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
07/28/2023	\$ ALLOCATION NUMBER

Return completed workbook by email to:

### coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period	2023/1				
B	Instructions:     Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation     List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting Check here if this is the system's first filing. If not, enter the system's ID  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  Midstate Communications Inc.	ess of the cable system on the last day of to nunting period	em he accounting period should s	ubmı <u> </u>	34851
					120231
				34851	2023/1
	PO Box 48 Kimball, SD 57355				
С	INSTRUCTIONS: In line 1, give any business or trade names used to it names already appear in space B. In line 2, give the mailing address of				
System	1 IDENTIFICATION OF CABLE SYSTEM:		g.,,		
	MAILING ADDRESS OF CABLE SYSTEM:				
	2 (Number, street, rural route, apartment, or suite number)				
	(City, town, state, zip code)				
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page	1b
Area	with all communities.	T			
Served	CITY OR TOWN	STATE			
First Community	WHITE LAKE	SD			
j	Below is a sample for reporting communities if you report multiple cha	STATE	pace G.  CH LINE UP	SUB	GRP#
	Alda	MD	A A	-	1
Sample	Alliance	MD	В		2
	Gering	MD	В	;	3

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
Midstate Communications Inc.			34851						
Midstate Communications inc.			34031						
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first 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.									
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hom below the identified city or town.	e parks should be	reported in paren	theses						
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-comm	a subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	]					
WHITE LAKE	SD			First					
CHAMBERLAIN	SD			Community					
PUKWANA KIMBALL	SD SD								
OACOMA	SD								
STICKNEY	SD			See instructions for					
PLATE	SD			additional information on alphabetization.					
GEDDES DELMONT	SD SD			on alphabetization.					
ACADEMY	SD								
NEW HOLLAND	SD			Add rows as necessary.					
FT THOMPSON  CANNIVALLEY	SD			rida rows as necessary.					
GANN VALLEY	SD								

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:

Midstate Communications Inc.

SYSTEM ID#

34851

## Ε

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2					
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	F	RATE		
Residential:								
<ul> <li>Service to first set</li> </ul>	332	\$ 58.45	DIGITAL	1,564	\$	66.45		
<ul> <li>Service to additional set(s)</li> </ul>			LOCAL CHOICE	56	\$	22.95		
<ul> <li>FM radio (if separate rate)</li> </ul>								
Motel, hotel								
Commercial								
Converter								
<ul> <li>Residential</li> </ul>								
Non-residential								
					<b>†</b>			

## F

Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	F	CATEGORY OF SERVICE	Ξ !	RATE	
Continuing Services:		Installation: Non-residential					
• Pay cable		Motel, hotel					
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial			НВО	\$	19.00
Fire protection		• Pay cable	SHOWTIME	\$	19.00		
•Burglar protection		Pay cable-add'l channel			CINEMAX	\$	12.45
Installation: Residential		Fire protection			STARZ/ENCORE	\$	12.45
• First set	\$ 65.00	Burglar protection					
Additional set(s)		Other services:					
• FM radio (if separate rate)		Reconnect	\$	20.00			
Converter		Disconnect					
		Outlet relocation	\$	65.00			
		Move to new address	\$	40.00			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Midstate Communications Inc. 34851 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **KPLO** 6.1 Ν No **RELIANCE, SD** UTV 6.2 I-M No RELIANCE, SD See instructions for additional information **KPLO-DT4** N-M 6.4 No **RELIANCE, SD** on alphabetization. 5.1 Ν No KDLV-TV MITCHELL, SD 5.2 Ν No KDLV-SD MITCHELL, SD **KPRY-TV** 4 Ν No PIERRE, SD KSFY-DT2 13.2 I-M No PIERRE, SD KSFY-DT3 13.3 I-M No PIERRE, SD 7 Ν **KTTW** No SIOUX FALLS, SD KTTW-DT2 7.2 I-M No SIOUX FALLS, SD 2 KUSD-TV Ε Yes 0 VERMILLION, SD **KUSD-DT2** 2.2 E-M 0 VERMILLION, SD Yes **KUSD-DT3** 2.3 E-M Yes 0 VERMILLION, SD

