syndica								
Exclusiv								
Surchar			<u></u>					
for Partial								
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Station						-		
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		I I			0.00			otal DSEs
	0.00			IITotal DSFs				
	0.00			Total DSEs				
	0.00	\$	d Group	Total DSEs Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
	_	\$	d Group			\$	oup	iross Receipts First Gr
	_	\$				\$		
	0.00		d Group	Gross Receipts Secon	0.00		oup	l ase Rate Fee First Gro
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	dase Rate Fee First Gro
	0.00 0.00	\$	d Group	Gross Receipts Secon Base Rate Fee Secon EIGHT	0.00 0.00	\$	oup	ase Rate Fee First Gr
	0.00 0.00	\$	d Group	Gross Receipts Secon Base Rate Fee Secon EIGHT	0.00 0.00	\$	oup	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	\$ SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	\$ SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	\$ SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	dase Rate Fee First Gro
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	iase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	ase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	iase Rate Fee First Green EIGH
	0.00 0.00	\$ SUBSCRIBER GROU	d Group Y-FOURTH	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA	0.00 0.00 UP	SUBSCRIBER GRO	oup TY-THIRD	EIGH COMMUNITY/ AREA CALL SIGN
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	d Group Y-FOURTH DSE	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP 0 0.00 0.00	SUBSCRIBER GRO	OUP TY-THIRD DSE	EIGH OMMUNITY/ AREA CALL SIGN otal DSEs
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	d Group Y-FOURTH DSE	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA CALL SIGN	0.00 0.00 UP 0 DSE	SUBSCRIBER GRO	OUP TY-THIRD DSE	EIGH COMMUNITY/ AREA CALL SIGN
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	d Group Y-FOURTH DSE	Gross Receipts Secon Base Rate Fee Secon EIGHT COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP DSE 0.00	SUBSCRIBER GRO	OUP TY-THIRD DSE	COMMUNITY/ AREA

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
EIGH	TY-FIFTH	SUBSCRIBER GROU	IP	EIGI	HTY-SIXTH	SUBSCRIBER GROU	Р	•
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
					<u></u>			Partially Distant
					<u> </u>			Stations
								Otations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
EIGHTY-S	SEVENTH	SUBSCRIBER GROU	IP	EIGH1	ΓY-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
				ATE FEES FOR EACH				
EIGH' COMMUNITY/ AREA	TY-NINTH	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA	NINTIETH	SUBSCRIBER GROU	P 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
	···········					+		Syndicated
								Exclusivity
					<u></u>			Surcharge
		-						for Partially
								Distant
								Stations
	-				<u></u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GROU	JP	NINET	Y-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	······································				<u></u>			
	<u>-</u>							
						<u> </u>		
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	as shown in the boxes al	bove.	\$		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABLI	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
		SUBSCRIBER GROU		TI .		SUBSCRIBER GROUI	Р	^
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
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								Stations
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					<u></u>			
	<u> </u>		2.22				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 Second	d Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GROU	IP	NINI	ETY-SIXTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u>-</u>			
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					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roun	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
S. SSS T. GOODPIS THIRD OF	. 5 4 P	· ·		Siese Reseipte Fourth	Sioup	<u>*</u>		
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	as snown in the boxes at	юve.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	STEM ID# 007417	Name
				ATE FEES FOR EACH				
NINETY-S	SEVENTH	SUBSCRIBER GROU	P 0	NINET	Y-EIGHTH	SUBSCRIBER GROUP	0	9
COMMONT I/ AREA				COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
					<u> </u>			Surcharge
					<u>. </u>			for Partially
								Distant
								Stations
					<u> </u>			
	<u></u>	-		-	<u> </u>			
						-		
Tatal DCF-			0.00	Total DSEs			0.00	
Total DSEs			0.00			_		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GROU	Р	ONE HU	NDREDTH	SUBSCRIBER GROUP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>			
				-	<u> </u>			
			l				-	
							<u></u>	
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			ber group	as shown in the boxes ab	oove.	\$		

