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					
08/30/2023	\$ 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		2023/1							
B Owner	rate a sir	Give the full legal name of the owner of the cable system. If the owner is stitle of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine of there were different owners during the accounting period, only the owner only estatement of account and royalty fee payment covering the entire account check here if this is the system's first filing. If not, enter the system's ID GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	ess of the cable system on the last day of to counting period	em he accounting period should s	•	024965			
	SHELLSBURG CABLEVISION, INC								
		USA COMMUNICATIONS							
				()24965	52023/1			
					024965	2023/1			
		PO BOX 389 SHELLSBURG, IA 52332-0389							
С		TRUCTIONS: In line 1, give any business or trade names used to it							
	nam	nes already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address give	n in space	В.			
System	1	IDENTIFICATION OF CABLE SYSTEM:							
		MAILING ADDRESS OF CABLE SYSTEM:							
	2	(Number, street, rural route, apartment, or suite number)							
		<u></u>							
		(City, town, state, zip code)							
D		ructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page	₃ 1b			
Area Served	with	all communities.	lo=+==						
		CITY OR TOWN	STATE						
First Community	F	SHELLSBURG							
	Be	elow is a sample for reporting communities if you report multiple cha CITY OR TOWN (SAMPLE)	annel line-ups in S	pace G. CH LINE UP	QI IQ	3 GRP#			
	Alda		MD	A A	308	1			
Sample		Ince	MD	В		2			
	Geri		MD	В		3			
		-							

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

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 024965 SHELLSBURG CABLEVISION, 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 Area areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE **CH LINE UP** SUB GRP# **SHELLSBURG** IA **First ALBURNETT** IA Community IA URBANA **CENTER POINT** IA **CENTRAL CITY** IA **ROBINS** IA See instructions for **BLAIRSTOWN** IA additional information on alphabetization. LUZERNE IA **BELLE PLAINE** IA **MARENGO** IA Add rows as necessary.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:
SHELLSBURG CABLEVISION, INC
SYSTEM ID#
024965

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.

BLO	OCK 1		BLOC	BLOCK 2		
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS		RATE
Residential:						
Service to first set	326	\$ 83.71	FTTH BASIC	-	\$	-
 Service to additional set(s) 			FTTH LIFELINE	15	\$	21.15
 FM radio (if separate rate) 			FTTH EXPANDED	87	\$	92.09
Motel, hotel	49	\$ 20.09	FTTH BASIC W/HD	389	\$	98.40
Commercial	56	\$ 13.92	FTTH EXPANDED W/HD	622	\$	106.78
Converter			LOCAL PROGRAMMING		\$	27.14
Residential					Ī	
Non-residential						
I .		 	_	·P····		

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

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

	BLO	CK 1				BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	R	CATEGORY OF SERVICE	RATE		
Continuing Services:		Installation: Non-residential					
• Pay cable		Motel, hotel					
 Pay cable—add'l channel 		Commercial					
Fire protection		Pay cable			ľ		
•Burglar protection		Pay cable-add'l channel					
Installation: Residential		Fire protection					
First set		Burglar protection					
Additional set(s)		Other services:			ľ		
• FM radio (if separate rate)		Reconnect	\$	40.00			
Converter		Disconnect					
		Outlet relocation	\$	65.00			
		Move to new address	\$	65.00			
			h				

FORM SA3E. PAGE 3		(OTEN			SYSTEM ID	4
	WNER OF CABLE ST					Name
					02-1000	
PRIMARY TRANSMI' In General: In space carried by your cable FCC rules and regulated for rules and rules and rules and rules for rules and rules	te G, identify ever le system during to lations in effect on 76.61(e)(2) and lobasis, as explainte s Stations: With FCC rules, regulation here in space led only on a substre, and also in spar information conditions. For example, as a sociated with a channel numbers. For example, a system carried to late in each case by entering the least in each case a station is outside envice area, see put have entered "Y did the distant station on a part-tilission of a distantent entered into ond a primary transfor simulcasts, alse three categories	y television state accounting an June 24, 19, 4), or 76.63 (add in the next respect to any acceptance of the state of the	g period, except 981, permitting the referring to 76.6 paragraph. It is a paragraph. It i	(1) stations carrine carriage of cer 1(e)(2) and (4))]; is carried by your me Special Statemed both on a substans, see page (v) on program service er-the-air designation of the television statington, D.C. This pork station, an indiffer network multipor "E-M" (for noncotions located in the television of the television of the television statington, p.c. This pork station, an indiffer network multipor "E-M" (for noncotions located in the television of the telev	stating the basis on which your ntering "LAC" if your cable system	Primary Transmitters: Television
FCC. For Mexican o	or Canadian statio	ons, if any, giv	e the name of the	ne community wit	h which the station is identifed.	
Note: If you are utili	izing multiple cha	nnel line-ups,	use a separate	space G for each	n channel line-up.	
		CHANN	IEL LINE-UP	AA		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
KGAN	2	N	No	,	CEDAR RAPIDS, IA	
KWWL	7	N	No		WATERLOO, IA	See instructions for
KCRG	9	N	No		CEDAR RAPIDS, IA	additional informatio
KRIN	12	N	No		WATERLOO, IA	uni aipiiabetization.
KWKB	20	N	No		IOWA CITY, IA	
KFXA	28	N	No		CEDAR RAPIDS, IA	
KPXR	48	N	No		CEDAR RAPIDS, IA	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
SHELLSBURG	CABLEVISI	ON, INC			024965	
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis is basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable is Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	G, identify ever system during to ions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concurr. ch station's call associated with a-2". Simulcast e channel numbers, For example system carried the in each case of entering the lecast), "E" (for noise terms, see ation is outside ice area, see prave entered "Y he distant staticion on a part-tilision of a distant tentered into o a primary trans simulcasts, also ree categories e location of each	y television standard by television standard	g period, except 81, permitting the ferring to 76.6 paragraph. If distant stations orizations: It it in space I (the fitting the ferring to 76.6 paragraph. If the fitting the ferring to 76.6 paragraph. If the fitting the ferring to 76.6 paragraph. If the fitting the fit	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the second of the seco	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
	<u> </u>	CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
		†				

FORM SA3E. PAGE 3.					
LEGAL NAME OF OWNER OF CABLE				SYSTEM ID#	Name
SHELLSBURG CABLEVIS	SION, INC			024965	
PRIMARY TRANSMITTERS: TELEVIS	SION				
In General: In space G, identify ever carried by your cable system during FCC rules and regulations in effect 76.59(d)(2) and (4), 76.61(e)(2) and substitute program basis, as explain Substitute Basis Stations: With basis under specific FCC rules, reguing Do not list the station here in space station was carried only on a suffer substitute Basis Station was carried only on a suffer substitute Basis Station was carried only on a suffer substitute Basis Station was carried only on a suffer substitute Basis For Column and also in substitute Basis. For further information contains the paper SA3 form. Column 1: List each station's calcate and multicast stream associated we cast stream as "WETA-2". Simulcast WETA-simulcast). Column 2: Give the channel nutifus community of license. For example on which your cable system carried Column 3: Indicate in each case educational station, by entering the (for independent multicast), "E" (for For the meaning of these terms, see Column 4: If the station is outsic planation of local service area, see Column 5: If you have entered "cable system carried the distant station on a part-For the retransmission of a distate of a written agreement entered into the cable system and a primary trartion "E" (exempt). For simulcasts, a explanation of these three categories.	ery television stands the accounting on June 24, 19 and (4), or 76.63 (need in the next on respect to any diations, or author e G—but do list ostitute basis. Pace I, if the stands are the station and the station and the station are the station. The station are the station are the station. The station are page (v) of the station are page (v) of the the local series are page (v) of the the same time basis becant multicast strong the station or before June singular the station of the station of the station or singular the station or singular the station or singular the station of the station of the station or singular the station of the statio	g period, except 81, permitting the referring to 76.6 paragraph. If the distant stations is a carried tute basis station report origination cording to its own to be reported in the distance of the distance	in (1) stations carried to carriage of certa- 1(e)(2) and (4))]; as carried by your of the Special Statement of the Speci	and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a stable system on a substitute program ent and Program Log)—if the state basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multinastream separately; for example son for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system capacity. The paper sharp is the subject stem or an association representing the tops, enter "O." For a further	G Primary Transmitters: Television
FCC. For Mexican or Canadian state Note: If you are utilizing multiple ch	. ,		•		
Note: If you are utilizing multiple of		EL LINE-UP	•	спаппен ше-ир.	
1. CALL 2. B'CAST CHANNE NUMBER	~ .	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				0.000,000,000,000,000,000,000,000,000,0	