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Midstate Comm	nunications	Inc.			34851	ramo
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Program Program 1: List the station here, basis. For further ir in the paper SA3 for Column 1: List ead each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 5: If you cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even the system during it ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e	y television standard y television y te	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	.9	•	•	•		
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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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Midstate Comr	nunications	Inc.			34851	Hamo
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried t 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 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 were entered "Ye entering the lecast), "E" (for neese terms, see pation is outside ice area, see pation on a part-ting sion of a distant the entered into on a primary trans simulcasts, also ree categories e location of ea	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the station account of the station. Whether the station. Whether the station. Whether the station account of the local servers in column on during the same basis becard multicast stream or before Jumitter or an associated of the station. For the station.	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the fermion	(1) stations carried to carriage of certa- (1(e)(2) and (4))]; as carried by your of the Special Statement of both on a substiffus, see page (v) on program service the er-the-air designation of the television statistical of the television statist	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 char	inei iine-ups,	use a separate	space G for each	channel line-up.	
1. CALL SIGN	2. B'CAST CHANNEL	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Midstate Comr	nunications	Inc.			34851	Hamo
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried t 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 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 rentered "Ye entering the lecast), "E" (for neese terms, see pation is outside ice area, see pation on a part-ting sion of a distant the entered into on a primary trans simulcasts, also ree categories e location of ea	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the station account of the station. Whether the station. Whether the station. Whether the station account of the local servers in column on during the same basis becard multicast stream or before Jumitter or an associated of the station. For the station.	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		•	•	спаппетше-ир.	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Midstate Comr	nunications	Inc.			34851	rano
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 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 even the system during it ions in effect or 6.61(e)(2) and (6.51(e)(2) and (6.51(e	y television standard y television y te	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	Primary Transmitters: Television
Note: If you are utilizing	ig manipio onai	•	•	•	onarmor imo 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	
	22					

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Midstate Comr	nunications	Inc.			34851	ramo
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
In General: In space carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give th its community of licens on which your cable s Column 3: Indicate educational station, by (for independent multi For the meaning of the Column 5: If you cable system carried t 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 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 rentered "Ye entering the lecast), "E" (for neese terms, see pation is outside ice area, see pation on a part-ting sion of a distant the entered into on a primary trans simulcasts, also ree categories e location of ea	y television state he accounting in June 24, 194, or 76.63 (red in the next prespect to any ations, or auth G—but do list titute basis. ace I, if the state erning substitions in a station account of the station account of the station. Whether the station. Whether the station. Whether the station account of the local servers in column on during the same basis becard multicast stream or before Jumitter or an associated of the station. For the station.	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		•	•	спатнетине-ир.	
1. CALL SIGN	2. B'CAST CHANNEL	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	TAGINIDEIX	SIMION		(ii Distailt)		

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
Midstate Comr	nunications	Inc.			34851	
Midstate Communications Inc.  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						
tion "E" (exempt). For explanation of these th <b>Column 6:</b> Give th	simulcasts, also nree categories e location of ea Canadian statio	o enter "E". If , see page (v) ch station. Fo ons, if any, givennel line-ups, CHANN	you carried the o of the general in or U.S. stations, I e the name of th	channel on any oti instructions located list the community ne community with space G for each	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	-	-		, ,		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name	
Midstate Comn	nunications	Inc.			34851		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
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Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the		
<b>Note:</b> If you are utilizing				•			
		CHANN	EL LINE-UP	AH			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	o. 200/men en en men		
	NUMBER	STATION		(If Distant)			
		<b> </b>					

FORM SA3E. PAGE 3.						1	
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Midstate Comm	nunications	Inc.			34851	ramo	
PRIMARY TRANSMITT	ERS: TELEVISIO	N					
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Note. If you are utilizing	ig multiple chai		•		спатнетине-ир.		
1. CALL SIGN	2. B'CAST CHANNEL	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
	TAGINIDEIX	517111011		(ii Distailt)			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Midstate Comr	nunications	Inc.			34851	rano	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON					
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Troto: II you are utilizii	ig manipio onai	•	•	•	onarmor imo up.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						_	
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Midstate Comr	nunications	Inc.			34851	Hamo	
PRIMARY TRANSMITT	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4)]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  List the station here and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "E" (for independent							
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
				`,		1	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
Midstate Comn	nunications	Inc.			34851			
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), 76.63(e)(2) and (4), 76.63(e								
<b>Note:</b> If you are utilizing				•				
-		CHANN	EL LINE-UP	AL				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name		
Midstate Comm	nunications	Inc.			34851			
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as 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), "I" (for independent), "I-M" (fo								
planation of local servi- Column 5: If you had cable system carried the carried the distant stating For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the	ce area, see pa ave entered "Ye ne distant static ion on a part-tir ion of a distant entered into or a primary transi simulcasts, also aree categories,	age (v) of the ges" in column on during the ame basis becamulticast streen or before Jumitter or an aspect of the column of the	general instruction 4, you must construct to accounting period ause of lack of aream that is not some 30, 2009, be association repressivou carried the conformation of the general in	ions located in the mplete column 5, sod. Indicate by entictivated channel cubject to a royalty stween a cable syssenting the primar channel on any others.	paper SA3 form. stating the basis on which your ering "LAC" if your cable system sapacity. 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.			
	Canadian statio	ns, if any, give	e the name of th	ne community with	to which the station is licensed by the which the station is identifed. 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.						1	
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Midstate Comr	nunications	Inc.			34851	ramo	
PRIMARY TRANSMITT	ERS: TELEVISIO	N					
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
				`,		1	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
Midstate Comn	nunications	Inc.			34851			
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), 07.61(e)(2) and (4), 07.61(e								
<b>Note:</b> If you are utilizing				•				
	<u> </u>	CHANN	EL LINE-UP	ΔΩ	<u> </u>			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Midstate Comn	nunications	Inc.			34851		
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
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Note: If you are utilizing	ig 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		

