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						
2-22-23	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@copyright.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	Give the full legal name of the owner of the cable system. If the owner is a title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the busines of these were different owners during the accounting period, only the owner angle statement of account and royalty fee payment covering the entire accounting the interest of this is the system's first filing. If not, enter the system's ID of GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM MASSILLON CABLE TV INC	ess of the cable syste on the last day of the unting period.	m. e accounting period should su		7819
					7819	92022/2
					7819	2022/2
		PO BOX 1000 MASSILLON OH 44648-1000				
С		TRUCTIONS: In line 1, give any business or trade names used to innes already appear in space B. In line 2, give the mailing address of	,			
System	1	IDENTIFICATION OF CABLE SYSTEM:				
		MAILING ADDRESS OF CABLE SYSTEM:				
	2	(Number, street, rural route, apartment, or suite number)				
		(City, town, state, zip code)				
D		tructions: For complete space D instructions, see page 1b. Identify	only the frst comr	nunity served below and rel	list on page	∍ 1b
Area Served	wit	n all communities.  CITY OR TOWN	STATE			
First		WOOSTER CITY WAYNE COUNTY	OH			
Community	В	elow is a sample for reporting communities if you report multiple cha	annel line-ups in S	pace G.		
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	3 GRP#
Sample	Ald		MD	A		1
		ance	MD	В		2
	Gei	ing	MD	В		3

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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: 7819 **MASSILLON CABLE TV INC** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form Δroa 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# **WOOSTER CITY** WAYNE COUNTY OH **First APPLE CREEK** WAYNE COUNTY OH Community **EAST UNION TWP** OH WAYNE COUNTY **SMITHVILLE** WAYNE COUNTY OH OH FRANKLIN TWP WAYNE COUNTY **PLAIN TWP WAYNE COUNTY** OH See instructions for **CHESTER TWP WAYNE COUNTY** ОН additional information on alphabetization. OH MOUNT EATON WAYNE COUNTY OH **WAYNE TWP WAYNE COUNTY CANAAN TWP** WAYNE COUNTY OH **CLINTON TWP** OH WAYNE COUNTY Add rows as necessary. **GREENE TWP WAYNE COUNTY** OH ОН **PAINT TWP** WAYNE COUNTY **SALT CREEK TWP** WAYNE COUNTY OH SUGAR CREEK TWP-WAYNE WAYNE COUNTY OH OH **WOOSTER TWP** WAYNE COUNTY **WAYNE COUNTY CONGRESS TWP** OH **PERRY TWP ASHLAND COUNTY** OH **MILTON TWP** WAYNE COUNTY OH **JACKSON TWP ASHLAND COUNTY** OH **MOHICAN TWP ASHLAND COUNTY** OH

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

MASSILLON CABLE TV INC

SYSTEM ID#

7819

### Ε

#### Secondary Transmission Service: Subscribers and

Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2			
CATECORY OF SERVICE	NO. OF	DATE	CATECODY OF SERVICE	NO. OF	DATE	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
<ul> <li>Service to first set</li> </ul>	7,200	\$ 52.95				
<ul> <li>Service to additional set(s)</li> </ul>						
<ul> <li>FM radio (if separate rate)</li> </ul>						
Motel, hotel						
Commercial						
Converter						
Residential						
Non-residential						
		†		<b>†</b>		

### 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.

	BLOCK 2					
CATEGORY OF SERVICE	RATE CATEGORY OF SERVICE RATE			CATEGORY OF SERVICE	Ξ	RATE
Continuing Services:		Installation: Non-residential				
Pay cable	\$ 15.50	Motel, hotel		HD ESSENTIALS	\$	7.95
<ul> <li>Pay cable—add'l channel</li> </ul>	\$ 73.00	Commercial		НВО	\$	22.15
Fire protection	 ••••••	Pay cable		CINEMAX	\$	15.15
Burglar protection		Pay cable-add'l channel		SHOWTIME	\$	20.15
Installation: Residential	 ••••••	Fire protection		STARZ	\$	15.50
First set		Burglar protection				
Additional set(s)	 ••••••	Other services:				
• FM radio (if separate rate)	 	Reconnect				
Converter	 ••••••	Disconnect				
	 	Outlet relocation				
		Move to new address				

FORM SA3E. PAGE 3.						1	
LEGAL NAME OF OWN					SYSTEM ID	Name	
MASSILLON CA					7819	9	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space of carried by your cable's FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List 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 multice For the meaning of the Column 4: If the st planation of local servicable system carried the distant station.	G, identify every system during the ons in effect on 6.61(e)(2) and (4.5); as explained that in space only on a substand also in spatformation concurm.  h station's call associated with associated with a channel numbers of the ch	r television state accounting a June 24, 198 4), or 76.63 (red in the next pespect to any tions, or authors, or authors, or authors, or authors, or authors, if the state arming substitute basis.  The control of the state and the station account of the FCC has a station account of the state and the station. The state arms are station, whether the state and the local server age (v) of the state and the stat	period, except ( 11, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried atte basis station period ording to its over be reported in compart of the tion is a networn etwork), "N-M" (for educational), or egeneral instructice area, (i.e. "dispersion of lack of accounting period use of lack of accounting period is a ferring period use of lack of accounting period is a ferring period use of lack of accounting to 76.61 paragraphs.	1) stations carried a carriage of certa (e)(2) and (4))]; a carried by your carried by your carried by your carried by the special Statement both on a substite s, see page (v) or program services ar-the-air designate olumn 1 (list each one television station of the station, an independent of the station, and independent of the station	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity.	G Primary Transmitters: Television	
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							
Column 6: Give the	e location of eac Canadian station	ch station. For ns, if any, give nel line-ups, ι	U.S. stations, li the name of the	ist the community e community with pace G for each	d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WEAO	49.1	E	No		AKRON		
FUSION	49.2	E-M	No		AKRON	See instructions for	
MHzWordlview	#N/A	#N/A	No		#N/A	additional information	
WRLM HD	47.1	I	No		CANTON	on alphabetization.	
WBNX	55.1	N	No		AKRON		
Happy Chnl	#N/A	#N/A	No		#N/A		
Movies!	55.3	N-M	No		AKRON		
Heroes&Ic	55.4	N-M	No		AKRON		
WVPX	23.1	N	No		AKRON		
QUBO	#N/A	#N/A	No		#N/A	[	
Start TV	55.5	N-M	No		AKRON		
WKYC		<b>†</b>					
Justice Net							
Cozi	3.3	N-M	No No		CLEVELAND		
WEWS	5.1	N N M	No No		CLEVELAND		
Grit TV	5.2	N-M	No		CLEVELAND		
LAFF TV	5.3	N-M	No No		CLEVELAND		
MJM	8.1	N	No		CLEVELAND		

**ACCOUNTING PERIOD: 2022/2** FORM SA3F PAGE 3 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 7819 **MASSILLON CABLE TV INC** 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 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		
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
Antenna TV	8.2	N-M	No		CLEVELAND
WVIZ	25.1	E	No		CLEVELAND
Ohio Channel	25.2	E-M	No		CLEVELAND
PBS World	25.3	E-M	No		CLEVELAND
Create	25.4	E-M	No		CLEVELAND
PBS Kids	25.5	E-M	No		CLEVELAND
WOIO	19.1	N	No		SHAKER HEIGHTS
Me TV	19.2	N-M	No		SHAKER HEIGHTS
WUAB	43.1	N	No		LORAIN
Bounce	43.2	N-M	No		LORAIN
WDLI	17.1	I	No		CANTON
Decades	#N/A	#N/A	No		#N/A
Quest	3.4	N-M	No		CLEVELAND
Circle	43.3	N-M	No		LORAIN
			No		
WIVM	13.1	I	No		CANTON
ThisTV	13.2	I-M	No		CANTON
LIGHT	13.3	I-M	No		CANTON

FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on 6.61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 1), or 76.63 (red in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; ar	and low power television stations) only on a part-time basis under in network programs [sections nd (2) certain stations carried on a lble system on a substitute program	G Primary Transmitters: Television
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		CHANN	IEL LINE-UP	AC		1
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.					2)/2======	1
MASSILLON CA					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
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,		CHANN	EL LINE-UP	AD		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E, PAGE 3.					0.40=======	
MASSILLON CA					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on 6.61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 1), or 76.63 (red in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; ar	and low power television stations) only on a part-time basis under in network programs [sections nd (2) certain stations carried on a lble system on a substitute program	<b>G</b> Primary  Transmitters:  Television
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		CHANN	IEL LINE-UP	AF		1
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E, PAGE 3.					0.40=======	1
MASSILLON CA					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on .61(e)(2) and (4 sis, as explained	e accounting June 24, 198 ), or 76.63 (re d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	1) stations carried carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections id (2) certain stations carried on a ble system on a substitute program	G  Primary  Transmitters:  Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					0.40=======	
LEGAL NAME OF OWN  MASSILLON CA					SYSTEM ID# 7819	Name
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 thons in effect on .61(e)(2) and (4 is, as explained	e accounting June 24, 198 ), or 76.63 (re d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	1) stations carried carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections d (2) certain stations carried on a ble system on a substitute program	<b>G</b> Primary  Transmitters:  Television
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		CHANN	EL LINE-UP	AH		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					21/2		
LEGAL NAME OF OWN  MASSILLON CA					SYSTEM ID: 7819	Name	
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							
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 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 our part-time basis because of lack of activated channel							
		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.					0.40=======	1
MASSILLON CA					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during thons in effect on .61(e)(2) and (4 is, as explained	ne accounting June 24, 198 I), or 76.63 (re d in the next p	period, except ( 1, permitting the eferring to 76.61 earagraph.	1) stations carried carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections id (2) certain stations carried on a ble system on a substitute program	G  Primary  Transmitters:  Television
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 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 sexplanation of these th Column 6: Give the	C rules, regula here in space only on a substand also in spatormation concorn. In station's call associated with 22". Simulcast sechannel numbers from the cast of	tions, or author G—but do list itute basis. ce I, if the staterning substitution in a station according to the station according to the station. The station according to the station. The station according to the station according to the station. The station according to the station according to the station according to the station and the station according to the station according to the station. The station according to the station according	prizations: it in space I (the tion was carried ute basis station: eport origination produce to the reported in compared to the station is a network twork), "N-M" (for educational), or egeneral instruction is a network twork), "N-M" (for educational), or egeneral instruction is a network twork), "N-M" (for educational), or egeneral instruction is a network two must compare in the station is a network two must compare in the station is a network two must compare in the station is a network two must compare the station is a network to must compare the s	e Special Statemer both on a substitus, see page (v) of program services r-the-air designation of the television station of the television shocated in the stant"), enter "Yes ons located in the plete column 5, storated the television of the television of the television of the television of the plete column 5, storated the television of the primary of the television of the tel	te basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example in for broadcasting over-the-air in may be different from the channel endent station, or a noncommercial st), "I" (for independent), "I-M" intercial educational multicast). If not, enter "No". For an expaper SA3 form.  "". If not, enter "No". For an expaper SA3 form. atting the basis on which your ring "LAC" if your cable system apacity. Payment because it is the subject term or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.	
	-	CHANN	EL LINE-UP	AJ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					0.4075		
LEGAL NAME OF OWN					SYSTEM ID#		Name
MASSILLON CA	ABLE TV INC	;				7819	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space of carried by your cable so FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Substitute Basis Subsis under specific FC Do not list the station station was carried to 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 4: If the staplanation of local service Column 5: If you had cable system carried the distant statisfor the retransmiss of a written agreement the cable system and attion "E" (exempt). For sexplanation of these the Column 6: Give the	G, identify every ystem during the ons in effect on .61(e)(2) and (4 sis, as explained stations: With r CC rules, regular here in space only on a substand also in spatformation concerm.  In station's call associated with -2". Simulcast sis e channel numbers the cast, "E" (for no see terms, see pation is outside ce area, see pation is outside con on a part-timion of a distant entered into or a primary transr simulcasts, also aree categories, e location of each	television state accounting June 24, 198 Jun	period, except (i.1, permitting the eferring to 76.61 aragraph. distant stations orizations: it in space I (the tion was carried atte basis stations ording to its overbe reported in column as assigned to the tion is a network twork), "N-M" (for educational), or egeneral instruction is a network twork), as a network two in the tion is a network two in the tion is a network to eneral instruction is a network to eneral instruction is a network of lack of accounting period and that is not such as a network of lack of accounting period and that is not such as a network of the general instruction of the general instruction of the general instruction of the general instruction.	1) stations carried a carriage of certai (e)(2) and (4))]; and carried by your carried by your carried by statement both on a substitute, see page (v) of program services r-the-air designation of the television station of the television of the televi	". If not, enter "No". For an expaper SA3 form. ating the basis on which your ring "LAC" if your cable system apacity. Designating the because it is the subject ern or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.		G Primary Transmitters: Television
<b>Note:</b> If you are utilizin				•	which the station is identifed. hannel line-up.		
	3b.:		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		
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FORW SASE, FAGE 3.					CVCTEMI	24
MASSILLON CA		_			SYSTEM II 78'	Name
PRIMARY TRANSMITTE	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 country in effect or 6.61(e)(2) and (4 sis, as explaine	ne accounting n June 24, 198 4), or 76.63 (re d in the next p	period, except ( 1, permitting the eferring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections id (2) certain stations carried on a	Primary Transmitters:
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Note: If you are utilizing	ig mulupie char	•	•		nannei iine-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.					1
LEGAL NAME OF OWNER OF CA				SYSTEM ID# 7819	Name
PRIMARY TRANSMITTERS: TEL					
In General: In space G, identificarried by your cable system of FCC rules and regulations in e 76.59(d)(2) and (4), 76.61(e)(2 substitute program basis, as expressions of the state of the	fy every television st luring the accounting ffect on June 24, 19 2) and (4), or 76.63 (i xplained in the next	p period, except ( 81, permitting the referring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; ar	nd (2) certain stations carried on a	<b>G</b> Primary  Transmitters:
Substitute Basis Stations basis under specifc FCC rules, • Do not list the station here in station was carried only on • List the station here, and also basis. For further informatio in the paper SA3 form. Column 1: List each statior each multicast stream associa cast stream as "WETA-2". Sim WETA-simulcast). Column 2: Give the channe its community of license. For e on which your cable system ca Column 3: Indicate in each educational station, by entering (for independent multicast), "E For the meaning of these term Column 4: If the station is o planation of local service area, Column 5: If you have ente cable system carried the distan carried the distant station on a For the retransmission of a of a written agreement entered the cable system and a primar tion "E" (exempt). For simulcas explanation of these three cate	With respect to any, regulations, or auth space G—but do lis a substitute basis. In space I, if the state on concerning substitute on concerning substitute with a station activated with a station. In case whether the station activated the station. In case whether the station activated with a station with a station during the part-time basis becaused with a station during the part-time basis becaused with a station or or before July transmitter or an austs, also enter "E". If the activation is stations, if any, given a stations, if any, given as the substitute of the stations, if any, given as the substitute of the stations, if any, given as the substitute of the substitute of the substitute of the stations.	y distant stations orizations: t it in space I (the ation was carried tute basis station report origination cording to its over t be reported in comment of the ansa assigned to the annel 4 in Washistation is a networn etwork), "N-M" (for I educational), or e general instructive area, (i.e. "digeneral instructive area, (i.e. "digeneral instruction of lack of accounting periodause of lack of access that is not supposed to the general instruction of the general instruction of the general instruction of the general instruction. The stations of the general instruction of the general instruction of the general instruction of the general instruction.	both on a substitus, see page (v) of program services er-the-air designation of the television station of the television of the television station of the television of television of the television of the television of the television o	such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel of the station, or a noncommercial set), "I" (for independent), "I-M" of namercial educational multicast). The paper SA3 form.  See "I foot, enter "No". For an expaper SA3 form.  Seating the basis on which your sering "LAC" if your cable system apacity. The payment because it is the subject eem or an association representing to transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.  In the paper SA3 form.  It in the paper SA3 form.	Television
Note. If you are utilizing multip		•		manner inte-up.	<u> </u> 
		4. DISTANT? (Yes or No)	AM  5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E, PAGE 3.					0.40=======	Г
MASSILLON CA					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on .61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 I), or 76.63 (re d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	1) stations carried carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections d (2) certain stations carried on a ble system on a substitute program	G Primary Transmitters: Television
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 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 sexplanation of these th Column 6: Give the	cc rules, regula here in space only on a substand also in spa formation concurr.  In station's call associated with -2". Simulcast sechannel numbers, regular carried the in each case we entering the letter on on a part-tinion of a distant entered into or a primary transfer includes a categories, elocation of each categories, elocation of each canadian station canadian canadian station canadian station canadian station canadian canadian station canadian c	tions, or author G—but do list itute basis. ce I, if the staterning substitution in a station according to the station according to the station. The station is the station in commercial page (v) of the station in commercial page (v) of the station in during the ame basis becamen the station or before Junitter or an assister "E". If y see page (v) ch station. For its in any, given it is a station.	orizations: it in space I (the tion was carried ute basis station: eport origination cording to its ove be reported in co as assigned to th annel 4 in Washin etwork), "N-M" (for educational), or e general instruction accounting period cuse of lack of accounting period cuse of l	e Special Statemer both on a substitus, see page (v) of program services r-the-air designation of the television station of the television shocated in the stant"), enter "Yes ons located in the plete column 5, storated the television of the television of the plete column 5, storated the television of the plete column 5, storated the television of the primary hannel on any othest the television of the television	te basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example in for broadcasting over-the-air in may be different from the channel endent station, or a noncommercial st), "I" (for independent), "I-M" intercial educational multicast). It paper SA3 form.  "If not, enter "No". For an exapper SA3 form. atting the basis on which your ring "LAC" if your cable system apacity. Dealer the designation of the paper SA3 form.  The paper SA3 form. The subject error and association representing transmitter, enter the designation that is the subject in the paper SA3 form. The p	
		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.					2)/2======	1
MASSILLON CA					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on .61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 1), or 76.63 (red in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	1) stations carried carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections id (2) certain stations carried on a ble system on a substitute program	G Primary Transmitters: Television
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 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 sexplanation of these th Column 6: Give the	C rules, regula here in space only on a substand also in spa formation concurr.  In station's call associated with -2". Simulcast sechannel numbers of the second of the s	tions, or author G—but do list itute basis. ce I, if the staterning substitute basis. The state is itute basis being. Do not rear a station accept a station accept a station. Whether the stater "N" (for near a station accept (v) of the station accept (v) of the station are basis because it in column and unities the accept and the station are basis because it in a station. For an assistent are the station. For an assistent in a station. For ansign it is any, given any, given any, given and the station. For any, given any, given and the station. For any, given and the station are station.	orizations: it in space I (the tion was carried ute basis station: eport origination cording to its ove be reported in co as assigned to th annel 4 in Washin etwork), "N-M" (for educational), or e general instruction accounting period cuse of lack of accounting period cuse of l	e Special Statemer both on a substitus, see page (v) of program services r-the-air designation of the television station of the television shocated in the stant"), enter "Yes ons located in the plete column 5, storated the television of the television of the plete column 5, storated the television of the plete column 5, storated the television of the primary hannel on any othest the television of the television	the basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example in for broadcasting over-the-air in may be different from the channel sendent station, or a noncommercial st), "I" (for independent), "I-M" inmercial educational multicast). If not, enter "No". For an expaper SA3 form. If not, enter "No" is paper SA3 form. It is the subject error an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.	
		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.					OVOTEMIN	и	
MASSILLON CA					SYSTEM ID: 7819	Name	
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 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 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 ste 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 of only on a substrand also in space formation concern.  associated with associated with -2". Simulcast see channel numbers are channel numbers from the set of the second seed on a part-time on of a part-time on of a part-time on	tions, or author G—but do list itute basis. ce I, if the staterning substitution in the state of the station acceptate as a station acceptate as a station acceptate as a station. The station is the station in column and the station acceptate of the local servinge (v) of the station and uning the station in during the station and uniticast streetor before Junitter or an asset enter "E". If y see page (v) ch station. For its if any, given it is any, given it is any given it i	orizations: it in space I (the tion was carried ute basis stations eport origination fording to its over the property of the p	e Special Statemer both on a substitus, see page (v) of program services r-the-air designation olumn 1 (list each me television station of the station, an indeport network multicas "E-M" (for noncontions located in the stant"), enter "Yes ons located in the plete column 5, st d. Indicate by ente stivated channel caubject to a royalty lyween a cable system on any othestructions located at the community of the community with very services.	te basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example in for broadcasting over-the-air in may be different from the channel endent station, or a noncommercial st), "I" (for independent), "I-M" inmercial educational multicast). If not, enter "No". For an expaper SA3 form.  "If not, enter "No". For an expaper SA3 form. If not, enter "No" is the basis on which your ring "LAC" if your cable system apacity. Deayment because it is the subject term or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.	Television	
		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 OWNER OF CABLE SYSTEM:					SYSTEM ID#	Name
MASSILLON CA	ABLE TV INC	<u> </u>			7819	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable is FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Basis S basis under specifs C Do not list the station station was carried List the station here, 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 st planation of local servi Column 5: If you have cable system carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	system during the consine effect or 6.61(e)(2) and (4 sis, as explained stations: With recording the conty on a substant also in spanformation concurm.  The station's call associated with considering the legal of the conty of	ne accounting a June 24, 198 41, or 76.63 (red in the next p espect to any tions, or author G—but do list itute basis. ce I, if the staterning substitute sign. Do not red a station according streams must be referenced by the folial station. Whether the stater "N" (for near the FCC has be station. Whether the stater "N" (for near the local servinge (v) of the gream to commercial basis because the forbid station. The station or before Jurmitter or an as to enter "E". If y see page (v) ch station. For	period, except (11, permitting the eferring to 76.61) aragraph. distant stations orizations: it in space I (the tion was carried ate basis stations ording to its overbe reported in compart or as assigned to the tion is a network twork), "N-M" (for educational), or a general instruction of lack of accounting period at the tion is a network twork), and the tion is a network two the tion is a network the tion is a network two the tion is a netwo	1) stations carried a carriage of certain (e)(2) and (4))]; and carried by your carried statement both on a substitute, see page (v) of program services r-the-air designation of the television station of the television station. The program of the television of the television of the television of the television of the program of the television of the program of the television of the televisio	". If not, enter "No". For an ex- paper SA3 form. ating the basis on which your ring "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ig multiple chan	nel line-ups, ι	ise a separate s	pace G for each c	hannel line-up.	
		CHANN	EL LINE-UP	AQ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