LEGAL NAME OF OWN	JER OF CABLE SY	/STFM·			SYSTEM ID#		
SHELLSBURG					024965	Name	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for							
carried the distant stat	ion on a part-tiı	me basis beca	ause of lack of a	ctivated channel o	capacity.		
					payment because it is the subject stem or an association representing		
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the	channel on any ot	y transmitter, enter the designa- her basis, enter "O." For a further		
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	d in the paper SA3 form. to which the station is licensed by the		
FCC. For Mexican or (Note: If you are utilizing)				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AD			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
					011111111111111111111111111111111111111		

FORM SA3E. PAGE 3.						
SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTI					024903	
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for networ						
		CHANN	FI LINE-LID	ΔF		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					21/2======	
LEGAL NAME OF OWN					SYSTEM ID#	Name
SHELLSBURG	CABLEVISI	ON, INC			024965	
PRIMARY TRANSMITTI						
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	system during to ions in effect or 6.61(e)(2) and (sis, as explaine	he accounting ո June 24, 19ն 4), or 76.63 (r d in the next լ	period, except 81, permitting the referring to 76.6 paragraph.	(1) stations carrie te carriage of certa 1(e)(2) and (4))]; a	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program	G Primary Transmitters: Television
basis under specifc FC				odinod by your o	able bystom on a substitute program	Television
station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List each	only on a subs and also in spa formation cond rm. th station's call	titute basis. ace I, if the sta erning substit sign. Do not r	ition was carried ute basis station eport originatior	I both on a substit ns, see page (v) o n program service:	ent and Program Log)—if the ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify iion. For example, report multi-	
WETA-simulcast).			·	,	a stream separately; for example	
					on for broadcasting over-the-air in may be different from the channel	
on which your cable sy Column 3: Indicate	ystem carried the in each case v	ne station. vhether the st	ation is a netwo	rk station, an inde	pendent station, or a noncommercial ast), "I" (for independent), "I-M"	
(for independent multide For the meaning of the Column 4: If the st planation of local servi	cast), "E" (for neese terms, see ation is outside ce area, see pa	oncommercial page (v) of the the local serv age (v) of the	l educational), o e general instruc rice area, (i.e. "c general instructi	r "E-M" (for nonco ctions located in th distant"), enter "Ye ions located in the	mmercial educational multicast). ne paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form.	
planation 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						
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
,			EL LINE-UP			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
SHELLSBURG	CABLEVISI	ON, INC			024965	Humo	
PRIMARY TRANSMITTE	RS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space — Dut 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 in space — Dut do list it in space I (the Special Statement and Program Log)—if the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering "L							
				•	•		
		. ,		•			
		CHANN	EL LINE-UP	AG			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN					SYSTEM ID#	Name	
SHELLSBURG	CABLEVISI	ON, INC			024965	Humo	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4)); and (2) certain stations carried on a substitute program basis as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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 in space G—but do list it in space I (the Special Statement and Program Log)—if the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering th							
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		CHANN	EL LINE-UP	АН			
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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FURM SAJE. PAGE 3.					0./07514 10.//				
SHELLSBURG					SYSTEM ID# 024965	Name			
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON							
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	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								
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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				

FURM SAJE. PAGE 3.					0./07514 10.//				
SHELLSBURG					SYSTEM ID# 024965	Name			
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON							
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base	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								
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		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				

LEGAL NAME OF OWN	JER OF CABLE SY	YSTEM:			SYSTEM ID#	
SHELLSBURG					024965	Name
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
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		CHANN	EL LINE-UP	AK		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
SHELLSBURG	CABLEVISI	ON, INC			024965	
PRIMARY TRANSMITT	ERS: TELEVISION	NC				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis is basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List ead each multicast stream cast stream as "WETA-simulcast). Column 2: Give th its community of licens on which your cable is Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	G, identify ever system during to ions in effect on 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concurr. ch station's call associated with a-2". Simulcast e channel numbers, For example system carried the in each case of entering the lecast), "E" (for noise terms, see ation is outside ice area, see prave entered "Y he distant staticion on a part-tilision of a distant tentered into o a primary trans simulcasts, also ree categories e location of each	y television state he accounting in June 24, 196, 4), or 76.63 (red), and in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in the station account of the station account of the station. Whether the station. Whether the station. Whether the station account on during the account on during the account of the station or before Junitter or an account of the station. The station is seen account of the station of the station of the station. The station is seen account of the station of the station of the station. The station is seen account of the station of the station. For the station is seen account of the station. For the station is seen account of the station.	g period, except 81, permitting the ferring to 76.6 paragraph. If distant stations orizations: It it in space I (the fitting the ferring to 76.6 paragraph. If the fitting the ferring to 76.6 paragraph. If the fitting the ferring to 76.6 paragraph. If the fitting the fit	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the second of the seco	s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system	G Primary Transmitters: Television
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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.								
LEGAL NAME OF OWN					SYSTEM ID#	Name		
SHELLSBURG	CABLEVISI	ON, INC			024965	Nume		
PRIMARY TRANSMITTERS: TELEVISION								
PRIMARY TRANSMITTE In General: In space (carried by your cable stock rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute Basis Subasis under specific Fo Do not list the station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servi Column 5: If you have cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the	ERS: TELEVISIO G, identify even system during the control of the c	y television state accounting a June 24, 194, or 76.63 (rad in the next) respect to any ations, or auth G—but do listitute basis. ace I, if the state raing substitute basis berning substitute basis. The state of t	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinns as a sation to 182 tinns as assigned to 182 tinns assigned to 182 tinns as as as as a second asecond as a second	(1) stations carrie e carriage of certa 1(e)(2) and (4))]; a carried by your carried by the sepage (v) of a program services er-the-air designate column 1 (list each carried by the television staticington, D.C. This rate that the television staticington, D.C. This rate that the television staticington, D.C. This rate that the television staticington, D.C. This rate television sta	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program and and Program Log)—if the and Program Log)—if the attention basis and also on some other attention. For example, report multi- attention basis and also on some other attention basis on the channel and basis and also on some other attention. For example and attention basis on a noncommercial ast), "I" (for independent), "I-M" and and also on a noncommercial ast), "I" (for independent), "I-M" and and also on a noncommercial ast), "I" (for independent), "I-M" and and also on some other and also on some other and and and also on some other and and and also on some other and and and and and and also on some other and	Primary Transmitters: Television		
				•	to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	AM				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
SHELLSBURG	CABLEVISI	ON, INC			024965	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON .				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program bas Substitute Program bas Substitute Program bas Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the Column 6: Give the carried the carried the system and tion "E" (exempt). For explanation of these the Column 6: Give the carried the carried the carried the carried the system and tion "E" (exempt). For explanation of these the Column 6: Give the carried	G, identify even system during the ions in effect or 6.61(e)(2) and (sis, as explaine Stations: With a CC rules, regular here in space only on a substand also in spanformation concorn. ch station's call associated with A-2". Simulcast e channel numbers are carried the in each case we renter en each case were entered "Ye in each case were entered into on a part-time simulcasts, also are categories e location of each	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the state of the station account of the station. Whether the station whether the station. Whether the station account of the local server in column on during the same basis becard multicast stream or before Jumitter or an associated in the station. For example, (v) of the same basis becard in column or during the same basis becard in the station or properties of the same basis becard in the sam	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried to 181 tinn was carried to 181 tinn was sation to 181 tinn was assigned to 181 tinn was	(1) stations carried to carriage of certa- 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service the er-the-air designation of the television statisticity of the television statisticity, enter "Yes to consider the television statisticity, enter "Yes to consider the television statisticity of the tel	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ig multiple chai		•	•	charmer inte-up.	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	INGINIDLIN	SIATION		(II Distailt)		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name
SHELLSBURG	CABLEVISI	ON, INC			024965	
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.								
LEGAL NAME OF OWN					SYSTEM ID#	Name		
SHELLSBURG	CABLEVISI	ON, INC			024965	Nume		
PRIMARY TRANSMITTERS: TELEVISION								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under 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), "" (for independent), "I-M" (for inde								
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Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.			
		CHANN	EL LINE-UP	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			

FURM SAJE. PAGE 3.					0)/07514 ID#			
SHELLSBURG					SYSTEM ID# 024965	Name		
PRIMARY TRANSMITTI	ERS: TELEVISION	ON						
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S	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							
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		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			