FORM SA3E. PAGE 3.						1
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Midstate Comr	nunications	Inc.			34851	
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Column 6: Give the	e location of ea Canadian statio	ch station. Fo ns, if any, givennel line-ups,	r U.S. stations, e the name of th	list the community ne community with space G for each	to which the station is licensed by the which the station is identifed.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name
Midstate Comn	nunications	Inc.			34851	- Tunio
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
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Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community		
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
	1	CHANN	EL LINE-UP	AR		
1. CALL		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NOMBLIX	OTATION		(II Distant)		

FORM SA3E. PAGE 3.						1	
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
Midstate Comr	nunications	Inc.			34851	ramo	
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,			•	•	<u>'</u>		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
				( 2.5.6111)			

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
Midstate Comn	nunications	Inc.			34851			
PRIMARY TRANSMITTERS: TELEVISION								
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Note: If you are utilizing				•				
		CHANN	EL LINE-UP	AT				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.						_		
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
Midstate Comr	nunications	Inc.			34851	Hamo		
PRIMARY TRANSMITT	ERS: TELEVISIO	N						
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Note: II you are utilizir	ig multiple char	inei iine-ups,	use a separate	space G for each	channel line-up.			
1. CALL SIGN	2. B'CAST CHANNEL	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
	TAGINIDEIX	STATION		(II DISTAIL)		1		

FORM SA3E. PAGE 3.						_		
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
Midstate Comr	nunications	Inc.			34851	Hamo		
PRIMARY TRANSMITT	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 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 pager SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, wRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "E" (for noncommercial educational),								
,			•		·			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	1	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
				:- ::-/		1		

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name		
Midstate Comn	nunications	Inc.			34851			
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 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 asociated with a station according to its over-the-air designation. For example, report multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as sociated with a station according to its over-the-air designation, for example, report multicast stream as sociated with a station according to its over-the-air designation. For example, report 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 broadca								
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the			
<b>Note:</b> If you are utilizing				•	which the station is identifed. channel line-up.			
		CHANN	EL LINE-UP	AW				
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	o. 200/men en en men			
	NUMBER	STATION		(If Distant)				
		<b> </b>						

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 34851 Midstate Communications 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  Midstate Communicat		ГЕМ:			:	34851	Name			
SUBSTITUTE CARRIAGE							ı			
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regula	ations, or authorizations.	For a further	Substitute Carriage:			
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", leave the rest of this page blank. If your answer is "Yes," you must complete the program										
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ce, please a of every no distant stati gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static atth and day we "5/7." es when the Example: a er "R" if the and regulatic ogramming	am on a separa attach additionantwork televion and that your authorization at use general of the separation of the separation of the separation of the separation broadca on's location (the separation of the sep	al pages. ision program (substitute pur cable system substitute s. See page (vi) of the geneategories 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 purposed by a system from 6:01:  was substituted for programing the accounting period	rogram) that, d for the progeral instructio "basketball". lo." m. station is licer station is identification is identification. Use cable system. 15 p.m. to 6:2 mming that ye; enter the let	during the accounting ramming of another stans located in the paper List specific program  nsed by the FCC or, in stiffied). numerals, with the more List the times accurate 8:30 p.m. should be our system was require ter "P" if the listed pro	nth ely				
	NI IRSTITI IT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRED	7. REASON				
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION				
	<b></b>									
					_					
					_					
					_					
					_					
					_					

ACCOUNTING PERIOD: 2023/1 FORM SA3E. PAGE 6.