		IBER GROUP	1 SUBSCRI			COMPUTATION	LOCK A: (11
	JP	SUBSCRIBER GROU				SUBSCRIBER GRO		
9	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
Computa of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndica						-	-	
Exclusiv Surchar			·				<u></u>	
for					···			
Partial								
Distar								
Station								
							-	
							-	
				II	0.00			otal DSEs
	0.00			Total DSEs	0.00			
	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	oup	ross Receipts First Gr
	_	\$	nd Group			\$	oup	ross Receipts First Gr
	_	\$				\$		
	0.00		nd Group	Gross Receipts Secon	0.00		oup	ase Rate Fee First Gro
	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	oup	iase Rate Fee First Gr
	0.00 0.00	\$	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRE	0.00 0.00	\$	oup	ase Rate Fee First Gro ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ase Rate Fee First Gro ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ase Rate Fee First Gro ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ase Rate Fee First Gro ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ase Rate Fee First Gro ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ase Rate Fee First Gro ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE
	0.00 0.00	\$ SUBSCRIBER GROU	nd Group	Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA	0.00 0.00	\$ SUBSCRIBER GRO	oup ED THIRD	ase Rate Fee First Gro ONE HUNDRE
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	nd Group	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA CALL SIGN	0.00 0.00 UP 0 DSE	\$ SUBSCRIBER GRO	oup ED THIRD	ONE HUNDRE COMMUNITY/ AREA CALL SIGN
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	D FOURTH DSE	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP 0 0.00 0.00	SUBSCRIBER GRO	DSE	ONE HUNDRE COMMUNITY/ AREA CALL SIGN otal DSEs
	0.00 0.00 DSE	\$ SUBSCRIBER GROU	D FOURTH DSE	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA CALL SIGN	0.00 0.00 UP 0 DSE	\$ SUBSCRIBER GRO	DSE	ONE HUNDRE OMMUNITY/ AREA CALL SIGN otal DSEs
	0.00 0.00 DSE 0.00	SUBSCRIBER GROU	DSE DSE	Gross Receipts Secon Base Rate Fee Secon ONE HUNDRE COMMUNITY/ AREA CALL SIGN Total DSEs	0.00 UP 0 0.00 0.00	SUBSCRIBER GRO	OUP ED THIRD DSE	COMMUNITY/ AREA

LEGAL NAME OF OWNER CABLE ONE, INC.	OF CABL	E SYSTEM:				SYS	O07417	Name
Bl	OCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRE	D FIFTH	SUBSCRIBER GROU	P	ONE HUNDR	ED SIXTH	SUBSCRIBER GROUP		_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SICN	DSE	CALL SICN	DSE	CALLSION	DOE	of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	or 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	l Group	\$	0.00	
ONE HUNDRED S	EVENTH	SUBSCRIBER GROU	Р	ONE HUNDRE	D EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	 				ļ			
	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	
				11				
Base Rate Fee: Add the			ber group a	as shown in the boxes ab	ove.			
Enter here and in block 3	3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
		SUBSCRIBER GROU		TH.		SUBSCRIBER GROU	Р	^
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
					<u> </u>			for Partially
					<u>.</u>			Distant
					<u></u>			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 EL	EVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	TWELVTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>			
					<u>.</u>	<u> </u>		
						-		
		-			<u> </u>			
	 							