				0)/07514 ID#	T
					Name
ABLE IV INC	<i>-</i>			7819	
ystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With record only on a substand also in spatements of the control of the contro	ne accounting a June 24, 1984, or 76.63 (red in the next pespect to any titions, or author G—but do list citute basis. In the state erning substitute sign. Do not red a station acceptance whether the FCC has a station. In the station acceptance whether the state "N" (for near the following (v) of the station and uring the ame basis becamulticast streen or before June mitter or an aspect of the station. For the station in the station of the station or before June mitter or an aspect of the station. For the station is the station of the station of the station. For the station is the station of the station of the station of the station. For the station is the station in the station of the station of the station of the station of the station is the station of the s	period, except (B1, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its over be reported in cording to its over be reported in cording to its over the tion was assigned to the tion of the distance of the general instruction of the general instruction of lack of accounting perioduse of lack of accounting p	1) stations carried a carriage of certain (e)(2) and (4))]; are carried by your case. Special Statement both on a substitute, see page (v) of program services are the air designation of the color of the carried both on a substitute, see page (v) of program services are the air designation of the carried both on a substitute, see page (v) of program services are the air designation of the television station of the television station of the television station of the television station. The television station of the television station of the television station of the television of the	only on a part-time basis under in network programs [sections and (2) certain stations carried on a substitute program that and Program Log)—if the stee basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel defined that station, or a noncommercial st), "I" (for independent), "I-M" inmercial educational multicast). The paper SA3 form.  The paper SA3 form.  The paper SA3 form is the subject em or an association representing to transmitter, enter the designation the paper SA3 form.  The paper SA3 form.  The paper SA3 form is the subject em or an association representing to transmitter, enter the designation the paper SA3 form.  The paper SA3 form is the subject em or an association representing to transmitter, enter the designation that is the subject em or an association representing to the paper SA3 form.  The paper SA3 form is the subject em or an association representing to the paper SA3 form.  The paper SA3 form is the subject em or an association representing to the paper SA3 form.  The paper SA3 form is the subject em or an association representing to the paper SA3 form.  The paper SA3 form is the subject em or an association representing to the paper SA3 form.  The paper SA3 form is the subject em or an association representing to the paper SA3 form.	Primary Transmitters: Television
g multiple chan				namer ime-up.	•
1	CHANN	EL LINE-UP	AR		
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	ABLE TV INC  ERS: TELEVISIO G, identify every system during the consin effect or G.61(e)(2) and (a sis, as explaine Stations: With r CC rules, regula a here in space only on a subst and also in spa afformation conc arm. The station's call associated with	system during the accounting ions in effect on June 24, 198 (6.61(e)(2) and (4), or 76.63 (resis, as explained in the next postations: With respect to any CC rules, regulations, or author here in space G—but do list only on a substitute basis, and also in space I, if the standard formation concerning substiture. The station's call sign. Do not reasonable the station accounty of the station accounty. Simulcast streams must be channel number the FCC hase. For example, WRC is Charles and accounty in the station. It is each case whether the station accounty in the station is outside the local service area, see page (v) of the station is outside the local service area, see page (v) of the station is outside the local service area, see page (v) of the station of a distant multicast streams are the distant station during the action of a distant multicast stream entered into on or before Juna primary transmitter or an assimulcasts, also enter "E". If you can a station, side of the station of each station. For canadian stations, if any, give grow multiple channel line-ups, to CHANNEL  2. B'CAST  CHANNEL  3. TYPE  CHANNEL  OF	ABLE TV INC  ERS: TELEVISION  G, identify every television station (including to system during the accounting period, except (cons in effect on June 24, 1981, permitting the deficiency) and (4), or 76.63 (referring to 76.61 sis, as explained in the next paragraph.  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In ere in space I, if the station was carried both on a substitute formation concerning substitute basis stations, see page (v) of firm.  In station's call sign. Do not report origination program services associated with a station according to its over-the-air designation.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station.  In each case whether the station is a network station, an independent carried the station is outside the local service area, (i.e. "distant"), enter "Yestor entering the letter "N" (for network), "N-M" (for network multicates), "E" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for noncommercial educational), or "E-M" (for network), "N-M" (for network), "	ABLE TV INC  RES: TELEVISION G. identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under tooms in effect on June 24, 1981, permitting the carriage of certain network programs (sections 6.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph. Stations: With respect to any distant stations carried by your cable system on a substitute program CC rules, regulations, or authorizations:  In here in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located rm.  In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-v-2". Simulcast streams must be reported in column 1 (list each stream separately; for example a channel number the FCC has assigned to the television station for broadcasting over-the-air in se. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station.  In each case whether the station is a network station, an independent station, or a noncommercial entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "1-M" (sast), "" (for independent), "1-M" (for network), "N-M" (for network multicast), "" (for independent), "1-M" (sast), "" (for independent), "1-M" (see page (v)) of the general instructions located in the paper SA3 form. attoin is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an exce area, see page (v) of the general instructions located in the paper SA3 form. are di

FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWNE  MASSILLON CA					SYSTEM ID# 7819	Name
PRIMARY TRANSMITTER	RS: TELEVISIO	N				
carried by your cable sy FCC rules and regulatio 76.59(d)(2) and (4), 76.6 substitute program basis	stem during the ns in effect on 31(e)(2) and (4 s, as explained	ne accounting June 24, 198 I), or 76.63 (re d in the next p	period, except ( 1, permitting the eferring to 76.61 earagraph.	1) stations carried carriage of certain (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections d (2) certain stations carried on a	<b>G</b> Primary  Transmitters:
basis under specifc FCC  Do not list the station in station was carried on List the station here, at basis. For further information in the paper SA3 formation for Column 1: List each each multicast stream a cast stream as "WETA-2" (WETA-simulcast). Column 2: Give the list community of license on which your cable system carried the distant station, by column 3: Indicate in educational station, by column 4: If the stat planation of local service Column 5: If you have cable system carried the carried the distant station For the retransmission of a written agreement of the cable system and a tion "E" (exempt). For sin explanation of these three Column 6: Give the FCC. For Mexican or Carried on the carried the cable system and a column 6: Give the FCC.	C rules, regular nere in space of nly on a substand also in space of nly on a substand also in space of nly on a substand also in space of nly on a station's call substand also in space of nly on a partition of a distant station of each cast, also be categories, location of each anadian station of a substand station of each cast, also be categories, location of each anadian station numbers of each cast of no each cast of nly of a distant station of each cast of nly of a distant station of each cast of nly of nly of a distant station of each cast of nly of	tions, or author G—but do list itute basis. ce I, if the star erning substitute it a station acceptation of the station acceptation of the station acceptation. The station acceptation is a station acceptation of the station acceptation of the station. The station acceptation is a station acceptation of the station of the station. For an as a senter "E". If years a senter "E". If years a senter "E". If years a station. For any, given any, given any, given any, given any, given and the station of the station. For any, given and the station of the station of the station of the station of the station.	prizations: it in space I (the tion was carried ute basis station: eport origination profing to its over the tion of t	e Special Statemer both on a substitus, see page (v) of program services r-the-air designation of the television station of the television shocated in the stant"), enter "Yes ons located in the plete column 5, storated the television of the television of the plete column 5, storated the television of the plete column 5, storated the television of the primary hannel on any othestructions located storated of the community of the community with very services.	". If not, enter "No". For an expaper SA3 form. ating the basis on which your ring "LAC" if your cable system apacity. coayment because it is the subject ern or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. To which the station is licensed by the which the station is identifed.	Television
Note: If you are utilizing	multiple chan	. ,	•		nannei iine-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	CHANN 3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	IED OE CARI E SV	STEM:			SYSTEMI	D#
MASSILLON CA		_			78	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis is basis under specific FC in Do not list the station station was carried in the station here, basis. For further in the paper SA3 for Column 1: List each each multicast stream	G, identify every eystem during the ons in effect or i.61(e)(2) and (4) isis, as explained tations: With record record only on a substand also in spaformation concrm.  h station's call associated with	r television stane accounting I June 24, 198 4), or 76.63 (nd in the next espect to any tions, or authoractions, authoractic sign.	period, except ( 81, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its ove	1) stations carried a carriage of certai (e)(2) and (4))]; and carried by your case Special Statement both on a substitus, see page (v) of program services or the air designation	and low power television stations) only on a part-time basis under in network programs [sections id (2) certain stations carried on a ble system on a substitute program int and Program Log)—if the te basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example	G Primary Transmitters: Television
its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multion For the meaning of the Column 4: If the st planation of local service Column 5: If you have cable system carried the distant state For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the	se. For example stem carried the in each case we entering the le cast), "E" (for no ise terms, see pation is outside ce area, see paure entered "Year e distant statication on a part-tirion of a distant entered into or a primary transsismulcasts, also aree categories, e location of each canadian station canadian station canadian station of each canadian station categories, e location of each canadian station case we see the categories, e location of each canadian station case we recommend the categories, e location of each canadian station case we can canadian station case we can case which is each case which is ea	e, WRC is Chare e station.  whether the statter "N" (for near commercial page (v) of the state of the local servinge (v) of the servinge (v) of the servinge in column on during the amount of the local servinge of the state of	ation is a network twork), "N-M" (for educational), or educational), or educational), or educational instructional	ngton, D.C. This make station, an independent multicase "E-M" (for noncontions located in the istant"), enter "Yesons located in the public column 5, std. Indicate by entectivated channel caubject to a royalty lewen a cable systemating the primary channel on any other structions located st the community with a pace G for each community with a c	". If not, enter "No". For an expaper SA3 form. ating the basis on which your ring "LAC" if your cable system apacity. Designation of the system of an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. To which the station is licensed by the which the station is identifed.	
	T	CHANN	EL LINE-UP	AI		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						1			
LEGAL NAME OF OWNER  MASSILLON CAB					SYSTEM ID# 7819	Name			
PRIMARY TRANSMITTERS									
carried by your cable syst FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis,	tem during the s in effect on l(e)(2) and (4 as explained	ne accounting June 24, 198 1), or 76.63 (re d in the next p	period, except ( 1, permitting the eferring to 76.61 earagraph.	1) stations carried e carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections d (2) certain stations carried on a	<b>G</b> Primary  Transmitters:			
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 multicast). "E" (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 ca									
Note. If you are utilizing if	nulliple chan	• •	•		namer ime-up.	1			
explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the									

FORW SASE, FAGE 3.					CVCTEM IS	<b>.</b> 4
MASSILLON CA		_			SYSTEM ID 781	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on 61(e)(2) and (4 sis, as explained	ne accounting I June 24, 198 4), or 76.63 (red In the next p	period, except ( 1, permitting the eferring to 76.61 aragraph.	1) stations carried carriage of certal (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections id (2) certain stations carried on a	Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and at tion "E" (exempt). For explanation of these th Column 6: Give the FCC. For Mexican or C	CC rules, regular here in space only on a substrand also in spatformation concorm.  In station's call associated with associated with associated with a carried the in each case where the cast), "E" (for not see terms, see pation is outside ce area, see pation is outside ce area, see pation on a part-tirion of a distant entered into or a primary transr simulcasts, also aree categories, e location of each canadian station canadian station canadian station of each canadian station of each canadian station of each canadian station of each canadian station of substraint entered into or a primary transr simulcasts, also aree categories, e location of each canadian station on substraint entered into or a primary transr simulcasts, also aree categories, e location of each canadian station on substraint entered into or a primary transr simulcasts, also aree categories, e location of each canadian station on the canadian station of each canadian station of each canadian station of each canadian station on the canadian station of each canadi	tions, or author G—but do list itute basis. ce I, if the star erning substitute basis. The star erning substitute basis being a station accept a station accept a station. The station accept basis because the FCC has a station. The station accept basis because the station and uning the station are basis because the station are basis because the station are stationary and unitter or an associated as a senter "E". If you see page (v) ch station. For not, if any, give	orizations: it in space I (the tion was carried ute basis stations eport origination ording to its over the tion was assigned to the tion is a network twork), "N-M" (for educational), or egeneral instruction is a network twork), as general instruction is a network to the general instruction is a network to the general instruction is a network two the second in the tion is an expectation of lack of acts and that is not support to the general in the second in the general in the name of the general in the name of the general in the name of the general in the second in the general in the name of the general in the time in the second in the general in the name of the general in the name of the general in the second in the general in the name of the general in the second in the general in the name of the general in the second in the	special Statemer both on a substitus, see page (v) of program services r-the-air designation of the television station of the television shocated in the stant"), enter "Yes ons located in the stant"), enter "Yes ons located in the plete column 5, stationated to a royalty leven a cable system of the television of the television of the television of the primary thannel on any othest the community of the community with the community with the community of the structions located station of the television	r. If not, enter "No". For an expaper SA3 form.  cating the basis on which your using "LAC" if your cable system apacity.  payment because it is the subject erm or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.  to which the station is licensed by the which the station is identifed.	Television
Note: If you are utilizing	g mulupie chan		•		nannei iine-up.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	_