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
Midstate Communications Inc.
SYSTEM ID#

## J

### Part-Time Carriage Log

### **PART-TIME CARRIAGE LOG**

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

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

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

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

				AND HOURS C					
CALL SIGN	WHEN CARRIAGE OCCURRED HOURS			CALL SIGN	1 WHI	WHEN CARRIAGE OCCURRED			
	DATE	FROM	OUR	TO		DATE	FROM	HOURS FROM	
			_					_	
			_					_	
			_					_	
			_						
			_						
			_					_	
			_					_	
			-=-						
			-=-						
			-=-						

	SA3E. PAGE 7. AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Nama					
Mic	Istate Communications Inc.		34851	Name					
Install a all a (as pag	Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  ST79,929.43 IMPORTANT: You must complete a statement in space P concerning gross receipts.  (Amount of gross receipts)								
• Cor • Cor • If you fee • If you acc	COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  Complete block 1, showing your minimum fee.  Complete block 2, showing whether your system carried any distant television stations.  If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 3 below.	e entered on I	ine 1 of						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered on line	e 2 in block						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered	d on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.	e is 1.064 per	cent of the						
	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.	\$	779,929.43						
	This is your minimum fee.	\$	8,298.45						
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 colui "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting per  X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and complete the DSE schedule.	mn 4, you mus	st check						
Block 3	Line 1. <b>BASE RATE FEE</b> : 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	\$	6,223.84						
	Line 2. <b>3.75 Fee:</b> 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	\$	6,223.84						
Block 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE:</b> 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	\$	8,298.45	Cable systems					
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.  Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)								
	Line 4. <b>FILING FEE</b>								
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here	\$	9,023.45	appropriate form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. general instructions located in the paper SA3 form for more information.)	(See page (i) o	of the	auditional lees.					

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
Name	Midstate Communications Inc. 34851										
	CHANNELS										
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations										
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.										
Channels	1. Fator the total number of shannels on which the cable										
	1. Enter the total number of channels on which the cable system carried television broadcast stations										
	9,44,11,44,11,41,11,11,11,11,11,11,11,11,										
	2. Enter the total number of activated channels										
	on which the cable system carried television broadcast stations										
	and nonbroadcast services										
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual										
Individual to	we can contact about this statement of account.)										
Be Contacted											
for Further	Name Tammy Walsh Telephone 605-778-6221										
Information											
	Address PO Box 48										
	(Number, street, rural route, apartment, or suite number)										
	Kimball, SD 57355										
	(City, town, state, zip)										
	0.11.4%										
	Email tammy@midstaff.net Fax (optional) 605-778-8080										
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.										
Ο											
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 as identified in line 1 of space B and that the owner is not a corporation or partnership; or										
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.										
	in the Fot space B.										
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein										
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.  [18 U.S.C., Section 1001(1986)]										
	/S/ Chad Mutziger										
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.  (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the										
	"F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.										
	Typed or printed name: Chad Mutziger										
İ	Title: General Manager										
	(Title of official position held in corporation or partnership)										
ı	Date: July 28, 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#	N
Midstate Communications Inc.	34851	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adlowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall no scribers and amounts collected from subscribers receiving secondary transmissions pursuant to see For more information on when to exclude these amounts, see the note on page (vii) of the general instruct paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary to made by satellite carriers to satellite dish owners?  X NO	the basic ot include sub- iction 119."	Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or unforced an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	rest charge)	
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assi contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright please list below the owner, address, first community served, accounting period, and ID number as given 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  $\varepsilon$  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:

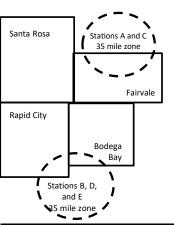
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 o	f 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)	0.25	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	1					·/^						
1	LEGAL NAME OF OWNER OF CAE				S	YSTEM ID#						
	Midstate Communicati	ions Inc.				34851						
	SUM OF DSEs OF CATEGO	ORY "O" STATIO	NS:									
	Add the DSEs of each static											
	Enter the sum here and in lin	ie 1 of part 5 of thi	s schedule.		0.75	 						
	Instructions:											
2	In the column headed "Cal	I Sign": list the ca	ll signs of all distant statio	ns identified by th	ne letter "O" in column 5							
0	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"	moreiar oddeddionar etation, g											
Stations	CALL SIGN	DSE	CATEGORY "O" STATION	DSE	CALL SIGN	DSE						
	KUSD-TV	0.250										
	KUSD-DT2	0.250										
	KUSD-DT3	0.250										
Add rows as												
necessary.												
Remember to copy all formula into new												
rows.												