	 				<u>.</u>			
					·	<u> </u>		
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	
Race Pate Feet Add the	haen rota	foos for each subser	iher group	as shown in the boyos of	nove			
Base Rate Fee: Add the Enter here and in block			inei group a	as shown in the doxes at	ouve.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
B ONE HUNDRED THIF COMMUNITY/ AREA				ATE FEES FOR EACH ONE HUNDRED FOU		IBER GROUP SUBSCRIBER GROU	P 0	9
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-			<mark></mark>			Base Rate Fee and
					<u>-</u>			Syndicated
		-						Exclusivity
								Surcharge
								for
					<mark></mark>			Partially Distant
					<u>-</u>			Stations
			<u> </u>		<mark></mark>	-		
					<mark></mark>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
0.000 r.000.p.0 ror 0.	- up				а О.оцр			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FII	TEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED S	IXTEENTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					.			
					<u>-</u>			
					<mark></mark>			
				-	<mark></mark>			
	<u> </u>	-						
			<u> </u>		<mark></mark>	-		
					-			
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	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	O07417	Name
ONE HUNDRED SEVER				ONE HUNDRED EIG		IBER GROUP SUBSCRIBER GROUE	0	9
					T por	II out olou		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 Second	d Group	\$	0.00	
Gross recorpts i not or	oup		0.00	Cross recorpts ecoorts	и Огоир	•	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	NTEENTH	SUBSCRIBER GROU		ii .	WENTIETH	SUBSCRIBER GROUP	_	
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	
	<u>-</u>			<u> </u>	•		1	
Raco Pato Foo: Add th	a haen rati	foos for each subser	iher group	as shown in the boxes ab	nove			
Enter here and in block			iser group	as shown in the buxes at	,ov6.	\$		

CABLE ONE, INC.	R OF CABLI	E SYSTEM:				S	007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROU		ONE HUNDRED TWENT				_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0.122.2.0.1						0.122.1.0.1		Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			<u> </u>					
					<u>.</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED TWEN	NTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
					<mark></mark>			
					<u>. </u>			
					<mark></mark>			
	<u> </u>		<u> </u>					
								
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	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
		COMPUTATION OF SUBSCRIBER GROUP	BASE RA			IBER GROUP	0	9
COMMUNITY/ AREA			U	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u>.</u>			Base Rate Fee
	<u></u>				<mark></mark>			and Syndicated
								Exclusivity
								Surcharge
								for Partially
					<u> </u>			Distant
								Stations
			<u> </u>					
							<u></u>	
					<mark></mark>	<u> </u>		
							2.22	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED TWENTY	-SEVENTH	SUBSCRIBER GROUP		11	ITY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
					<mark></mark>	<u> </u>		
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					<u>.</u>		<u></u>	
						1		
Total DSEs			0.00	Total DSEs	1		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	
				Щ				
Base Rate Fee: Add th Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	NTY-NINTH	SUBSCRIBER GROUP		11	THIRTIETH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0.122 3.01								Base Rate Fee
								and
					<u>.</u>			Syndicated
					.			Exclusivity
					<mark></mark>	-		Surcharge for
					<u>-</u>			Partially
								Distant
					<u>.</u>			Stations
						 		
			l		-	H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	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 THIS	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIRT	TY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<mark></mark>			
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					<u>. </u>			
					<u>. </u>			
Total DSEs			0.00	Total DSEs		11	0.00	
		•			0	•		
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	
				П				
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABLI	E SYSTEM:				S	007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED THIF	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-FOURTH	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
					<mark></mark>			Surcharge
					<mark></mark>			for
						 		Partially Distant
					<mark></mark>	 		Stations
			.		···	H		otation.
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup.	•	0.00	Gross Receipts Secon	d Group	¢	0.00	
Gloss Neceipts First Gir	Jup	\$	0.00	Gross Receipts Secon	u Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED THII	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TH	IRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 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	
Bass Bats 5		- francisco de la compansión de la compa						
Base Rate Fee: Add the Enter here and in block			nper group a	as snown in the boxes at	oove.	\$		

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
ONE HUNDRED THIRTY-				TH.		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
		-						
								
			ļ					
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 THIF	RTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						 		
	 							
	ļļ							
								
	 							
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	
D D.: 5								
Enter here and in block			iber group a	as shown in the boxes ab	oove.	\$		

CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FOI	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-SECONE	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
					<mark></mark>			Surcharge
								for
					<mark></mark>			Partially
								Distant Stations
					<mark></mark>			Stations
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					<u>-</u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FOR	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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						<u></u>		
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			ber group	as shown in the boxes at	ove.	\$		

CABLE ONE, INC.	R OF CABLI	E SYSTEM:				S	007417	Name
В	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROUP		III		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
	<mark></mark>							
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
	•				·			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
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			iber group a	as shown in the boxes al	bove.	¢		
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CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	YSTEM ID# 007417	Name
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								Surcharge
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
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Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	IP	ONE HUNDRED FIFTY	/-SECOND	SUBSCRIBER GROUI	D	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gi	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				••				
Base Rate Fee: Add the Enter here and in block			iber group	as shown in the boxes ab	oove.	\$		

COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
SUBSCRIBER GROUP ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP	
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			Total DSEs			0.00	
ase Rate Fee First Group \$		0.00	Gross Receipts Seco	ond Group	\$	0.00	
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ross Receipts Third Group \$		0.00	Gioss Receipts Four	ш Стоир	a	0.00	
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CABLE ONE, INC.							007417	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA	OCEAN	I SPRINGS, POR	TIONS O	COMMUNITY/ AREA	PASCA	GOULA, ESCATA	WPA, PORT	9 Computation
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Total DSEs			0.00	Total DSEs			0.00	
		0.53			d C			
Gross Receipts First G	roup	\$ 853	3,012.43	Gross Receipts Secon	a Group	\$ 1,1	84,962.88	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		, HARRISON CO		COMMUNITY/ AREA		SON CO (DIAMON		
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Total DSEs		_	0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$ 1,289	,408.46	Gross Receipts Fourth	Group	\$ 2,0	51,897.16	
Dana Bata Fra This I C			0.00	Bass Batz For Fr. "	Constitution			
Base Rate Fee Third G	эιουρ	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes at	oove.	\$	0.00	
	. 5,6 1, 5	paso L (page 1)				*	3.00	

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	-	\$	nd Group			\$ 172.	oup	
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CABLE ONE, INC							007417	Name
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
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ase Rate Fee First Grou	ın	e	0.00	Base Rate Fee Sec	and Group	\$	0.00
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CABLE ONE, INC.	R OF CABL	E SYSTEM:				,	SYSTEM ID# 007417	Name
				ATE FEES FOR EAC				
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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0.00	i						
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007	007417 Name
F BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
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	Base Rate
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00	0	\$	d Group	Base Rate Fee Second	0.00	\$	oup	se Rate Fee First Gro
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CABLE ONE, INC.	or or ibee	SYSTEM:				•	007417
				ATE FEES FOR EAC			
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otal DSEs			0.00	Total DSEs	•		0.00
Gross Receipts First Grou	D	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
	r	*				<u>·</u>	
ase Rate Fee First Grou	р	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
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CABLE ONE, INC.	. 07.522	E SYSTEM:				`	007417
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otal DSEs			0.00	Total DSEs			0.00
Gross Receipts First Group	p	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	0	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
SEVENTY-	-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	SUBSCRIBER GRO	UP
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	_
	DSE	CALL SIGN				CALL SIGN	0
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CALL SIGN CALL SIGN Total DSEs Gross Receipts Third Ground			0.00	CALL SIGN	DSE		0 DSE