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN  MASSILLON CA					SYSTEM ID 781	Name		
PRIMARY TRANSMITTE					701			
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 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 colu								
		CHANN	EL LINE-UP	AW		1		
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. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name MASSILLON CABLE TV INC 7819 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM LOCATION OF STATION CALL SIGN LOCATION OF STATION S/D AM or FM S/D **WQKT** FΜ **WOOSTER OH** 

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2022/2		
LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#			
MASSILLON CABLE T	V INC					7819	Name		
SUBSTITUTE CARRIAGE							ı		
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe	riod, under spec	cific present and former FCC	rules, regula	tions, or authorizations.	For a further	Substitute		
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?									
Note: If your answer is "No"	, leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	st complete the progra	m	Program Log		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please a of every noi distant stati gulations, o tion. Do no ucy" or "NB n was broad sign of the s idcast static adian statio th and day re "5/7." es when the Example: a er "R" if the ind regulatic ogramming	am on a separate attach additional network televition and that your authorizations to use general cost Basketball: deast live, enterstation broadca on's location (the one, if any, the cowhen your system program carried listed program ons in effect du	al pages. Ision program (substitute program (substitute program cable system substituted solves. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." "Yes." Otherwise enter "Nasting the substitute program are community to which the solves community with which the solves carried the substitute program was carried by your community with which the solves carried by a system from 6:01:1 was substituted for program in the accounting period;	rogram) that, I for the program instruction "basketball".  o."  n. station is licer tation is iden rogram. Use able system.  5 p.m. to 6:2  mming that ye enter the let	during the accounting ramming of another stans located in the paper List specific program need by the FCC or, in tified). numerals, with the more List the times accurate 8:30 p.m. should be our system was require ter "P" if the listed pro	ntion nth			
9	I IRSTITI IT	E PROGRAM			EN SUBSTITUTE IAGE OCCURRED	7. REASON			
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION			
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**ACCOUNTING PERIOD: 2022/2** FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 7819 MASSILLON CABLE TV INC **PART-TIME CARRIAGE LOG** In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-

## J

#### Part-Time Carriage Log

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
- 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 CARRIAGE OCCURRED				CALL SIGN	WHEN	WHEN CARRIAGE OCCURRED			
	DATE	HOUF FROM	RS TO			DATE	HOUF FROM	RS TO		
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LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome				
MASSILLON CABLE TV INC	7819	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 lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the baservice of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 19	sic de sub-	P Special Statement Concerning				
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.						
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmiss made by satellite carriers to satellite dish owners?	sions					
X NO						
YES. Enter the total here and list the satellite carrier(s) below						
Name Mailing Address Mailing Address						
INTEREST ASSESSMENTS						
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpay For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ment.	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	-					
×	days					
Line 3 Multiply line 2 by the number of days late and enter the sum here	′					
× 0.002	74					
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,						
space L, (page 7)	-					
(interest ch						
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistance properties the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	Diease					
** 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 of filing.	iginal					
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 sufficiency of the fling, a determination that would be made by a court of law.

GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary (as identified in space E) during the accounting period. For a further explanation of how to compare		SYSTEM ID# 7819	Mama
(as identified in space E) during the accounting period. For a further explanation of how to compu page (vii) of the general instructions.	y transmissi	ion service	K Gross Receipts
Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amount o	2,269,927.50 of gross receipts)	
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  Complete block 1, showing your minimum fee.  Complete block 2, showing whether your system carried any distant television stations.  If your system did not carry any distant television stations, leave block 3 blank. Enter the amount fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  If your system did carry any distant television stations, you must complete the applicable parts of accompanying this form and attach the schedule to your statement of account.			L Copyright Royalty Fee
▶ If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be enter block 3 below.	ered on line	: 1 of	
▶ If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entere 3 below.	ed on line 2	in block	
▶ If part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be 2 in block 4 below.	e entered o	n line	
Block  MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are r least the minimum fee, regardless of whether they carried any distant stations. This fee is 1. system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K			
Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.		2,200,021.00	
This is your minimum fee.		24,152.03	
	you must cl	heck	
"Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  — Yes—Complete the DSE schedule.  Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE			
"Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.  Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$	olock 4.	
"Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.  Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero  Line 3. Add lines 1 and 2 and enter here  Block  Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger  Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7	\$	0.00 - 24,152.03	submitting
"Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.  Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero  Line 3. Add lines 1 and 2 and enter  Block  Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$	0.00 -	submitting additional deposits under Section 111(d)(7
"Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.  X No—Leave block 3 below blank and complete the 1.  BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero  Line 3. Add lines 1 and 2 and enter here  Block 4  Block 4  Block 4  Block 5  Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger  Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.  Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9	\$	- 0.00 24,152.03	additional deposits under Section 111(d)(7 should contact the Licensing additional fees Division for the
"Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.  Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero  Line 3. Add lines 1 and 2 and enter here  Block  Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger  Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.  Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet).	\$	- 0.00 - 24,152.03 0.00	submitting additional deposits under Section 111(d)(7 should contact the Licensing additional fees

ACCOUNTING PERIOD: 2022/2
FORM SA3E PAGE 8

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC	SYSTEM ID# 7819							
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.								
Chamers	Enter the total number of channels on which the cable     system carried television broadcast stations	9							
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	94							
N Individual to									
Be Contacted for Further Information	Name KATHERINE GESSNER Telephone 330	-833-5509							
	Address 814 CABLE CT NW PO BOX 1000 (Number, street, rural route, apartment, or suite number)								
	MASSILLON OH 44648-1000 (City, town, state, zip)								
	Email Fax (optional)								
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations	.)							
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 identified in line 1 of space B; or								
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or	n as identified							
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of in line 1 of space B.	the cable system							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here 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)]	iin							
	X /S/ KATHERINE GESSNER								
	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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility								
	Typed or printed name: KATHERINE GESSNER								
	Title: PRESIDENT  (Title of official position held in corporation or partnership)								
	Date: February 22, 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.

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:

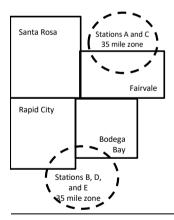
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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.



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 %6 384.00

		ψ0,0000			
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)

DSE SCHEDULE. PAGE	11. (CONTINUED)										
4	LEGAL NAME OF OWNER OF CABLE	S'	SYSTEM ID#								
ı	MASSILLON CABLE TV	INC				7819					
	SUM OF DSEs OF CATEGOR	Y "O" STATION	IS:								
	Add the DSEs of each station										
	Enter the sum here and in line	0.00									
	-	<u> </u>		J							
2	Instructions: In the column headed "Call S	ian": list the cal	I ciane of all dictant ctations i	identified by the	a letter "∩" in column 5						
	of space G (page 3).	ngii . not the car	i signis or all distant stations i	deriance by the	Cictici O ili coldilili o						
Computation	In the column headed "DSE"			as "1.0"; for ea	ach network or noncom-						
	mercial educational station, giv	e the DSE as ".2									
Category "O"			CATEGORY "O" STATION	IS: DSEs	s						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as						······					
necessary.						<b></b>					
Remember to copy all											
formula into new											
rows.											
				<u>                                     </u>							
						······					
				·		<b></b>					
				<b> </b>		<b> </b>					
				<b></b>		L					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC						S	7819
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.							
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs							
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	E
			÷		=	x	=	
			÷			x x	=	
			÷		=	x	=	
							= =	
						x		
			÷	•		x	=	
	SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule,							
Computation of DSEs for Substitute-Basis Stations	Instructions:  Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station:  • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and  • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.  Column 3: Enter the number of days in the calendar year: 365, except in a leap year.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).							
			JBSTITUTE-	BASIS STATION		ATION OF DSEs	т	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAR	S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		4		=		÷		=
			+	=		÷		=
		4	-	=		÷		=
				=		÷		=
	SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule,							
5	<b>TOTAL NUMBER OF DSEs:</b> Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system.							
Total Number	1. Number of DSEs from part 2 ● ▶							
of DSEs	2. Number of DSEs from part 3 ● ▶ 0.00							
	3. Number of DSEs from part 4 ● ▶ <b>0.00</b>							
	TOTAL NUMBER OF DSEs							0.00