Name								YSTEM ID# 34851	
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.								
Capacity		CATEGORY LAC STATIONS: COMPUTATION OF DSEs							
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	IR 3. JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	SE	
			÷	:	=	x	=		
			÷		=	<u>x</u>	=		
			÷ -			x			
			÷ ÷			x x			
			÷		=	x	=		
			÷	:	=	x	=		
			÷	:		x	=		
	Add the DSEs	OF CATEGORY LAC Sof each station. Im here and in line 2 of p		dule,	▶	0.00			
Computation of DSEs for Substitute-Basis Stations	Instructions:  Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station:  • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and  • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.  Column 3: Enter the number of days in the calendar year: 365, except in a leap year.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).  SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs								
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
				=		÷		=	
						÷ ÷			
		-		=		÷		=	
		=		=		÷		=	
		+	-	=		÷		=	
	SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule,								
5	<b>TOTAL NUMBER OF DSEs:</b> Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the tota number of DSEs applicable to your system.								
Total Number	1. Number of DSEs from part 2 ● ▶ <b>0.75</b>								
of DSEs	2. Number of DSEs from part 3 ●								
	3. Number of DSEs from part 4 ● ▶								
	TOTAL NUMBE	R OF DSEs						0.75	

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

LEGAL NAME OF O	OWNER OF CABLE						S'	YSTEM ID# 34851	Name
In block A: • If your answer if schedule.	ck A must be com "Yes," leave the re	emainder of p	·	7 of the DSE sche	edule blank a	nd complete pa	art 8, (page 16) of	the	6
•	, <u>,</u>			TELEVISION M	ARKETS				Computation of
effect on June 24	, 1981?	schedule—[	•	aller markets as de				gulations in	3.75 Fee
		BLOC	CK B: CARR	RIAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	s of distant stand and regulatione DSE Sche	ations listed in ons prior to Ju dule. (Note: T	part 2, 3, and 4 o ne 25, 1981. For fo he letter M below r	f this schedul urther explana	e that your sys ation of permitt	ed stations, see the	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncomeric D Grandfathered instructions fc E Carried pursu *F A station pre	ules and regued pursuant to as defined all educations desired station (76.6 or DSE sched ant to individuationsly carries JHF station w	lations cited b o the FCC ma d in 76.5(kk) (7 al station [76.5 55) (see paragule). ule). ual waiver of F d on a part-tir ithin grade-B	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 20.57, 76.59 (e)	n June 24, 198 a), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:		e stations ide determine the	ntified by the I	n parts 2, 3, and 4 letter "F" in column	n 2, you must		vorksheet on page	Т	
1. CALL SIGN	BASIS	3. DSE	SIGN	BASIS	3. DSE	SIGN	BASIS	3. DSE	
KUSD-TV KUSD-DT2	C M	0.25 0.25							
KUSD-DT3	М	0.25							
				· · · · · · · · · · · · · · · · · · ·					
								0.75	
		В	LOCK C: CC	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule			1	0.75	
Line 2: Enter the	e sum of permitte	ed DSEs fror	n block B ab	ove			,	0.75	
				r of DSEs subject t 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply	line 4 by 0.0375	and enter su	ım here				X 0.00		partially permited/ partially
							х		nonpermitted carriage? If yes, see part
Line o. Enter lot	al number of DS	LS HOIH IINE	J				,		9 instructions.
Line 7: Multiply I	ine 6 by line 5 a	nd enter her	e and on line	2, block 3, spac	e L (page 7)	)		0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.  SYSTEM ID#  34851										
			BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			
	1. CALL SIGN	2. PERMITTED BASIS			2. PERMITTED BASIS			2. PERMITTED BASIS	3. DSE	6
										Computation of 3.75 Fee
		• • • • • • • • • • • • • • • • • • • •								
l										