FURINI SAJE. PAGE 3.					0./07514 10.//				
SHELLSBURG					SYSTEM ID# 024965	Name			
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON							
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	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								
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		CHANN	EL LINE-UP	AR					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN					SYSTEM ID#	Name		
SHELLSBURG	CABLEVISI	ON, INC			024965	Humo		
PRIMARY TRANSMITTERS: TELEVISION								
PRIMARY TRANSMITTE In General: In space (carried by your cable stock rules and regulation 76.59(d)(2) and (4), 76 substitute program bas Substitute program bas Substitute program bas Substitute Basis Subasis under specific Fo Do not list the station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servi Column 5: If you have cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the	ers: TELEVISIO G, identify every system during the control of the control Gold (e)(2) and (exist, as explaine Stations: With the control of the control of the control Gold (e)(2) and (exist, as explaine Stations: With the control of the control of the control Gold (e)(2) and (exist) and also in space formation control Gold (e)(3) and also in space formation control Gold (e)(4) and also in space formation (e) Gold (e)(4) and (e)(5) and (e) Gold (e)(6) and (e) Gold (e	y television state accounting an June 24, 196 4), or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state acrining substitute sign. Do not red a station account a streams must be the FCC has estation. Whether the station account a stream and the local server age (v) of the television of the local server in column on during the ame basis becard multicast stream or before Jumitter or an account are greatly in the station or during the ame to enter "E". If y see page (v)	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is a control of the report origination could be reported in control of the reported in contr	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of the special Statement of both on a substitute, see page (v) of the program services the television station of the television of	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel upendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). The paper SA3 form. The paper SA3 form. The paper SA3 form which your tering "LAC" if your cable system capacity. The payment because it is the subject term or an association representing the basis, enter "O." For a further d in the paper SA3 form.	Primary Transmitters: Television		
				•	to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing		. ,		•				
		CHANN	EL LINE-UP	AS				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	T	I						

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
SHELLSBURG	CABLEVISI	ON, INC			024965	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
In General: In space (carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the	G, identify every system during the ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e)(2) and (6.51(e)(2) and (6.51(e)(2) and (6.51(e)(2) and also in spanformation concurrs. Chastaion's call associated with associated with associated with associated with a carried the in each case we are entering the lecast), "E" (for no ese terms, see pation is outside ice area, see pation is outside ice area, see pation of a distant the entered "Ye in each case we entered "ye in each case terms, see pation is outside ice area, see pation is outside ice area, see pation of a distant the entered into on a part-tirision of a distant the entered into on a primary transis simulcasts, also aree categories, e location of each canadian statio	y television standard by television standard	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the fermion of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is a control of the report origination cording to its over the reported in control of the reported in the report of the reported in the report origination is a network of the report	(1) stations carried the carriage of certain (e)(2) and (4))]; and (e)(2) and (4))]; and carried by your cast of scarried by your cast of your cast o	paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
		CHANN	EL LINE-UP	AT		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#								
SHELLSBURG	CABLEVISI	ON, INC			024965	Name		
PRIMARY TRANSMITTERS: TELEVISION								
· ·								
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations, l	list the community	to which the station is licensed by the			
Note: If you are utilizing				•	which the station is identifed. channel line-up.			
		CHANN	EL LINE-UP	AU				
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#								
SHELLSBURG	CABLEVISI	ON, INC			024965	Name		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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 pasis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream 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 by entering the each case whether the station is a netwo								
		CHANN	EL LINE-UP	AV				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FURM SAJE. PAGE 3.					0\\0TEM ID#			
SHELLSBURG					SYSTEM ID# 024965	Name		
PRIMARY TRANSMITTERS: TELEVISION								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.								
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For								
		CHANN	EL LINE-UP	AW				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
		 						

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 024965 SHELLSBURG CABLEVISION, INC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.								ACCOUNTING	PERIOD: 2023/1	
LEGAL NAME OF OWNER OF SHELLSBURG CABLE							S	YSTEM ID# 024965	Name	
SUBSTITUTE CARRIAGE In General: In space I, ident					n that your	cable	system c	arried on a	ı	
substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program										
Note: If your answer is "No log in block 2.		rest of this pag	ge blank. If your answer is	'Yes," you mu	ust comple		•	X No	Statement and Program Log	
2. LOG OF SUBSTITUTE In General: List each subsiclear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broa the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 giv Column 6: State the tim- to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ace, please a of every nor distant statis gulations, o ation. Do no Lucy" or "NE m was broad sign of the s adcast static addian static and and day ave "5/7." es when the Example: a er "R" if the and regulatio orgramming	am on a separa attach addition nnetwork televion and that your authorization t use general of BA Basketball: dcast live, ente station broadca on's location (thons, if any, the when your syste a substitute pro a program carri	al pages. ision program (substitute pour cable system substitute so See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ged by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instruction "basketball". lo." m. station is lice station is iderorogram. Use cable system. 15 p.m. to 6:2 mming that y; enter the let	during the ramming ons located List specinsed by the htiffied). numerals List the till 8:30 p.m. our system ter "P" if the	e account another account and account another account	unting ther static paper pgram C or, in the month ccurately d be required ed pro	h		
S	SUBSTITUT	E PROGRAM	1		EN SUBS ¹			7. REASON FOR		
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES	S TO	DELETION		
	T	1	1		T					

ACCOUNTING PERIOD: 2023/1 FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 024965 SHELLSBURG CABLEVISION, INC **PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime 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 Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred 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 WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM: ELLSBURG CABLEVISION, INC	S	YSTEM ID# 024965	Name
Inst all a (as	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amoun amounts (gross receipts) paid to your cable system by subscribers for the system's sec identifed in space E) during the accounting period. For a further explanation of how to de (vii) of the general instructions.	ondary transmission servi	ice	K Gross Receipts
IMP	Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 95 (Amount of gross rece	7,175.54 eipts)	
CorCorIf you feeIf you	RIGHT ROYALTY FEE Inctions: Use the blocks in this space L to determine the royalty fee you owe: Inplete block 1, showing your minimum fee. Inplete block 2, showing whether your system carried any distant television stations. In system did not carry any distant television stations, leave block 3 blank. Enter the arterior block 1 on line 1 of block 4, and calculate the total royalty fee. In system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.		9	L Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!$	e entered on line 1 of		
3 be	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.		(
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered on line		
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.	e is 1.064 percent of the	7.475.54	
	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.	\$ 95	7,175.54	
	This is your minimum fee.	\$ 10	0,184.35	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colun "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period of Yes—Complete the DSE schedule. X No—Leave block 3 below blank and on the state of Yes—Complete the DSE schedule.	nn 4, you must check od?		
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$		
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	-	0.00	
	Line 3. Add lines 1 and 2 and enter here	\$	-	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger 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, ente		0,184.35	Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$	725.00	additional fees.
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 10	0,909.35	appropriate form for submitting the
	EFT Trace # or TRANSACTION ID #			additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to)	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#									
	SHELLSBURG CABLEVISION, INC	024965									
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.										
	1. Enter the total number of channels on which the cable system carried television broadcast stations										
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	7									
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)										
Be Contacted for Further Information	Name LAINIE SCOTT Telephone 319-436-2224										
	Address 124 MAIN ST, PO BOX 389 (Number, street, rural route, apartment, or suite number)										
	SHELLSBURG, IA 52332 (City, town, state, zip)										
	Email apinvoice@usacomm.coop Fax (optional)										
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations										
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)										
	(Owner other than corporation or partnership) I am the owner of the cable system as 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	as identified									
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of t in line 1 of space B.	he cable system									
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herei 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)]	n									
	X /s/Curtis Eldred										
	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 bound of the first forward slash of the /s/ signature, place your cursor in the bound of the first forward signature. Pressing the "F" button will avoid enabling Excel's Lotus compatible.										
	Typed or printed name: /s/Curtis Eldred										
	Title: General Manager (Title of official position held in corporation or partnership)										
	Date: August 29, 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 th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
SHELLSBURG CABLEVISION, INC	024965	Numo
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 b lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system she scribers and amounts collected from subscribers receiving secondary transmissions pursuant to	n for the basic all not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general inspaper SA3 form.	tructions in the	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondar made by satellite carriers to satellite dish owners?	ry transmissions	
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Name Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3		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	-	
x	days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-	
	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	_	
	interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	assistance please	
** 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 Copyr	ight Offco	
please list below the owner, address, first community served, accounting period, and ID number as gi filing.	-	
Owner		
Address		
First community served		
Accounting period		
ID number		

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

ACCOUNTING PERIOD: 2023/1

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable.
 First DSE 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

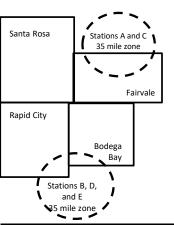
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		ψο,σοσο				
First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00	
DSEs	2.472	DSEs	1.083	DSEs	1.389	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80	
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	