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

LEGAL NAME OF O		SYSTEM:					S	YSTEM ID# 7819	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	ule blank and	complete part	8, (page 16) of the		6	
			BLOCK A: 7	TELEVISION MA	ARKETS				Computation of 3.75 Fee	
effect on June 24, Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAII			C rules and regula	tions in	3.75 Fee	
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es				
Column 1: CALL SIGN Column 2:	FCC rules and re instructions for th Satellite Television	egulations pric le DSE Sched on Extension	or to June 25, 1 dule. (Note: The and Localism A	981. For further ex e letter M below ref	planation of p fers to an exe	permitted station mpt multicast s	m was permitted to ons, see the stream as set forth			
BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherec instructions fo E Carried pursus *F A station pre	ales and reguled pursuant to on as defined al educational distation (76.6 or DSE schedunt to individuationsly carried). The station will be st	ations cited being the FCC marking for the FCC marking for the following for the formatten for the for	ow pertain to those set quota rules [76.5.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subsectorules (76.7) e or substitute basiontour, [76.59(d)(5)	e in effect on a .57, 76.59(b), .67, 76.63(a) .63(a) referring stitution of grads prior to June	June 24, 1981. 76.61(b)(c), 70 referring to 76 to 76.61(d)] andfathered state 25, 1981	6.63(a) referring to	I		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			rksheet on page 14	4 of		
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE		
							-			
<u></u>	•		···		•	<u> </u>		<u> </u>		
								0.00		
		E	BLOCK C: CC	MPUTATION OF	F 3.75 FEE					
Line 1: Enter the	total number of	ا DSEs from	part 5 of this s	schedule				-		
Line 2: Enter the	sum of permitte	d DSEs fron	n block B abo	ve						
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate.  (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule)  0.00										
Line 4: Enter gross receipts from space K (page 7)										
Line 5: Multiply li	ne 4 by 0.0375 a	and enter su	m here				X X		partially permited/ partially nonpermitted	
Line 6: Enter tota	al number of DSE	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.	
Line 7: Multiply li	ne 6 by line 5 an	nd enter here	e and on line 2	2, block 3, space	L (page 7)			0.00		

	OWNER OF CABLES  CABLE TV INC	SYSTEM:					S'	YSTEM ID# 7819	Name
		BLOCK	A: TELEVI	SION MARKETS	S (CONTINU	JED)			_
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
	<del>!</del>	ļ	L.	+	<u> </u>	<u> </u>	<u> </u>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MASSILLON CABLE TV INC 7819 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 Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). 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. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the **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? X Yes—Complete blocks B and C . No—Proceed to part 8 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

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC	7819	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	2,269,927.50	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 3a	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 3b blank. NOTE: If the DSI 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		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  Yes—Complete part 9 of this schedule.  X No—Complete the 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 DSI 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		ME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC	5YSTEM ID# 7819
		INDOILEON VADLE IV IIIV	,019
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	
Syndicated 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 blood In blood In blood If you blank. What is	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. s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did yo	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule.  X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	50_
	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.)	.00
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts  (the amount in section 1)	
		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)	<del></del>
		Base Rate Fee	-     

DSE SCH	IEDU	ILE. PAGE 17.				ACCOUNTING	G PERIOD: 2022/2
		OF OWNER OF CABLE SYSTEM: ON CABLE TV INC				SYSTEM ID# 7819	Name
Section 4	If the	e figure in section 2 is more than 4.000, compute your base r	rate fee here	and leave section 3 blan	k.		_
4	A.	Enter 0.01064 of gross receipts (the amount in section 1)		▶\$			8
	В.	Enter 0.00701 of gross receipts (the amount in section 1)	<u> </u>				Computation of Base Rate Fee
	C.	Multiply line B by 3.000 and enter here		<u>►</u> \$			base Rate Fee
	D.	Enter 0.00330 of gross receipts (the amount in section 1)	<b>\$</b>				
	E.	Subtract 4.000 from total DSEs (the figure in section 2) and enter here	<b>&gt;</b>				
	F.	Multiply line D by line E and enter here		)	<b>\$</b>		
	G.	Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee			\$	0.00	
	be r	IT: It is no longer necessary to report television signals reported on a community-by-community basis (subscrib					9
receipts	s fror	If any of the stations you carried were partially distant m subscribers located within the station's local service you must:					Computation of Base Rate Fee
station DSEs a	or th and t	e all of your subscribers into subscriber groups, each g le same group of stations. Next: Treat each subscriber he portion of your system's gross receipts attributable t d up the separate base rate fees for each subscriber g	group as if to that grou	it were a separate cat p, and calculate a sep	ole system. Deterr arate base rate fe	nine the number of e for each group.	and Syndicated Exclusivity Surcharge
_		ny portion of your cable system is located within the top	•				for Partially

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.
- 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.

Distant Stations, and for Partially Permitted Stations

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 7819 **MASSILLON CABLE TV INC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE MASSILLON CABL							7819	Name
-	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	WOOST	ΓER		COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge for
						<u> </u>		Partially
						·		Distant
								Stations
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
	rou in	. 2.26			and Craun	•	0.00	
Gross Receipts First G	roup	\$ 2,269	9,927.50	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
	<u></u>							
	<u>-</u>		•••					
			•••					
	<del></del>		···					
	<del></del>		···			·		
Γotal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ц				
Base Rate Fee: Add th	e <b>base rate</b>	e fees for each subscr	iber group a	s shown in the boxes a	above.			
inter here and in block			3			\$	0.00	

<b>9</b> Computat of Base Rate and	JP			ATE FEES FOR EACH	F BASE RA	COMPLITATION		
Computat of Base Rate	JP	OLIDOODIDED ODOL		11		COMI CITATION	SLUCK A.	<u> </u>
Computat of Base Rate		SUBSCRIBER GROU	SIXTH		UP	SUBSCRIBER GRO	FIFTH	
of Base Rate	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Base Rate	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and	502	OF ILLE STOTE	BOL	O' LEE O' O' I	DOL	OFFICE STORY	BOL	CALL CICH
Syndicat								
Exclusiv								
Surchar								
for	•••••						<u> </u>	
Partiall								
Distant								
Station	•••••						<u> </u>	
"								
"			•		••••			
1								
1			1					
1								
1	0.00	1.1		Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	<u>\$</u>	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	EIGHTH		UP	SUBSCRIBER GRO	SEVENTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
_	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
<u> </u>		-						
		-						
_								
							<u></u>	
1							-	
1							-	
1							<u> </u>	
	0.00			Total DSEs	0.00			otal DSEs
	0.00	<u></u> -	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	0.00	\$	ı Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G

LEGAL NAME OF OWNE						S	7819	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	NINTH	SUBSCRIBER GROU	JP		TENTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
		<u> </u>				-		Exclusivity Surcharge
	····	<del> </del>				+		for
								Partially
								Distant
								Stations
						-		
		<u> </u>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
						-		
	····					H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ц				
Base Rate Fee: Add the Enter here and in block	ne <b>base rat</b> o 3, line 1, s	e fees for each subscr pace L (page 7)	iber group a	as shown in the boxes a	above.	\$		

MASSILLON CABI						S	7819	Name			
I	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP					
	RTEENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of			
								Base Rate Fee			
								and			
						H		Syndicated Exclusivity			
						-		Surcharge			
								for			
								Partially			
								Distant Stations			
						-		Otations			
Total DSEs			0.00	Total DSEs		11	0.00				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00				
·	·				•						
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00				
	IFTEENTH	SUBSCRIBER GROU				SUBSCRIBER GROU	JP <b>0</b>				
COMMUNITY/ AREA			0	COMMUNITY/ AREA							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Tatal DOFa			0.00	Total DOC-			0.00				
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third G	Broup	\$	0.00	Gross Receipts Four	th Group	\$	0.00				
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	above.	\$					

LEGAL NAME OF OWNE						S	7819	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
SEVE	NTEENTH	SUBSCRIBER GRO	UP	E	EIGHTEENTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	<b>9</b> 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
	<u></u>		<u> </u>					
T-1-1 DOF-			0.00	T-t-L DOF-			0.00	
Total DSEs	roun	<u> </u>	0.00	Total DSEs Gross Receipts Sec	and Croup	•	0.00	
Gross Receipts First G	oroup	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	INTEENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP <b>0</b>	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	···		<u> </u>					
Total DSEs		<u> </u>	0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				·,-				
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE						S	7819	Name
				ATE FEES FOR EAC				
TWEI	NTY-FIRST	SUBSCRIBER GRO	UP <b>0</b>	COMMUNITY/ AREA		SUBSCRIBER GROU	JP <b>0</b>	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ILE OIGIV	DOL	O/ILL OIGIV	DOL	OALE GIGIT	DOL	O'TEE GIGIT	DOL	Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
	····		<u></u>			-		Distant
								Stations
Total DSEs			0.00	Total DSEs		III	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
TWEN COMMUNITY/ AREA	NTY-THIRD	SUBSCRIBER GRO	UP <b>0</b>	TWEN		SUBSCRIBER GROU	JP <b>0</b>	
COMMONIT IT AREA				COMMONT IT AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Н				
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE MASSILLON CABL						S	7819	Name			
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP					
	ITY-FIFTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of			
								Base Rate Fee			
								and			
						-		Syndicated Exclusivity			
	<u></u>							Surcharge			
								for			
								Partially			
	<u></u>							Distant Stations			
					•••••			Otations			
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00				
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00				
	SEVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU					
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
						-					
Total DSEs	1		0.00	Total DSEs		П	0.00				
Gross Receipts Third G	Froup	<u> </u>	0.00	Gross Receipts Four	th Group	<b>\$</b>	0.00				
- 1.350 . (353)p. 6 . mid 6		·			<b>.</b>	*	3.00				
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00				
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	above.	\$					