Name	Midstate Comm								S	**************************************		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters											
		PERMITT	ED DSE FOR STA	TIONS CARRIE	ΞD	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS				
	1. CALL	2. PRIC				4. BASIS OF	5. PF	RESENT	6. P	ERMITTED		
	SIGN	DSE	PI	ERIOD		CARRIAGE	[	DSE		DSE		
7 Computation of the	,	"Yes," comple	ete blocks B and C		pai	rt 8 of the DSE schedo	ule.					
Syndicated			BLOC	( A: MAJOR	TE	LEVISION MARK	ET					
Exclusivity Surcharge	• Is any portion of the o	cable system w	vithin a ton 100 maio	or television mark	ket	as defned by section 7	6.5 of ECC	rules in effect .l	une 24	19812		
Guronargo	X Yes—Complete	•		or toloviolori man	no.	No—Proceed to		raide in enece e	uno 2 1,	1001.		
	7 Too Complete	bioono B ano				110 110000410	parto					
	BLOCK B: Ca	arriage of VHI	F/Grade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSEs	3		
	Is any station listed in commercial VHF stati or in part, over the ca	on that places			H	Was any station listed nity served by the cab to former FCC rule 76	le system p					
	Yes—List each s  X No—Enter zero a		th its appropriate peri part 8.	mitted DSE		Yes—List each st  X No—Enter zero a			ate permi	tted DSE		
	CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN									DSE		
			-									
			TOTAL DOC-	0.00				TOTAL DO	Ec	0.00		
			TOTAL DSEs	0.00	$\parallel$			TOTAL DS	o⊏S	0.00		

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.	SYSTEM ID# 34851	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	779,929.43	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
	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	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      \[ \text{Y} \text{No-Complete the applicable section below.} \]  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	SE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ <u>\$</u>		
	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	-	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
	l	Midstate Communications Inc.	34851								
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.									
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ _ \$									
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$									
Surcharge		C. Multiply line B by 3.000 and enter here									
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$									
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.									
		F. Multiply line D by line E and enter here									
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)									
	Syndicated Exclusivity Surcharge										
8 Computation of Base Rate Fee	<ul> <li>In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.</li> <li>If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.</li> <li>If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B</li> </ul>										
	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) ▶ \$ 779,929	.43_								
	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.)	0.75								
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.									
		A. Enter 0.01064 of gross receipts  (the amount in section 1)	.84_								
		B. Enter 0.00701 of gross receipts  (the amount in section 1)									
		C. Subtract 1.000 from total DSEs  (the figure in section 2) and enter here									
		D. Multiply line B by line C and enter here	<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)	6 223 84								
		Base Rate Fee									

		i PERIOD: 2023/:
	tate Communications Inc.  SYSTEM ID# 34851	Name
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	•
7	A. Enter 0.01064 of gross receipts  (the amount in section 1)   ▶ \$	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) \$	
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here   ▶	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee  \$ 0.00	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in G.	9
receipt	<b>teral:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this ion, 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 the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.  7: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	and Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must empute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and

## How to Identify a Subscriber Group for Partially Distant Stations

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

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

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

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

In each section:

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

for Partially Permitted Stations

## SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 34851 Midstate Communications Inc. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE  Midstate Commur						S	YSTEM ID# 34851	Na	
В	LOCK A:	COMPUTATION O	BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP			
	FIRST	SUBSCRIBER GRO	UP		SECONE	SUBSCRIBER GRO	UP	Ç	
COMMUNITY/ AREA	All			COMMUNITY/ ARE	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Comp	
								Base R	
								an	
		<b> </b>						Syndi	
								Exclu	
	<mark></mark>							Surc	
								Part	
								Dist	
								Stat	
Гotal DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$ 779	9,929.43	Gross Receipts Second Group \$ 0.00					
31055 Neceipis Filsi G	roup	<b>3</b> 773	7,929.43	Gloss Receipts Sec	ond Group	<del>3</del>	0.00		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
		-							
		_							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
				11					
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$	0.00		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP  FIFTH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE  CAL	GROUP 0				
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN  CALL SIGN DSE CALL SIGN DSE CALL SIGN  CALL SIGN DSE CALL SIGN  CALL SIGN DSE CALL SIGN  CALL SIGN  CALL SIGN  CALL SIGN  DSE CALL SIGN  CALL	DSE  O.00				
CALL SIGN DSE CALL SIGN DSE CALL SIGN  CALL SIGN DSE CALL SIGN  CALL SIGN  DSE CA	0.00				
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN  CALL SIGN DSE CALL SIGN  DSE	0.00				
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$  Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	-				
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$  Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	-				
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$  Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	-				
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$  Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	-				
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$  Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	-				
siross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$					
siross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$					
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00					
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00					
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00					
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00					
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00					
ross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ ase Rate Fee First Group \$ 0.00					
ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00				
SEVENTH SUBSCRIBED CROUD EIGHTH SUBSCRIBES	0.00				
SEVENTI SOBSCRIBER GROOF EIGHTT SOBSCRIBER	GROUP				
OMMUNITY/ AREA COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE				
otal DSEs Total DSEs	0.00				
ross 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				