CABLE ONE, INC.	CABLE SYSTE	:IVI:					007417
				ATE FEES FOR EAC			
EIGHTY-F COMMUNITY/ AREA	FIRST SUBSC	RIBER GROU	<u>JP</u> 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0
				COMMONT IT AIRE			
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otal DSEs			0.00	Total DSEs			0.00
Gross Receipts First Group	\$		0.00	Gross Receipts Sec	ond Group	\$	0.00
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ase Rate Fee First Group	\$		0.00	Base Rate Fee Sec	ond Group	\$	0.00
EIGHTY-T	\$ THIRD SUBSO	RIBER GROU	JP	EIGH	ITY-FOURTH	SUBSCRIBER GRO	•
EIGHTY-T	HIRD SUBSC	RIBER GROU	-		ITY-FOURTH		•
EIGHTY-T OMMUNITY/ AREA		CRIBER GROU	JP	EIGH	ITY-FOURTH		UP
EIGHTY-T			JP 0	EIGH COMMUNITY/ AREA	A	I SUBSCRIBER GRO	UP 0
EIGHTY-T			JP 0	EIGH COMMUNITY/ AREA	A	I SUBSCRIBER GRO	UP 0
EIGHTY-T			JP 0	EIGH COMMUNITY/ AREA	A	I SUBSCRIBER GRO	UP 0
EIGHTY-T OMMUNITY/ AREA			JP 0	EIGH COMMUNITY/ AREA	A	I SUBSCRIBER GRO	UP 0
EIGHTY-T OMMUNITY/ AREA			JP 0	EIGH COMMUNITY/ AREA	A	I SUBSCRIBER GRO	UP 0
EIGHTY-T OMMUNITY/ AREA			JP 0	EIGH COMMUNITY/ AREA	A	I SUBSCRIBER GRO	UP 0
EIGHTY-T OMMUNITY/ AREA			JP 0	EIGH COMMUNITY/ AREA	A	I SUBSCRIBER GRO	UP 0
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CABLE ONE, INC.		SYSTEM:				•	007417	Na
				ATE FEES FOR EAC				
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otal DSEs	=		0.00	Total DSEs			0.00	
Gross Receipts First Group	<u>:</u>	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group		\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
EIGHTY-SEV	ENTH S	SUBSCRIBER GROU	JP	EIG	HTY-EIGHTH	I SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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				ATE FEES FOR EAC				
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Grou	up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Grou		\$	0.00	Base Rate Fee Second		\$	0.00	
	Y-FIRST	SUBSCRIBER GRO				SUBSCRIBER GROU	_	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	DSE	CALL SIGN			DSE	CALL SIGN		
Total DSEs			0.00	Total DSEs			0.00	
CALL SIGN Fotal DSEs Gross Receipts Third Gro		CALL SIGN				\$		

CABLE ONE, INC.		E SYSTEM:				•	8YSTEM ID# 007417	Name
NINE		COMPUTATION (SUBSCRIBER GRO	OUP	Ħ	ETY-FOURTH	RIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
					<mark></mark>			and
								Syndicated Exclusivity
	<u></u>							Surcharge
								for
								Partially
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	•	0.00	Gross Receipts Sec	and Croup	•	0.00	
Gioss Receipts Filst G	Toup	\$	0.00	Gloss Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINI	ETY-FIFTH	SUBSCRIBER GRO		N	INETY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Froun	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
S. 300 Moodiple Tilliu C	оч р	·*	<u> </u>	3,000 1,000ipis 1 00	Стоир	<u>*</u>		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add th		e fees for each subs pace L (page 7)	scriber group	as shown in the boxes	above.	\$		

		E SYSTEM:				`	SYSTEM ID# 007417	Nan
				ATE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Comput
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	ΓΥ-NINTH	SUBSCRIBER GRO	DUP	ONE I	HUNDREDTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE/			0	
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	
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		U	COMMUNITY AREA			U	Computation
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate Fe
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		0.00	Total DSEs			0.00	
up	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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up	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
D THIRD	SUBSCRIBER GRO	DUP	ONE HUNDE	RED FOURTH	SUBSCRIBER GRO	JP	
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oup	\$	0.00	Base Rate Fee Fou	ui Gioup	\$	0.00	
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otal DSEs		1	0.00	Total DSEs		11	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
ONE HUNDRE	O SEVENTH	SUBSCRIBER GRO		ONE HUND	RED EIGHTH	SUBSCRIBER GROU	JP	
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Total DSEs	Group		0.00	Total DSEs	th Group		0.00	