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

ACCOUNTING PERIOD: 2023/1

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#											
1	SHELLSBURG CABLEV	ISION, INC				024965						
	SUM OF DSEs OF CATEGOR											
	Add the DSEs of each station											
	Enter the sum here and in line	1 of part 5 of this	s schedule.		0.00							
_	Instructions:			ı								
2	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5											
	of space G (page 3).											
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSE CALL SIGN. DSE CALL SIGN. DSE CALL SIGN. DSE CALL SIGN. DSE											
Category "O"												
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Otations	ONEE SIGIT	BOL	O/ IEE OIOIV	DOL	O/ IEE OIOIV	BOL						
Add rows as												
necessary.												
Remember to copy												
all formula into new												
rows.												
				3								
				•								

Name	SHELLSBURG C		NC				S	024965
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: For figure should corre Column 3: For Column 4: Div be carried out at le Column 5: For give the type-value Column 6: Mul	call sign of all distate each station, give to spond with the inforceach station, give to dide the figure in columns to the third decimate to the third decimate each independent to as ".25."	the number of hourmation given in spithe total number out out of the total number out out of the figurmal point. This is to station, give the "tolumn 4 by the figurmal point and the figurmal point.	rs your cable system pace J. Calculate or f hours that the state e in column 3, and the "basis of carriag type-value" as "1.0." are in column 5, and	m carried the stanly one DSE for each broadcast ow give the result in e value" for the standard result in the r	tion during the accountine each station. er the air during the accordecimals in column 4. T	ounting period. his figure must ucational station,	
Capacity		C	CATEGORY LA	AC STATIONS:	COMPUTATI	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	ER 3. JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE		SE.
			÷		=	x	=	
			÷ ÷		=	x	<u>=</u>	
			÷		=	x x	<u>-</u>	
			÷		=	x	=	
			÷		=	x	=	
			÷			X X	<u>=</u>	
	SUM OF DSEs OF Add the DSEs of ea Enter the sum he			lule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried by y tions in effect on Broadcast one of space I). Column 2: For eat your option. This Column 3: Enter Column 4: Dividiance.	our system in substance of the control of the contr	titution for a progra (as shown by the I ork programs during the number of live, not spond with the information in the calendar years of the figure	am that your system etter "P" in column in that optional carrionnetwork program ormation in space I. ear: 365, except in in column 3, and given.	n was permitted to the properties of space (); and the properties of the properties	rograms) if that station: to delete under FCC rule d the word "Yes" in column stitution for programs that column 4. Round to no les the general instructions i	2 of t were deleted as than the third	rm).
		SU	BSTITUTE-BA	SIS STATION	S: COMPUTA	ATION OF DSEs		
	SIGN C	NUMBER)F PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		······································	-	=			-	=
			•	=		•	•	=
		······································		=		<mark></mark>	-	=
	SUM OF DSEs OF S Add the DSEs of ea Enter the sum he			lule,	▶	0.00		
5 Total Number of DSEs	TOTAL NUMBER OF number of DSEs app 1. Number of DSE 2. Number of DSE	licable to your syster Es from part 2 ●		es in parts 2, 3, and	4 of this schedul	e and add them to provide	0.00 0.00	
	3. Number of DSE	Es from part 4 ●				-	0.00	
	TOTAL NUMBER OF	DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/1

LEGAL NAME OF C							S'	YSTEM ID# 024965	Name
Instructions: Blod In block A: • If your answer if schedule. • If your answer if	"Yes," leave the re	· emainder of p ocks B and C	below.			nd complete p	art 8, (page 16) of	f the	6
				ELEVISION M.					Computation of 3.75 Fee
I <u> </u>	1981? plete part 8 of the plete blocks B and	schedule—E C below.	OO NOT COM	PLETE THE REMAINED FOR PERIOR	AINDER OF I	PART 6 AND 7	7		
CALL SIGN	under FCC rules instructions for th Satellite Television	and regulatione DSE Scheon Extension	ons prior to Jui dule. (Note: Th and Localism	ne 25, 1981. For for ne letter M below r Act of 2010.)	urther explana refers to an ex	ation of permiti xempt multicas	ted stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carria 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfatherec instructions fc E Carried pursua *F A station pre	ules and regued pursuant to as defined all educations do station (76.6 or DSE sched ant to individuationally carries). The station we would be station we are to make the station we are to make the station we are to pursue the station we are the station which we are the station where the station we are the station which we are the station where the station where the station we are the station where the station where the station we are the station where the station where the station we are the station where the station we are the station where	lations cited be to the FCC madd in 76.5(kk) (7a.1 station [76.565) (see paragulule). Lual waiver of Fed on a part-ting grade-Both in the first paragulule in the part-ting grade-Both in the first paragulus in the part-ting grade-Both in grade-Both in grade-Both in the first paragulus in the first	ne or substitute ba contour, [76.59(d)(ose in effect of 76.57, 76.59(b) (e)(1), 76.63(a) (e)(3) referring the stitution of goods asis prior to June 20.55 (e)	n June 24, 198 b), 76.61(b)(c), a) referring to 7 g to 76.61(d) grandfathered s	76.63(a) referring		
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			worksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	•		•						
			•				•		
								0.00	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			11-	<u>-</u>	
Line 2: Enter the	·						11-	-	
Line 3: Subtract (If zero, l				r of DSEs subjec 7 of this schedu		rate.	n -	0.00	
Line 4: Enter gro	ess receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375	and enter su	ım here				×		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7))		0.00	

Name	YSTEM ID# 024965	31						WNER OF CABLE CABLEVISIO	
6	3. DSE	2. PERMITTED	1. CALL	3. DSE	2. PERMITTED	1. CALL	BLOCK 3. DSE	2. PERMITTED	1. CALL
Computation		BASIS	SIGN		BASIS	SIGN		BASIS	SIGN
3.75 Fee									

Name	SHELLSBURG								S	98TEM ID# 024965
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fit A—Part-time spy 76.59) B—Late-night pr 76.61(S—Substitute ca genera Column 5: Indicate Column 6: Comparin block	or to June 25, call sign for eather DSE for the DSE for the accounting the basis of CC rules and ecialty programming: (d)(1),76.61(etogramming: (e)(3)). Carriage under all instructions the station's let the DSE fig. B, column 3 dinformation yet.	1981, under forme ach distant station in his station for a sing period and year arriage on which the regulations cited by mming: Carriage, c)(1), or 76.63 (refe: Carriage under FCC certain FCC rules, in the paper SA3 10 SE for the current ures listed in column of part 6 for this state un give in columns	r FCC rules govidentifed by the gle accounting pin which the car he station was to the station of the station	verrilett per rriag carr thosasis)(1) s 7 aut riod	entifed by the letter "F" ning part-time and sub ter "F" in column 2 of priod, occurring between ge and DSE occurred ied by listing one of the see in effect on June 24 s, of specialty program)). 16.59(d)(3), 76.61(e)(3) thorizations. For further das computed in parts the smaller of the two see accurate and is subjected.	stitute carri part 6 of the n January 1 (e.g., 1981) e following 4, 1981. Iming unde o, or 76.63 (r explanation 2, 3, and 4 o figures he	age. DSE schedule, 1978 and Jun'1, letters r FCC rules, so referring to on, see page (voor, see page)	ections vi) of the should be	e entere
		PERMITT	ED DSE FOR STA	TIONS CARRIE	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS		
	1. CALL	2. PRI		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED
	SIGN	DSE	Р	ERIOD		CARRIAGE	L	OSE		DSE
7 Computation of the	,	"Yes," comple	ete blocks B and C	•	pa	art 8 of the DSE sched	ule.			
Syndicated			BLOC	K A: MAJOR	TE	ELEVISION MARK	ET			
Exclusivity				4-14-1	.1 4		0 F - 1 F00		04	10040
Surcharge		•		or television mar	rket	t as defned by section 7		rules in effect J	une 24,	1981?
	Yes—Complete	blocks B and	1 C .			No—Proceed to	part 8			
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	not DSEs	
	Is any station listed in commercial VHF stati or in part, over the ca	block B of pa	art 6 the primary str	eam of a		Was any station listed nity served by the cab to former FCC rule 76	in block B	of part 7 carrie	d in any	commu-
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	ted DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE
			-							
			-							
		<u> </u>	TOTAL DSEs	0.00			<u> </u>	TOTAL DS	Es	0.00
					- 11					

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC	SYSTEM ID# 024965	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	957,175.54	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		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	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.		
0 +			
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ _\$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ _\$		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	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			SYSTEM ID#
110	,	SHELLSBURG CABLEVISION, INC	024965
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ _\$	
Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in	
		section 2) and enter here	
		F. Multiply line D by line E and enter here	
		Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge	
		Syndicated Exclusivity Surcharge	
8 Computation of Base Rate Fee	You me 6 was 6 In blo If you If you blank What i	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of particle checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local earea," see page (v) of the general instructions.	wo
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$ 957,175.5	54_
	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 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	_
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 6,709.80	
		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 ▶ <u>\$</u> -	
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee	<u>- </u>