Midstate Communication	ABLE SYSTEM: <b>ns inc.</b>				S	YSTEM ID# 34851	
	: COMPUTATION C		TE FEES FOR EAC				
	H SUBSCRIBER GRO				H 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 First Group \$ 0.00			Gross Receipts Sec	ond Group	\$	0.00	
3ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ELEVENT	H SUBSCRIBER GRO	OUP		TWELVTH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····						
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	<b>\$</b>	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	· ·	3.00		С. Эцр	·		
	i contract of the contract of		11				

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.  SYSTEM ID#  34851									
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP			
THIR	RTEENTH	SUBSCRIBER GRO	JP	FO	URTEENTH	SUBSCRIBER GROU	JP	0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	9 Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
		_						Base Rate Fee	
		-						and	
								Syndicated Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
FIF	TEENTH	SUBSCRIBER GRO	JP		SIXTEENTH	I SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		-							
		_							
		-							
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00			0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth Group \$ 0.00			0.00		
Base Rate Fee: Add the Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$			

SEVENTEENTH	COMPUTATION O	F BASE RA	TE FEES FOR FAC			
			П			
	I SUBSCRIBER GRO		1		SUBSCRIBER GRO	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs	0.00	Total DSEs			0.00	
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
NINTEENTH	SUBSCRIBER GRO	UP		TWENTIETH	I SUBSCRIBER GRO	UP
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
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

LEGAL NAME OF OWN Midstate Commu						S	YSTEM ID# 34851	Name
		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EAC		RIBER GROUP SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	
Oroso reosipio riiot	Cioup	<u>*</u>		Cross ressipte ess	ona Group			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO	)UP 0			SUBSCRIBER GRO	UP <b>0</b>	
COMMUNITY/ AREA			U	COMMUNITY/ ARE				
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	
		<u> </u>	0.00		С. эчр	<u> </u>	3.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

Midstate Communication	BLE SYSTEM: <b>s Inc.</b>					YSTEM ID# 34851
			TE FEES FOR EAC			
	H SUBSCRIBER GRO				I SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Fotal DSEs		0.00	Total DSEs		<del>!!</del>	0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00
Base Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00
TWENTY-SEVENT	L CLIDCODIDED ODG					
	1 SUBSCRIBER GRU		IWEN	TY-EIGHTH	SUBSCRIBER GROU	JP
	1 SUBSCRIBER GRO	<b>0</b>	COMMUNITY/ AREA		I SUBSCRIBER GROU	UP <b>0</b>
OMMUNITY/ AREA	CALL SIGN		Ti .		CALL SIGN	
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ 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
OMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE		0	COMMUNITY/ AREA			0
CALL SIGN DSE  CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE
CALL SIGN DSE  CALL SIGN DSE  Total DSEs	CALL SIGN	DSE DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE O.00
COMMUNITY/ AREA	CALL SIGN	DSE DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE O.00

EGAL NAME OF OWNER OF CAE  Midstate Communication					S	YSTEM ID# 34851
			TE FEES FOR EAC			
	SUBSCRIBER GRO				H SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
	•	<u></u>				
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
	SUBSCRIBER GRO		ii .		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>			····	
	•					
			Total DSEs			0.00
otal DSEs		0.00				
Total DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00
	\$			th Group	\$	0.00
	\$			·	\$	0.00