CABLE ONE, INC.	CABLE SYSTEM:					007417	Na
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ase Rate Fee First Group ONE HUNDRED ELEVE	\$ ITH SUBSCRIBER GR	-			\$ SUBSCRIBER GRO	•	
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ER OF CABLE SYSTEM: SYSTEM 007	M ID# 7417 Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
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EGAL NAME OF OWNER OF CACABLE ONE, INC.	ABLE SYSTEM:					007417	Nan
	A: COMPUTATION (ATE FEES FOR EAC	H SUBSCR	RIBER GROUP		
ONE HUNDRED SEVENTEEN	ITH SUBSCRIBER GROU		Ti .		SUBSCRIBER GROUF		9
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otal DSEs	-	0.00	Total DSEs			0.00	
		0.00		and Group	\$	0.00	
iross Receipts First Group	\$	0.00	Gross Receipts Seco	nia Oroup			
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ma Group			
	\$	0.00	Base Rate Fee Second		\$	0.00	
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Sase Rate Fee First Group ONE HUNDRED NINTEEN	\$	0.00	Base Rate Fee Seco	ond Group		•	
ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Seco	ond Group		UP	
ase Rate Fee First Group ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
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ase Rate Fee First Group ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
ase Rate Fee First Group ONE HUNDRED NINTEEN OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
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ONE HUNDRED NINTEEN	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
OMMUNITY/ AREA	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEEN	\$ TH SUBSCRIBER GRO	0.00 OUP	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	ond Group	i SUBSCRIBER GRO	UP 0	
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ONE HUNDRED NINTEEN COMMUNITY/ AREA CALL SIGN DSE	\$ TH SUBSCRIBER GRO	0.00	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	DSE	CALL SIGN	DSE DSE D.00	
ONE HUNDRED NINTEEN COMMUNITY/ AREA CALL SIGN DSE	\$ TH SUBSCRIBER GRO	0.00 OUP O DSE	Base Rate Fee Second ONE HUNDRED COMMUNITY/ AREA	DSE	i SUBSCRIBER GRO	UP 0 DSE	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNI		E SYSTEM:				S	007417	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP		
ONE HUNDRED TW	ENTY-FIRST	SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 Computation
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TW	ENTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED TWE	NTY-FOURTH	H SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
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Total DSEs				11	41- 0	\$	0.00	
Total DSEs Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	tn Group	Ψ	0.00	