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP			
	TY-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	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	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
THIR	TY-FIRST	SUBSCRIBER GROU	P	THIR	TY-SECOND	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
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 Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00		
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes a	bove.	\$			
		,							

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP			
THIR	TY-THIRD	SUBSCRIBER GRO		ii		SUBSCRIBER GROU	JP	9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
			<u></u>			-		Exclusivity Surcharge	
			···			-		for	
								Partially	
								Distant	
								Stations	
			<u></u>			-			
			<del></del>			<del> </del>			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
THIE	RTY-FIFTH	SUBSCRIBER GRO	JP	T	HIRTY-SIXTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						H			
		H	<del></del>			H			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$			
	•	,							

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP			
	SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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	
								Stations	
				-					
					·····				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
THIR	TY-NINTH	SUBSCRIBER GROU	JP		FORTIETH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				-					
				-		-			
				-					
	<u> </u>		<u> </u>						
				-					
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			iber group a	s shown in the boxes a	above.	\$			

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP			
	RTY-FIRST	SUBSCRIBER GROU		İİ		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	
				-		-		Stations	
				-					
Total DSEs			0.00	Total DSEs		11	0.00		
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	and Group	\$	0.00		
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00		
	TY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
						-			
				-					
				-					
Tatal DOEs			0.00	Total DCC-			0.00		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	Broup	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
				H.					
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	bove.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								
				TE FEES FOR EAC				
	RTY-FIFTH	SUBSCRIBER GRO		11		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
								for
								Partially
			<del> </del>					Distant Stations
								3.00.00
							-	
Total DSEs	1		0.00	Total DSEs	<b>'</b>		0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
FORTY-	SEVENTH	SUBSCRIBER GRO	UP	FOR	RTY-EIGHTH	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>			-	<u></u>	
			<u> </u>					
	···		<u></u>			-		
	···		···	-			<del> </del>	
Total DSEs	-		0.00	Total DSEs	•		0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	s shown in the boxes a	bove.	\$		

MASSILLON CAB						S	7819	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
FOF	RTY-NINTH	SUBSCRIBER GRO	UP		FIFTIETH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
						-		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Seco				
Cross resempte rimet c	почр	<u>*</u>		Cross reserve esse	ina Croup	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	FTY-FIRST	SUBSCRIBER GRO		II		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
						-		
							0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third 0	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	bove.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM:  WASSILLON CABLE TV INC  7819								
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP			
FIF	TY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	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	
	····	<u> </u>	<u> </u>						
			······································						
Total DSEs 0.00				Total DSEs		_	0.00		
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00		
	FTY-FIFTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	····		······································						
			···			<u> </u>			
			<u> </u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Dana Bata Fa A	a be	for for and	db.a	H ale and the state of					
Base Rate Fee: Add the Enter here and in block			ibei group a	as Showh in the doxes a	IDUV <del>U</del> .	\$			

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819							
[	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	SEVENTH	SUBSCRIBER GROU		Ti .		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
	···							for
								Partially
								Distant
								Stations
	···					-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIF	TY-NINTH	SUBSCRIBER GROU	JP		SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	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 G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th			iber group a	as shown in the boxes a	above.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  WASSILLON CABLE TV INC  7819								
				ATE FEES FOR EAC					
	XTY-FIRST	SUBSCRIBER GRO	UP <b>0</b>	İİ		SUBSCRIBER GROU	JP <b>0</b>	9	
COMMUNITY/ AREA				COMMUNITY/ AREA				Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for Partially	
	····		···	-				Distant	
								Stations	
	····		···						
T-4-1 D05-			0.00	T-t-LD05-			0.00		
Total DSEs 0.00				Total DSEs					
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00		
	XTY-THIRD	SUBSCRIBER GRO		11		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			····						
	<u>.</u>			-					
	····		···						
	····		···	-					
				-					
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	<u>\$</u>	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
				Н					
Base Rate Fee: Add to Enter here and in block			riber group a	as shown in the boxes a	above.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	KTY-FIFTH	SUBSCRIBER GROU		11		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
		<del> </del>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
SIXTY-	SEVENTH	SUBSCRIBER GROU	JP	Six	XTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···	<del> </del>			····			
		<del> </del>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
					-			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				••				
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-NINTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						H		Syndicated Exclusivity
	<u> </u>		···			-		Surcharge
								for
								Partially
	<u> </u>							Distant Stations
			<del></del>			H		Otations
	<u></u>							
Total DSEs		H	0.00	Total DSEs			0.00	
<del></del>			0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ITY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>			-		
						-		
	<u> </u>		···			-		
			<u></u>					
	<u> </u>		···			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	<b>«</b>	0.00	Gross Receipts Four	th Group	\$	0.00	
C.000 Roccipio Itilia C	oup	•	0.00	O O O O O O O O O O O O O O O O O O O	ar Group	*	<u> </u>	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  MASSILLON CABLE TV INC  7819								
[	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-THIRD	SUBSCRIBER GROU		ii		SUBSCRIBER GROU	JP	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
		1						Distant
								Stations
Tatal DCCa			0.00	Tatal DOEs			0.00	
				Total DSEs	nd Croun	•	0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco		\$	0.00	
	NTY-FIFTH	SUBSCRIBER GROU				SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
					····			
			ļ					
Total DSEs		Ц	0.00	Total DSEs		<del>!  </del>	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	SEVENTH	SUBSCRIBER GROU	JP	SEVE	NTY-EIGHTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
	···	<del> </del>				-		Surcharge
								for
		-						Partially
		 						Distant
						-		Stations
	···					-		
T 1 1 DOE			0.00	T + + P.O.F.			0.00	
Total DSEs 0.00				Total DSEs 0.00  Gross Receipts Second Group \$ 0.00				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sect	ona Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		<del> </del>				+		
			<u></u>					
Total DSEs	ļ	<u> </u>	0.00	Total DSEs		Ш	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
						_		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				<del></del>				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	above.	\$		

MASSILLON CABI						S	7819	Name
I	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	HTY-FIRST	SUBSCRIBER GROU		11		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
	···		···			H		Otations
	···							
Total DSEs			0.00	Total DSEs		III	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ITY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		······································			-		
	···					-		
			<u> </u>			-		
Total DSEs			0.00	Total DSEs			0.00	
	roup	•	0.00		th Croun	•	0.00	
Gross Receipts Third C	oi Oup	4	0.00	Gross Receipts Four	ит Отоир	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				••				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE						S	7819	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
EIGH	TY-FIFTH	SUBSCRIBER GROU	JP	EI	GHTY-SIXTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٨		0	<b>9</b> 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
	···	<del> </del>				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP	EIG	HTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···							
						-		
	···				•••••	-		
		_						
	···	<del> </del>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th			iber group a	as shown in the boxes a	above.			
Enter here and in block	ა, iine 1, s	pace L (page /)				\$		

LEGAL NAME OF OWNE						S	7819	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·······		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···							
						-		
						-		
					•••••			
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th			ber group a	as shown in the boxes a	above.			
Enter here and in block	ა, iine 1, s	pace ∟ (page /)				<b>3</b>		

MASSILLON CAB						S	7819	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	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
		<b>-</b>						
Tatal DCCs			0.00	Tatal DOF-			0.00	
Total DSEs				Total DSEs		_		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ETY-FIFTH	SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP <b>0</b>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	····					-		
						-		
						H		
						<del> </del>		
Total DSEs			0.00	Total DSEs		II.	0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				••				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	bove.	\$		

MASSILLON CABI						S	7819	Name
[	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	SEVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
	···							Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
	···							
	···					-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GROU	JP	ONE H	HUNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Froup	•	0.00	Gross Receipts Four	th Group	•	0.00	
roross medelpis Itilia G	συμ	Ψ	0.00	Jorosa Necelhia Loni	ui Gioup	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDR	ED FIRST	SUBSCRIBER GROU	Р	ONE HUNDRI	ED SECOND	SUBSCRIBER GROU	JP	•
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 Seco	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ED THIRD	SUBSCRIBER GROU				SUBSCRIBER GROU	)P 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				Ц			_	
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	RED FIFTH	SUBSCRIBER GROU	JP	ONE HUN	DRED SIXTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> 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 Second Group \$ 0.00				
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	SEVENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP <b>0</b>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNER MASSILLON CABL						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACI	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	•
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 Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	······································					-		
						-		
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes al	bove.	\$		