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
SHEL	LSBURG CABLEVISION, INC	024965	Italiic
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1) **S		8
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$		Computation of
	C. Multiply line B by 3.000 and enter here ▶	_	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1)		
İ	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ▶		
ĺ	F. Multiply line D by line E and enter here \$		
l	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)		
İ	Base Rate Fee	0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe	•	0
Space In Gen	G. eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee	to exclude	9
receipts	is from subscribers located within the station's local service area, from your system's total gross receipts. To take acon, you must:		Computation of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in p mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be cable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
Step 1:	Identify a Subscriber Group for Partially Distant Stations For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	ion you	for Partially Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lot the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. I ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
•	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	em's subscriber	
• Identii • Give t	section: fy the communities/areas represented by each subscriber group. he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.	of the	
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in	ı parts 2, 3,	
2) any	of this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	ock B,	
•	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	structions	
page. DSEs f	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the part making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	at is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 024965 SHELLSBURG CABLEVISION, 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 OWNI SHELLSBURG CA						S	024965	Name
В		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fe
								and Syndicated
								Exclusivity
		-						Surcharge
		=						for
								Partially Distant
								Stations
		-						
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
						·		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				П				
Base Rate Fee: Add the Enter here and in block	he base rat k 3, line 1, s	e fees for each subsc space L (page 7)	riber group	as shown in the boxes	above.	\$	0.00	

LEGAL NAME OF OWNE SHELLSBURG CA						S	YSTEM ID# 024965	Name
BL	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	FIFTH	SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
		•						
Total DSEs		!	0.00	Total DSEs	'		0.00	
			0.00		- m d O m	•	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
S	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	¢	0.00	Base Rate Fee Fou	rth Group	¢	0.00	
Dase Nate Fee Hilld G	ισαρ	\$	0.00	Dase Nate Fee Fou	rai Gioup	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rat 3, line 1, s	e fees for each subs	scriber group	as shown in the boxe	s above.	\$		

NINTH SUBS	PUTATION OF I SCRIBER GROUI		COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Seco	DSE	SUBSCRIBER GROUP CALL SIGN S \$	DSE	G Computation of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant Stations
CALL SIGN DSE CA		0 DSE	Total DSEs	DSE	CALL SIGN	DSE O.00	Computation of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
CALL SIGN DSE CA	ALL SIGN	DSE	Total DSEs	DSE		DSE DSE	Computation of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
Total DSEs	ALL SIGN	0.00	Total DSEs			0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
Total DSEs			Total DSEs	nd Group		-	and Syndicated Exclusivity Surcharge for Partially Distant
				nd Group	\$	-	Syndicated Exclusivity Surcharge for Partially Distant
				nd Group	\$	-	Exclusivity Surcharge for Partially Distant
				nd Group	\$	-	Surcharge for Partially Distant
				nd Group	\$	-	for Partially Distant
				nd Group	\$	-	Partially Distant
				nd Group	\$	-	
				nd Group	\$	-	Stations
				nd Group	\$	-	
				nd Group	\$	-	
				nd Group	\$	-	
				nd Group	\$	-	
				nd Group	\$	-	
				nd Group	\$	-	
Gross Receipts First Group \$		0.00	Gross Receipts Seco	nd Group	\$	0.00	
Sase Rate Fee First Group \$		0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ELEVENTH SUBS	SCRIBER GROUP				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE CA	ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
······································							
······································				<u> </u>			
······································					•		
Total DSEs		0.00	Total DSEs		11	0.00	
Gross Receipts Third Group \$		0.00	Gross Receipts Fourt	h Group	\$	0.00	
· · · ·			,	•			
Sase Rate Fee Third Group \$		0.00	Base Rate Fee Fourt	h Group	\$	0.00	

	EVISI	ON, INC					024965
				TE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	ID
COMMUNITY/ AREA	ENIH	SUBSCRIBER GROU	0	COMMUNITY/ AREA		1 SUBSCRIBER GRU	<u> 0</u>
	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs	4	<u> </u>	0.00	Total DSEs	!		0.00
ross Receipts First Group)	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group)	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
FIFTE	ENTH	SUBSCRIBER GROU	JP	;	SIXTEENTH	SUBSCRIBER GROU	JP
DMMUNITY/ AREA			^				
mmm			0	COMMUNITY/ AREA			0
ALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ALL SIGN D	SE	CALL SIGN				CALL SIGN	
ALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
CALL SIGN D	SE	CALL SIGN				CALL SIGN	
	SE	CALL SIGN				CALL SIGN	
otal DSEs		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs			DSE	CALL SIGN Total DSEs	DSE		0.00
CALL SIGN D CALL SIGN D Cotal DSEs Gross Receipts Third Group Base Rate Fee Third Group	p		DSE	CALL SIGN Total DSEs	DSE		0.00

SHELLSBURG O						S	024965	Name
SEV	ENTEENTH	COMPUTATION O SUBSCRIBER GRO	OUP	††	IGHTEENTH	RIBER GROUP I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
								Stations
								I
								I
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	
OOMMONT IT AREA				COMMONT IT ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

SHELLSBURG CABLEVIS	ION, INC				<u> </u>	YSTEM ID# 024965
			TE FEES FOR EAC			
	SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	,					
	,					
	, <u> </u>					
	•					
otal DSEs		0.00	Total DSEs	•		0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
	SUBSCRIBER GRO	UP 0	TWENT		SUBSCRIBER GROU	JP 0
OMMUNITY/ AREA		U	COMMUNITY AREA			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
ALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	
	CALL SIGN	DSE	Total DSEs		CALL SIGN	
Total DSEs	CALL SIGN			DSE	CALL SIGN	DSE
CALL SIGN DSE CALL SIGN DSE Contact DSEs Gross Receipts Third Group		0.00	Total DSEs	DSE		DSE
Fotal DSEs		0.00	Total DSEs	DSE		DSE

	ISION, INC					024965
	A: COMPUTATION (П			ID
COMMUNITY/ AREA	TH SUBSCRIBER GR	0	COMMUNITY/ ARE		1 SUBSCRIBER GROU	<u> </u>
JOWINIONT IT AREA			COMMONT IT ARE			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	cond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
TWENTY-SEVEN	TH SUBSCRIBER GR	OUP	TWE	NTY-EIGHTH	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	:A		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
otal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	ırth Group	\$	0.00

Name	YSTEM ID# 024965	S'						LEGAL NAME OF OWNE SHELLSBURG CA
	10			TE FEES FOR EACH				
9 Computati	0	SUBSCRIBER GROU	HIKTIETH	COMMUNITY/ AREA)P 0	SUBSCRIBER GROU	Y-NIN I H	COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I								
and								
Syndicate Exclusivit								
Surcharg								
for								
Partially								
Distant								
Stations								
	0.00		<u> </u>	T / 1 DOF	0.00			
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	-SECOND	THIRTY	JP	SUBSCRIBER GROU	TY-FIRST	THIR
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			1	Total DSEs	0.00		'	Total DSEs
	0.00							
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G

SHELLSBURG CABLEVI	BLE SYSTEM: BION, INC					YSTEM ID# 024965
			TE FEES FOR EAC			
THIRTY-THIRI COMMUNITY/ AREA	SUBSCRIBER GRO	OUP 0	COMMUNITY/ AREA		SUBSCRIBER GRO	<u>UP</u> 0
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	œ	0.00				0.00
	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
THIRTY-FIFT	1 SUBSCRIBER GRO	DUP	TH	IIRTY-SIXTH	SUBSCRIBER GRO	UP
THIRTY-FIFT				IIRTY-SIXTH		
THIRTY-FIFTI		DUP	TH	IIRTY-SIXTH		UP
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI OMMUNITY/ AREA CALL SIGN DSE	H SUBSCRIBER GRO	0 0	TH COMMUNITY/ AREA	IIRTY-SIXTH	SUBSCRIBER GRO	UP 0
THIRTY-FIFTI COMMUNITY/ AREA CALL SIGN DSE Cotal DSEs	H SUBSCRIBER GRO	DUP DSE	CALL SIGN	DSE	SUBSCRIBER GRO	DSE
THIRTY-FIFTI	H SUBSCRIBER GRO	DUP DSE DOUB DO	CALL SIGN CALL SIGN Total DSEs	DSE	CALL SIGN	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE

SHELLSBURG CABLEVI	BLE SYSTEM: SION, INC				S	YSTEM ID# 024965
			TE FEES FOR EAC			
	H SUBSCRIBER GRO				SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					-	
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
·						
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
			H			
	H SUBSCRIBER GRO				SUBSCRIBER GRO	
	H SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0
MMUNITY/ AREA	CALL SIGN		COMMUNITY/ AREA		SUBSCRIBER GROU	
DMMUNITY/ AREA		0		A		0
DMMUNITY/ AREA		0		A		0
DMMUNITY/ AREA		0		A		0
DMMUNITY/ AREA		0		A		0
OMMUNITY/ AREA		0		A		0
OMMUNITY/ AREA		0		A		0
OMMUNITY/ AREA		0		A		0
OMMUNITY/ AREA		0		A		0
OMMUNITY/ AREA		0		A		0
COMMUNITY/ AREA		0		A		0
OMMUNITY/ AREA		0		A		0
OMMUNITY/ AREA		0		A		0
CALL SIGN DSE		0		A		0
CALL SIGN DSE CALL SIGN DSE Total DSEs		DSE	CALL SIGN	DSE		DSE
COMMUNITY/ AREA	CALL SIGN	DSE DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE

 -	BLE SYSTEM: SION, INC				5	YSTEM ID# 024965	Name
BLOCK A	: COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
FORTY-FIRS	T SUBSCRIBER GRO		FOR	TY-SECOND	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	_
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
			5.122.5.5.1				Base Rate
							and
							Syndicate
							Exclusivi
							Surcharg
							for Partially
							Distant
							Stations
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-THIR	D SUBSCRIBER GRO	OUP	FOR	TY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	COMMUNITY/ ARE	DSE	CALL SIGN	O	
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	

SHELLSBURG CABLEV	ABLE SYSTEM: ISION, INC				<u> </u>	YSTEM ID# 024965
	: COMPUTATION C					
	H SUBSCRIBER GRO	OUP 0	ii e		H SUBSCRIBER GROU	
COMMUNITY/ AREA		U	COMMUNITY/ ARE			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	······					
otal DSEs		0.00	Total DSEs	•		0.00
Pross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
FORTY-SEVENT	H SUBSCRIBER GRO	DUP	FO	RTY-EIGHTH	I SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
otal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00

SHELLSBURG CABLEVIS	BLE SYSTEM: BION, INC				S	YSTEM ID# 024965
			TE FEES FOR EAC			
FORTY-NINTI COMMUNITY/ AREA	1 SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
					•	
otal DSEs	- 11	0.00	Total DSEs		!!	0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
	SUBSCRIBER GRO		II		SUBSCRIBER GROU	
	T SUBSCRIBER GRO	0 0	FIFT COMMUNITY/ AREA		SUBSCRIBER GRO	JP 0
MMUNITY/ AREA	CALL SIGN		II		SUBSCRIBER GROU	
MMUNITY/ AREA		0	COMMUNITY/ AREA			0
MMUNITY/ AREA		0	COMMUNITY/ AREA			0
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE		0	COMMUNITY/ AREA			0
CALL SIGN DSE CALL SIGN DSE Total DSEs		DSE	COMMUNITY/ AREA CALL SIGN	DSE		DSE
COMMUNITY/ AREA	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0.00

	ABLE SYSTEM: ISION, INC				S	YSTEM ID# 024965	Name
	A: COMPUTATION C		11				
	RD SUBSCRIBER GRO		H		SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	_
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
			0.122.0.0				Base Rate
							and
							Syndicate
							Exclusivi
							Surcharg
							for Partially
							Distant
							Stations
					H		
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTY-FIF	TH SUBSCRIBER GRO	OUP		FIFTY-SIXTH	SUBSCRIBER GROU	UP	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		····					
otal DSEs		0.00	Total DSEs			0.00	
	S			rth Group	\$	0.00	
Fotal DSEs Gross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$		

SHELLSBURG CABLEVIS	BLE SYSTEM: BION, INC					YSTEM ID# 024965
			TE FEES FOR EAC	H SUBSCR	IBER GROUP	
	I SUBSCRIBER GRO		i i		SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	<i>\</i>		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
	\$	0.00	Base Rate Fee Seco		\$	0.00
FIFTY-NINT	SUBSCRIBER GRO	OUP		SIXTIETH	\$ SUBSCRIBER GRO	UP
FIFTY-NINT			Base Rate Fee Second COMMUNITY/ AREA	SIXTIETH	<u> </u>	
FIFTY-NINTI		OUP		SIXTIETH	<u> </u>	UP
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTH OMMUNITY/ AREA	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTH OMMUNITY/ AREA	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
FIFTY-NINTI	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
CALL SIGN DSE	I SUBSCRIBER GRO	0 0	COMMUNITY/ AREA	SIXTIETH	SUBSCRIBER GRO	UP 0
COMMUNITY/ AREA	I SUBSCRIBER GRO	DUP DSE	COMMUNITY/ AREA	DSE	SUBSCRIBER GRO	DSE
FIFTY-NINTH COMMUNITY/ AREA CALL SIGN DSE	CALL SIGN	DUP DSE DOME DO	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GROUND CALL SIGN	DSE DSE DSE DSE DSE DSE DSE DSE DSE DSE

LEGAL NAME OF OW SHELLSBURG O						S	024965	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
		=						for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
S	IXTY-THIRD	SUBSCRIBER GRO)UP	SIX	TY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
		=						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

	SION, INC					YSTEM ID# 024965
			TE FEES FOR EACH			
SIXTY-FIFTE COMMUNITY/ AREA	I SUBSCRIBER GRO	0 0	11		I SUBSCRIBER GROU	<u>JP</u>
		U	COMMUNITY/ AREA			U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	H					
	+					
	# 					
otal DSEs	!!	0.00	Total DSEs		!!	0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
SIXTY-SEVENTH	SUBSCRIBER GRO	UP	SIX	TY-FIGHTH	I SUBSCRIBER GROU	IP
			ii .	TT LIGHTI	T OODOOTTIDEIT OITOT	J1
MMUNITY/ AREA		0	COMMUNITY/ AREA		T GODGONDEN GNOC	0
	CALL SIGN		COMMUNITY/ AREA		CALL SIGN	
		0				0
		0				0
		0				0
		0				0
		0				0
		0				0
		0				0
		0				0
		0				0
		0				0
		0				0
		0				0
CALL SIGN DSE		0				0
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE
CALL SIGN DSE CALL SIGN DSE Fotal DSEs Gross Receipts Third Group	CALL SIGN	DSE DSE	CALL SIGN Total DSEs	DSE	CALL SIGN	DSE DSE

	ISION, INC					YSTEM ID# 024965
	A: COMPUTATION C					15
	TH SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		I SUBSCRIBER GROU	JP 0
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
SEVENTY-FIR:	ST SUBSCRIBER GRO	DUP	SEVEN	TY-SECONE	SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
otal DSEs	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00

SHELLSBURG CABLEVIS	BLE SYSTEM: BION, INC					YSTEM ID# 024965
			TE FEES FOR EACH			
SEVENTY-THIRE COMMUNITY/ AREA	SUBSCRIBER GRO	<u>UP</u> 0	SEVENT		SUBSCRIBER GROU	<u>UP</u> 0
COMMUNITY/ AREA		U				U
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
oss Receipts First Group \$ 0.00			Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco		\$	0.00
	I SUBSCRIBER GRO	UP	SEVE	NTY-SIXTH	SUBSCRIBER GROU	UP
		•				
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	
	CALL SIGN					0
	CALL SIGN					0
	CALL SIGN					0
	CALL SIGN					0
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	CALL SIGN					0
	CALL SIGN					0
CALL SIGN DSE	CALL SIGN					0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE		DSE
CALL SIGN DSE CALL SIGN DSE Fotal DSEs Gross Receipts Third Group		0.00	CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE
CALL SIGN DSE		0.00	CALL SIGN Total DSEs	DSE h Group	CALL SIGN	0 DSE

SHELLSBURG CABL		E SYSTEM: DN, INC				S	931EM ID# 024965	
				TE FEES FOR EAC				
	ENTH S	SUBSCRIBER GROU			ENTY-EIGHTH SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·····		0	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
tal DSEs 0.00				Total DSEs	•		0.00	
Gross Receipts First Group	ross Receipts First Group \$ 0.00			Gross Receipts Seco	ond Group	\$	0.00	
ase Rate Fee First Group)	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVENTY-N	NINTH S	SUBSCRIBER GROU	JP		EIGHTIETH	1 SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····							
			0.00	T			0.00	
				Total DSEs			0.00	
otal DSEs			0.00					
otal DSEs Gross Receipts Third Grou	p	\$	0.00	Gross Receipts Four	th Group	\$	0.00	