EGAL NAME OF OWNER OF OCABLE ONE, INC.						007417	Nam
			ATE FEES FOR EAC				
ONE HUNDRED TWENTY-F	IFTH SUBSCRIBER G		Ti .		H SUBSCRIBER GROUP		9
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Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Conse Dessints Con	ond Group	\$	0.00	
ross receipts i list Gioup			Gross Receipts Sec				
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sase Rate Fee First Group	\$		Base Rate Fee Seco	ond Group	\$ H SUBSCRIBER GROUP	•	
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ase Rate Fee First Group NE HUNDRED TWENTY-SEVE	\$ ENTH SUBSCRIBER GI	ROUP	Base Rate Fee Seco	ond Group	I	>	
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ase Rate Fee First Group NE HUNDRED TWENTY-SEVE OMMUNITY/ AREA	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
ase Rate Fee First Group NE HUNDRED TWENTY-SEVE	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
Base Rate Fee First Group NE HUNDRED TWENTY-SEVE COMMUNITY/ AREA	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
NE HUNDRED TWENTY-SEVE	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
Sase Rate Fee First Group NE HUNDRED TWENTY-SEVE COMMUNITY/ AREA	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
Base Rate Fee First Group NE HUNDRED TWENTY-SEVE COMMUNITY/ AREA	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
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Base Rate Fee First Group NE HUNDRED TWENTY-SEVE COMMUNITY/ AREA	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
Base Rate Fee First Group NE HUNDRED TWENTY-SEVE COMMUNITY/ AREA	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
Base Rate Fee First Group NE HUNDRED TWENTY-SEVE COMMUNITY/ AREA	\$ ENTH SUBSCRIBER G	ROUP 0	ONE HUNDRED TW COMMUNITY/ AREA	ENTY-EIGHTH	H SUBSCRIBER GROUF	0	
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Base Rate Fee First Group NE HUNDRED TWENTY-SEVE COMMUNITY/ AREA CALL SIGN DS Total DSEs	SE CALL SIGN	DSE DSE	Base Rate Fee Second ONE HUNDRED TW COMMUNITY/ AREA	DSE	CALL SIGN	0 DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE	
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EGAL NAME OF OWNER OF ABLE ONE, INC.	or CARLE	SYSIEM:					6YSTEM ID# 007417	Nam
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ONE HUNDRED TWENTY	Y-NINTH S	SUBSCRIBER GROU		ii e		SUBSCRIBER GROUP		9
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otal DSEs			0.00	Total DSEs			0.00	
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1088 Receipts First Grou	.p	\$	0.00	Il Gross Receipts Seco	na Group	\$	0.00	
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	-	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
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ase Rate Fee First Grou	ıp [\$ SUBSCRIBER GROU			RTY-SECONE	-	•	
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CABLE ONE, INC.	R OF CABL	E SYSTEM:				•	SYSTEM ID# 007417	Name
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								Base Rate Fee
		-						and
								Syndicated
								Exclusivity
	<u></u>				·····			Surcharge for
	<u></u>		·····		·····			Partially
	<u></u>	-	·····					Distant
								Stations
Total 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	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	DUP	ONE HUNDRED	FIFTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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						-	_	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Raco Data Eas Third O	roup		0.00	Raco Poto Foo Foo	rth Group	•	0.00	
Base Rate Fee Third G	ισυμ	4	0.00	Base Rate Fee Fou	тит Стоир	\$	0.00	
				**				
Rase Rate Fee: Add the	e base rat e	e fees for each subs	criber group	as shown in the boxes	above.			

7417 Na								
						COMPUTATION OF		
<u> </u>		SUBSCRIBER GROUP	FTY-EIGHTH			SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED FIFTY
O Comp				COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CABLE ONE. INC. 007417 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 market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee INSTRUCTIONS: 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 Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. 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 Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. 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 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 ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSFs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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C	Cable Worksheet		Total amount of remittance	Number of SAs rec'd		II	Initials	
			Date of remittance	Check EFT		FILING FEES		
Cable ID #						Amount	Initials	
Examined by		Reviewed by	Date examination completed	Allocation	number			
Space A Accounting Period								
	Jan	uary 1 - June 30, 2017	[☐ July 1 - December 31, 2017				
	Lett	er sent]	☐ Information received				
	Acc	epted	[Phone call/Date/Contact				
Space B Owner								
	Lett	er sent	[Information rec	eived			
	Acc	epted	[Phone call/Date	/Contact			
Space D Area Served								
	Lett	er sent		Information received				
	Acc	epted]	Phone call/Date	:/Contact			
Space E Secondary Transission								
Service Subscribers:	Lett	Letter sent			Information received			
and Rates	Acc	Accepted			Phone call/Date/Contact			
Space G Primary Transmitters:								
Television	Lett	er sent		☐ Information received				
	☐ Acc	epted		Phone call/Date	e/Contact			
Space H Primary Transmitters:								
Radio	Acc	epted		Phone call/Date	e/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	1	
Letter sent	☐ Information received	1	
Accepted	Phoe call/Date/Contact	1	
		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	1	
		Space Q Interest Assessment	
Letter sent	☐ Info/add'l fee received		
Accepted	Phone call/Date/Contact		