LEGAL NAME OF OWNE						S	7819	Name
		COMPUTATION O		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	<b>9</b> 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	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
ONE HUNDRED F	IFTEENTH	SUBSCRIBER GROU	JP <b>0</b>	ONE HUNDRED		SUBSCRIBER GROU	JP <b>0</b>	
CALL SIGN	DSE	CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the	he <b>base rat</b>	e fees for each subset	iber group s	s shown in the hoxes a	above			
Enter here and in block			g. 54p t			\$		

LEGAL NAME OF OWN						S	7819	Name
ONE HUNDRED SEV				ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (		\$	0.00	Base Rate Fee Seco		\$	-	
ONE HUNDRED N		SUBSCRIBER GRO	JP <b>0</b>	ONE HUNDRED  COMMUNITY/ AREA		SUBSCRIBER GROU	0.00 UP 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
0,122 0.011		07.122.01.01		07.122.01.01.1			202	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Dana Data E	11- a la ·	- face from a self of	uile e u		- h			
Enter here and in bloc			nuer group a	as shown in the boxes a	abuve.	\$		

LEGAL NAME OF OWNE						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	NTY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROUP		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
								2 3333
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	NTY-THIRD	SUBSCRIBER GROUP				SUBSCRIBER GROUP	0.00 0.00 0.00 DSE	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
					····	-		
				-				
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			ber group a	s shown in the boxes a	bove.	¢		
Lines here and in block	J, IIIIG 1, 5	case E (page 1)				<u> </u>		

LEGAL NAME OF OWNE						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCRI	BER GROUP	_	
ONE HUNDRED TWE	NTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED TV	VENTY-SIXTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
						-		Exclusivity
	···							Surcharge
								for
								Partially
								Distant
				-				Stations
	···							
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TWENT	/-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	ENTY-EIGHTH	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	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
				++				
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes at	bove.	\$		

LEGAL NAME OF OWNE						S	7819	Name
		COMPUTATION OF SUBSCRIBER GROUP	BASE RA	ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROUP		
COMMUNITY/ AREA		COBCONIBENCONOCI	0	COMMUNITY/ AREA		COBCONIBEN GROOT	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 Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TH COMMUNITY/ AREA	IRTY-FIRST	SUBSCRIBER GROUP	0	ONE HUNDRED THI COMMUNITY/ AREA		SUBSCRIBER GROUP	0.00	
CALL CICN	Dec	CALL CION	DOE	CALL SIGN	DOE	I CALL CICN	DOE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
				1				
Enter here and in block			per group a	as shown in the boxes a	pove.	\$		

MASSILLON CAB						S	7819	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	····					-		Syndicated Exclusivity
						<del> </del>		Surcharge
								for
								Partially
								Distant
						-		Stations
						H		
T 1 1 DOE			0.00	T + + P.O.F.			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ONE HUNDRED TH	IIRTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED	THIRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	····							
					•••••	-		
						-		
	····					-		
T			0.00			Į.	0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE MASSILLON CABL						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED THIRTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TH	IIRTY-EIGHTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						H		Syndicated Exclusivity
	······································					-		Surcharge
								for
								Partially
								Distant
								Stations
					····	-		
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$		
ONE HUNDRED THI	RTY-NINTH	SUBSCRIBER GROUP		ONE HUNDREI	D FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
					····			
					····			
Total DSEs			0.00	Total DSEs		Щ	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
		· ·			J. 54P	<u>*</u>		
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				H				
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> 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 Seco	nd Group	\$	0.00	
Base Rate Fee First G	oup -	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-FOURTH	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	Froup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th			ber group a	s shown in the boxes al	bove.			
Enter here and in block	3, line 1, s	pace L (page 7)				\$		

LEGAL NAME OF OWNE						S	7819	Name
<u> </u>	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP				SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> 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 Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FORTY	/-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	ORTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
				-				
				-		H		
		<del> </del>		1		<del> </del>		
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Dana Data E. Tillia	<b>.</b>		0.00	December 5 5 5	h 0			
Base Rate Fee Third G	ioup	\$	0.00	Base Rate Fee Fourt	n Group	\$	0.00	
Page Pate Fee: Add the	o hace vet	• food for each outser	hor group	no abown in the bayes -	hovo			
Base Rate Fee: Add the Enter here and in block			oci group a	as shown in the boxes a	JUVG.	\$		

LEGAL NAME OF OWNER MASSILLON CABL						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRE	ED FIFTIETH	SUBSCRIBER GROU	JP	•
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 Seco	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
	TY-FIRST	SUBSCRIBER GROU				SUBSCRIBER GROU	_	
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	<b>s</b>	0.00	Gross Receipts Fourt	h Group	\$	0.00	
	· r	.*		2.555 ( toosipio ( ouit	<b>2.04</b> p	<u>*</u>		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNER MASSILLON CABL						S	7819	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FIF	TY-THIRD	SUBSCRIBER GROU	IP	ONE HUNDRED FIF	TY-FOURTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> 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	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
	TY-FIFTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
				-				
				-				
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
·					-			
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE						S	7819	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FIFT	/-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED F	FIFTY-EIGHTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> 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 Seco	nd Group	\$	0.00	
<b>Base Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED F	IFTY-NINTH	SUBSCRIBER GROUP		ONE HUNDS	RED SIXTIETH	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 Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th	e hase rate	a face for each subseri	her aroup a	as shown in the boves of	hove			
Enter here and in block			-si gioup c	a chomi in the boxes a	~ J • • • • • • • • • • • • • • • • • •	\$		

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Computatio				COMMUNITY AREA		LIX	W0031	COMMUNITY AREA
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and								
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Exclusivity		···	<u>-</u>		••••			
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for		···	<u>-</u>		••••			
Partially								
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	UP	SUBSCRIBER GRO	FOURTH		UP	SUBSCRIBER GRO	THIRD	
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orodo reddipto r irot v	5. oup			Cross resolpts see	ond Oroup	<u> </u>		
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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		BER GROUP	SUBSCRI	TE EEEO EOR EACH	OF BASE RA	COMPUTATION O	BI OCK A	
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	<u>,                                    </u>	L'		Base Rate Fee Secon  COMMUNITY/ AREA	*		ELEVENTH	
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	UP <b>0</b>	SUBSCRIBER GROL	TWELVTH	COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	ELEVENTH	OMMUNITY/ AREA
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	DSE O.000	SUBSCRIBER GROL	DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DUP  DSE  0.000	SUBSCRIBER GRO	DSE	CALL SIGN  CALL SIGN  otal DSEs
	DSE	SUBSCRIBER GROL	DSE	COMMUNITY/ AREA  CALL SIGN	DUP O DSE	SUBSCRIBER GRO	DSE	CALL SIGN  CALL SIGN  Total DSEs
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H SUBSCRIBER GROUP	TE EEES EOD EACH SII	E BASE DA	COMPLITATION O	BI OCK V	
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O Computation of Base Rate Fermand Syndicated Exclusivity Surcharge for Partially Distant Stations  O.00  O.00  O.00	SUBSCRIBER GROU	CALL SIGN DSE	SUBSCRIBER GROUP  CALL SIGN  DSE	
O Computation of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant Stations  O.00  O.00  O.00  ROUP  O		COMMUNITY/ AREA	0	
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		BER GROUP	SUBSCRI	TE FEES FOR FACH	OF BASE RA	COMPUTATION (	BLOCK A.	
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
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LEGAL NAME OF OWNER  MASSILLON CABL						\$	7819	Name
			F BASE RA	ATE FEES FOR EAC	CH SUBSCR	BER GROUP		
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FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name MASSILLON CABLE TV INC 7819 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. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group . . . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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Radio

Accepted

C	Cable Worksheet	Total amount of remittance	Number of SAs rec'd	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				
	☐ January 1 - June 30, 2017		July 1 - December 31, 2017	
	Letter sent		Information received	
	Accepted		Phone call/Date/Contact	
Space B Owner				
	Letter sent		Information received	
	Accepted		Phone call/Date/Contact	
Space D Area Served				
	Letter sent		Information received	
	Accepted		Phone call/Date/Contact	
Space E Secondary Transission				
Service Subscribers:	Letter sent		Information received	
and Rates	Accepted		Phone call/Date/Contact	
Space G Primary Transmitters:				
Television	Letter sent		Information received	
	Accepted		Phone call/Date/Contact	
Space H Primary Transmitters:				

Phone call/Date/Contact

		Space I Substitute Carriage
Letter sent	☐ Information received	1
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	1
Letter sent	Phone call/Date/Contact	1
		Space L Copyright Filing and Royalty Fees
Royalty Fee should be	Refund request to fiscal	
Letter sent	☐ Information received	
Accepted	Phoe call/Date/Contact	
		Space M Channels
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space O Certification
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space P Statement of Gross Receipts
Letter sent	☐ Information received	
Accepted	Phone call/Date/Contact	
		Space Q Interest Assessment
Letter sent	☐ Info/add'l fee received	
Accepted	Phone call/Date/Contact	