Total DSEs	EIGI UNITY/ AREA	ITY-FIRST		UP						
COMMUNITY/ AREA CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN CALL	UNITY/ AREA		SUBSCRIBER GRO		EIGH	エヘ るたししがし				
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Siross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 sase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 EIGHTY-THIRD SUBSCRIBER GROUP EIGHTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA										
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Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 EIGHTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA										
siross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 EIGHTY-THIRD SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA										
Base Rate Fee Second Group \$ 0.00 EIGHTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	SEs		! !	0.00	Total DSEs		!!	0.00		
EIGHTY-THIRD SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA				0.00	Gross Receipts Sec	ond Group	\$	0.00		
EIGHTY-THIRD SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA										
OMMUNITY/ AREA COMMUNITY/ AREA								0.00		
		TY-THIRD	SUBSCRIBER GRO		ii .		SUBSCRIBER GRO			
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CA	JNITY/ AREA			0	COMMUNITY/ ARE	4		0		
	SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		····								
otal DSEs 0.00 Total DSEs 0.				0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.	SEs	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.			s	0.00	Base Rate Fee Four	th Group	\$	0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
EIG	HTY-FIFTH	COMPUTATION O SUBSCRIBER GRO	UP	TE FEES FOR EACH SUBSCRIBER GROUP EIGHTY-SIXTH SUBSCRIBER GROUP				9
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	E CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE				DSE	of	
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
		_						Distant
								Stations
Total DSEs 0.00			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		Ħ		SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxe	s above.	\$		

SHELLSBURG CABLEVI	SION, INC				<u> </u>	YSTEM ID# 024965
	: COMPUTATION O		TE FEES FOR EAC			
EIGHTY-NINT COMMUNITY/ AREA	H SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		I SUBSCRIBER GROU	<u>JP</u> 0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group \$ 0.00			Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group \$ 0.00			Base Rate Fee Sec	ond Group	\$	0.00
NINETY-FIRS	T SUBSCRIBER GRO)UP	NINE	TY-SECOND	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
otal DSEs cross Receipts Third Group		0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00

SHEELODONG GABLEY	ISION, INC					024965
	A: COMPUTATION C					ID
NINETY-THII COMMUNITY/ AREA	RD SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		H SUBSCRIBER GRO	<u>JP</u> 0
JOWINIONIT IT AREA			OOMWONT 17 ARE			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
otal DSEs		0.00	Total DSEs			0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
sse Rate Fee First Group \$ 0.00			Base Rate Fee Sec	ond Group	\$	0.00
NINETY-FIF	TH SUBSCRIBER GRO	OUP	N	INETY-SIXTH	H SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ AREA 0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00
Bross Receipts Third Group	·			 	·	
cross Receipts Third Group						

SHELLSBURG CABLEVIS	LE SYSTEM: ION, INC					YSTEM ID# 024965
			TE FEES FOR EACH			
	SUBSCRIBER GROU		Ħ		I SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	COMMUNITY/ AREA 0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		0.00				2.22
otal DSEs	0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00
NINETY-NINTH	SUBSCRIBER GROU	JP	ONE HI	JNDREDTH	I SUBSCRIBER GRO	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA 0			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	-					
	,					
otal DSEs		0.00	Total DSEs	-		0.00
ross Receipts Third Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00
	I		Base Rate Fee Fourt			0.00

EGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965									
				TE FEES FOR EACH					
	D FIRST	SUBSCRIBER GROU		ONE HUNDRE	P 0	9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
		_						Base Rate Fee	
								and	
						_		Syndicated Exclusivity	
								Surcharge	
						_		for	
								Partially	
								Distant	
								Stations	
						_			
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Second		\$	0.00		
ONE HUNDRE	D THIRD	SUBSCRIBER GROU	IP	ONE HUNDRE	D FOURTH	SUBSCRIBER GROU	Р		
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	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			riber group	as shown in the boxes	above.	\$			

CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE GALL SIGN DS	0.00 0.00			
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CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE DATA DE DE DATA DE DE DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DATA DE DA	DSE			
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Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
Stross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
Stross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
Siross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
\$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
Toss Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA	0.00			
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
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\$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA	0.00			
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA				
ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA O O O O O O O O O O O O O	0.00			
ONE HUNDRED SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA COMMUNITY/ AREA OCOMMUNITY/ AREA	0.00			
OMMUNITY/ AREA COMMUNITY/ AREA	0.00			
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	COMMUNITY/ AREA 0			
	DSE			
otal DSEs Total DSEs	0.00			
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00			
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$				
	0.00			

SHELLSBURG CABLEVIS	BLE SYSTEM: BION, INC					YSTEM ID# 024965
			TE FEES FOR EAC			
ONE HUNDRED NINTH	I SUBSCRIBER GRO		1		1 SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	······		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs	 !		0.00
ross Receipts First Group \$ 0.00			Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
ONE HUNDRED ELEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP
DMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	.					
otal DSEs		0.00	Total DSEs			0.00
			Gross Receipts Four	th Group	\$	0.00
	\$	() ()()		Oroup	<u>*</u>	3.00
ross Receipts Third Group	\$	0.00	Cross reserves a			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
BI ONE HUNDRED THII				TE FEES FOR EAC			LIP	
COMMUNITY/ AREA	XILLINIII	SOBSCITIBLIT GROC	0	ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				9
CALL SIGN	CALL SIGN DSE CALL SIGN DS			CALL SIGN	DSE	CALL SIGN	DSE	Computation of
		-						Base Rate Fee
								and Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs 0.00				Total DSEs			0.00	
Gross Receipts First 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	
ONE HUNDRED FI	FTEENTH	SUBSCRIBER GROU	JP	11		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							• • • •	
Total DSEs	D	•	0.00	Total DSEs	4h Or	•	0.00	
Gross Receipts Third (∍roup	\$	0.00	Gross Receipts Four	ın Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

SHELLSBURG CABLEV	ABLE SYSTEM: ISION, INC				S	024965	
	A: COMPUTATION C						
NE HUNDRED SEVENTEEN	TH SUBSCRIBER GRO		ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
COMMUNITY/ AREA		0	оничного полительного полительн				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Fotal DSEs		0.00	Total DSEs		!!	0.00	
						-	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED NINTEEN	TH SUBSCRIBER GRO	DUP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GRO	UP	
	TH SUBSCRIBER GRO	OUP 0	ONE HUNDRED COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	
			111		SUBSCRIBER GRO		
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	

SHELLSBURG CABLEV	BLE SYSTEM: SION, INC				S	YSTEM ID# 024965	
	: COMPUTATION C						
ONE HUNDRED TWENTY-FIRS	ST SUBSCRIBER GRO	OUP 0	 		SUBSCRIBER GROUP		
COMMUNITY/ AREA		U	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs	•		0.00	
cross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWENTY-THIF	D SUBSCRIBER GROU	JP	ONE HUNDRED TWE	ENTY-FOURTH	H SUBSCRIBER GROUF)	
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_	
otal DSEs		0.00	Total DSEs			0.00	
otal DSEs cross Receipts Third Group	\$	0.00	Total DSEs Gross Receipts Fou	ırth Group	\$	0.00	

SHELLSBURG CABLEVIS	BLE SYSTEM: BION, INC				S	YSTEM ID# 024965		
			TE FEES FOR EAC					
ONE HUNDRED TWENTY-FIFTH	I SUBSCRIBER GROUI		i i		SUBSCRIBER GROUP			
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	. 📙							
otal DSEs		0.00	Total DSEs			0.00		
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
HUNDRED TWENTY-SEVENTH	SUBSCRIBER GROUI		H		SUBSCRIBER GROUP			
OMMUNITY/ AREA		0	COMMUNITY/ AREA					
						0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
ALL SIGN DSE	CALL SIGN				CALL SIGN			
ALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
CALL SIGN DSE	CALL SIGN				CALL SIGN			
	CALL SIGN				CALL SIGN			
otal DSEs	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00	Total DSEs	DSE		DSE		
CALL SIGN DSE Cotal DSEs Gross Receipts Third Group Base Rate Fee Third Group		0.00	Total DSEs	DSE		DSE		

BLOCK A: ONE HUNDRED TWENTY-NINTH COMMUNITY/ AREA CALL SIGN DSE			TE FEES FOR EAC				
COMMUNITY/ AREA			ONE HUNDRE	D THIRTIFTH	LOUDOODIDED ODOLIE		
	CALL SIGN	U	COMMUNITY (A DE		1 SUBSCRIBER GROUP		
CALL SIGN DSE	CALL SIGN		COMMUNITY/ AREA 0				
		DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	_			****			
	_						
	_						
otal DSEs	<u> </u>	0.00	Total DSEs		!!	0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
·							
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED THIRTY-FIRST	SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		
OMMUNITY/ AREA		0	COMMUNITY/ AREA	\		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs	-	0.00	Total DSEs			0.00	
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	

SHELLSBURG CABLEVIS	BLE SYSTEM: BION, INC				S	YSTEM ID# 024965	
			TE FEES FOR EAC				
ONE HUNDRED THIRTY-THIR	D SUBSCRIBER GROU		††		I SUBSCRIBER GROUF		
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					-		
otal DSEs		0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED THIRTY FIET							
	H SUBSCRIBER GROU		Ħ		I SUBSCRIBER GROUP		
	H SUBSCRIBER GROU	0	ONE HUNDRED TO		I SUBSCRIBER GROUP	0	
DMMUNITY/ AREA	CALL SIGN		Ħ		SUBSCRIBER GROUF		
MMUNITY/ AREA		0	COMMUNITY/ AREA			0	
MMUNITY/ AREA		0	COMMUNITY/ AREA			0	
DMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE		0	COMMUNITY/ AREA			0	
CALL SIGN DSE CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	
COMMUNITY/ AREA	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	
CALL SIGN DSE CALL SIGN DSE	CALL SIGN	DSE DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	CALL SIGN	0 DSE	

LEGAL NAME OF OWNE SHELLSBURG CA						S	YSTEM ID# 024965	Name
				TE FEES FOR EACH				
ONE HUNDRED THIRTY	-SEVENTH	SUBSCRIBER GROUP			TY-EIGHTH	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 Fe
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
						•		
Total DSEs	1	-	0.00	Total DSEs	!	11	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon		\$	0.00	
	RTY-NINTH	SUBSCRIBER GROUP		ii e	FORTIETH	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	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	above.	\$		

SHELLSBURG CABLEVI	BLE SYSTEM: SION, INC				S	024965	
			TE FEES FOR EAC				
ONE HUNDRED FORTY-FIRS	T SUBSCRIBER GROU		Ħ		SUBSCRIBER GROUP		
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs		0.00	Total DSEs		<u> </u>	0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORTY-THIR	,	P	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
ONE HUNDRED FORTY-THIR	,			RTY-FOURTH			
ONE HUNDRED FORTY-THIR	,	P	ONE HUNDRED FO	RTY-FOURTH)	
ONE HUNDRED FORTY-THIR	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR OMMUNITY/ AREA CALL SIGN DSE	D SUBSCRIBER GROU	P 0	ONE HUNDRED FO	RTY-FOURTH	I SUBSCRIBER GROUF	0	
ONE HUNDRED FORTY-THIR COMMUNITY/ AREA CALL SIGN DSE	D SUBSCRIBER GROU	DSE	ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN	DSE	I SUBSCRIBER GROUF	DSE	
COMMUNITY/ AREA	CALL SIGN	DSE DSE O.00	ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN Total DSEs	RTY-FOURTH A DSE	CALL SIGN	DSE DSE O.00	

SHELLSBURG C						S	024965	Name
E	BLOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FO	ORTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED I	FORTY-SIXTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
						 		Distant
						-		Stations
Total DSEs			0.00	Total DSEs		Ц	0.00	
Gross Receipts First (Group	•	0.00	Gross Receipts Sec	and Croup	\$	0.00	
Gloss Receipts Filst	Jioup	\$	0.00	Gloss Receipts Sect	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	ORTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER SHELLSBURG CA						SY	STEM ID# 024965	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FORT						SUBSCRIBER GROUP)	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
3.122.5.5.1		0.122.11						Base Rate Fee
		-						and
								Syndicated
		_						Exclusivity
								Surcharge
								for
								Partially
						_		Distant
		-						Stations
		•						
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FIFT		SUBSCRIBER GROU	'			SUBSCRIBER GROUF	•	
COMMUNITY/ AREA	1-1 11(01	OODOONIDEN ONOC	0	COMMUNITY/ AREA	I-OLOGIND		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL GIGIN	DOL	CALL GIGIT	DOL	OALL OION	DOL	OALL GIGIN	DOL	
								
		-						
						_		
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	s		

SHELLSBURG CABLEVIS	BLE SYSTEM: BION, INC				S	YSTEM ID# 024965
			TE FEES FOR EAC			
ONE HUNDRED FIFTY-THIRE COMMUNITY/ AREA	SUBSCRIBER GRO	UP 0	ONE HUNDRED FIF		1 SUBSCRIBER GROU	<u>JP</u> 0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	.					
	-					
otal DSEs	-	0.00	Total DSEs	•		0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00
ONE HUNDRED FIFTY-FIFTH	I SUBSCRIBER GRO	UP	ONE HUNDRED F	FIFTY-SIXTH	1 SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	.					
otal DSEs		0.00	Total DSEs			0.00
	\$	0.00	Gross Receipts Four	th Group	\$	0.00
Fross Receipts Third Group					-	
cross Receipts Third Group						

LEGAL NAME OF OWNE						S	024965	Name
Bl	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FIFTY				H		SUBSCRIBER GROUP)	Ω
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		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
T			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-NINTH	SUBSCRIBER GROUP)	ONE HUNDS	RED SIXTIETH	SUBSCRIBER GROUP)	
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 Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	очр	<u></u>	3.00	Dusc Rate 1 66 i Oui	C/Oup	<u> </u>	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965									
			DMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
		SUBSCRIBER GRO				SUBSCRIBER GRO		9		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate F		
								and		
								Syndicated		
								Exclusivity		
								Surcharge		
								for Partially		
								Distant		
								Stations		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00			
		SUBSCRIBER GRO				SUBSCRIBER GRO				
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Γotal DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
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Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
				II						
Base Rate Fee: Add	the base rat	e fees for each sub	scriber group	as shown in the boxe	s above.					
inter here and in blo			J P		•	\$	0.00			

NI	YSTEM ID# 024965	S'						LEGAL NAME OF OWNE SHELLSBURG CA
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9		SUBSCRIBER GROU	SIXTH	OOMAN INTERVIEW		SUBSCRIBER GROU	FIFTH	000000000000000000000000000000000000000
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00	_		Total DSEs	0.00			Total DSEs
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Name	YSTEM ID# 024965							LEGAL NAME OF OWNE SHELLSBURG CA
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9		SUBSCRIBER GROU	TENTH	0014411117777		SUBSCRIBER GROU	NINTH	001444114
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon	JP 0	SUBSCRIBER GROU	LEVENTH	EI COMMUNITY/ AREA
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SHELLSBURG CABLEVI	BLE SYSTEM: BION, INC				S	YSTEM ID# 024965
	COMPUTATION O		ATE FEES FOR EACH		RIBER GROUP	JP
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
al DSEs	Ш	0.00	Total DSEs		Ш	0.00
otal DSEs	•	0.00		nd Cuarra	•	0.00
oss Receipts First Group	\$	0.00	Gross Receipts Seco	na Group	\$	0.00
se Rate Fee First Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00
•	\$ SUBSCRIBER GRO	DUP			\$ SUBSCRIBER GRO	
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SHELLSBURG CABLEVI	SION, INC					YSTEM ID# 024965
	: COMPUTATION C		ATE FEES FOR EAC		RIBER GROUP	LID
COMMUNITY/ AREA	n Subscriber Gro	0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs	Щ	0.00	Total DSEs			0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00
1033 Neccipis i iist Oloup	4	0.00	Oloss Receipts occe	ла Огоар	Ψ	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
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EGAL NAME OF OWNER OF SHELLSBURG CABI						S	YSTEM ID# 024965	Name
				TE FEES FOR EACH				
	FIRST S	SUBSCRIBER GROU			Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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otal DSEs	Ш		0.00	Total DSEs		Ц	0.00	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
otal DSEs	up	\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00	
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HELLSBURG CABLEVI	BLE SYSTEM: SION, INC				_	024965
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ross Receipts First Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00
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NI	YSTEM ID# 024965	S						LEGAL NAME OF OWNE SHELLSBURG CA
				TE FEES FOR EACH				
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Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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AL NAME OF OWNER OF CABLE SYSTEM: ELLSBURG CABLEVISION, INC				S	024965	Name
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EGAL NAME OF OWNER OF CA SHELLSBURG CABLEVI					3	YSTEM ID# 024965
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LEGAL NAME OF OWNER OF CA SHELLSBURG CABLEVI	SION, INC					024965	
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LEGAL NAME OF OWNER SHELLSBURG CAI						SY	STEM ID# 024965	Name
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NI	YSTEM ID# 024965	S`						SHELLSBURG CA
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Name	YSTEM ID# 024965							SHELLSBURG CA	
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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 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 Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 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 Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH 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 Second Group **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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 Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. THIRTEENTH SUBSCRIBER GROUP FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 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 Second Group FIFTEENTH SUBSCRIBER GROUP SIXTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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 Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 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 Second Group NINEENTH SUBSCRIBER GROUP TWENTYTH 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 Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. TWENTY-FIFTH SUBSCRIBER GROUP TWENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group TWENTY-SEVENTH SUBSCRIBER GROUP TWENTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

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FORM SA3E. PAGE 20.

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