LEGAL NAME OF OWNE Midstate Commun						S	YSTEM ID# 34851	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
THIRT	Y-THIRD	SUBSCRIBER GRO	JP	THIRT	Y-FOURTH	I SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
		•						
		•						
Total DSEs	<u> </u>		0.00	Total DSEs		Ц	0.00	
				Total DSEs			-	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIR	ΓY-FIFTH	SUBSCRIBER GRO	JP	TH	IRTY-SIXTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
<b>Base Rate Fee</b> Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CAB  Midstate Communications			SYSTEM ID# 34851				
			TE FEES FOR EACI				
THIRTY-SEVENTH COMMUNITY/ AREA	SUBSCRIBER GRO	UP <b>0</b>	THIR COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	
COMMUNITY AREA		<u> </u>					
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	  -						
		<u> </u>					
	  -						
		<u> </u>					
otal DSEs		0.00	Total DSEs	· ·	<del>! !</del>	0.00	
Gross Receipts First Group	<b>\$</b>	0.00	Gross Receipts Seco	nd Group	\$	0.00	
noss receipts i list Group	4		Gloss Necelpts Seco	na Group	Ψ	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
THIRTY-NINTH	OLIDOODIDED ODO		H				
11111(1111(1111)	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GROU	UP	
	SUBSCRIBER GRU	0 0	COMMUNITY/ AREA		SUBSCRIBER GRO	UP <b>0</b>	
OMMUNITY/ AREA	CALL SIGN		COMMUNITY/ AREA		SUBSCRIBER GROU		
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
OMMUNITY/ AREA		0				0	
CALL SIGN DSE		0				0	
CALL SIGN DSE  CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	
COMMUNITY/ AREA	CALL SIGN	DSE DSE	Total DSEs	DSE	CALL SIGN	DSE	
CALL SIGN DSE  CALL SIGN DSE	CALL SIGN	DSE DSE	Total DSEs	DSE	CALL SIGN	DSE	

LEGAL NAME OF OWNE Midstate Commun						S	YSTEM ID# 34851	Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
FOR1	ΓY-FIRST	SUBSCRIBER GRO	JP	FORT	TY-SECONE	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for
		-						Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FORT	Y-THIRD	SUBSCRIBER GRO	JP	FORT	TY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
<b>Base Rate Fee</b> Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE  Midstate Commun						SY	STEM ID# 34851	Name
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	P	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
		•				•		
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GROU	JP	FOR <sup>3</sup>	TY-EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

Midstate Communication	BLE SYSTEM: <b>s Inc.</b>					YSTEM ID# 34851
			TE FEES FOR EACH			
	I SUBSCRIBER GRO				SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
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
FIFTY-FIRS						
	SUBSCRIBER GRO		Ti .		SUBSCRIBER GROU	
	SUBSCRIBER GRC	<b>0</b>	COMMUNITY/ AREA		) SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	CALL SIGN		Ti .		CALL SIGN	
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
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
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	CALL SIGN	DSE		DSE
CALL SIGN DSE  CALL SIGN DSE	CALL SIGN	DSE DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE O.00
COMMUNITY/ AREA	CALL SIGN	DSE DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE O.00

Midstate Communications	SLE SYSTEM: S Inc.				S	YSTEM ID# 34851
			TE FEES FOR EAC			
	SUBSCRIBER GRO		ii e		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs	ĮĮ.	0.00	Total DSEs		11	0.00
	¢	0.00		and Croup	•	0.00
ross Receipts First Group	\$	0.00	Gross Receipts Sec	ona Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
FIFTY-FIFTH	SUBSCRIBER GRO	UP		FIFTY-SIXTH	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE
otal DSEs	CALL SIGN				CALL SIGN	
otal DSEs		0.00	Total DSEs			0.00
CALL SIGN DSE  CALL SIGN DSE  Cotal DSEs  Coross Receipts Third Group  Base Rate Fee Third Group		0.00	Total DSEs	rth Group		0.00

LEGAL NAME OF OW Midstate Comm						S	34851	Name
		COMPUTATION O		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO		
COMMUNITY/ ARE			0	COMMUNITY/ ARE			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
		_						Surcharge
								for
								Partially Distant
								Stations
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GRO	_	
COMMUNITY/ ARE	4		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 Thire	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thire	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.	\$		

Midstate Communication	BLE SYSTEM: <b>s Inc.</b>				S	YSTEM ID# 34851
			TE FEES FOR EAC			
	SUBSCRIBER GRO		†		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
otal DSEs		0.00	Total DSEs			0.00
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
OIVTV TUDE						
	SUBSCRIBER GRO		Ti .		I SUBSCRIBER GROU	
	SUBSCRIBER GRO	0 0	SIXT		I SUBSCRIBER GROU	UP <b>0</b>
OMMUNITY/ AREA	CALL SIGN		Ti .		SUBSCRIBER GROU	
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
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0
CALL SIGN DSE		0	COMMUNITY/ AREA			0
CALL SIGN DSE  CALL SIGN DSE  Total DSEs		DSE	CALL SIGN	DSE		DSE
COMMUNITY/ AREA	CALL SIGN	DSE DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE O.00

Midstate Communication	BLE SYSTEM: I <b>S Inc.</b>				3	YSTEM ID# 34851
			TE FEES FOR EAC			
	H SUBSCRIBER GRO		11		SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	4		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	····					
otal DSEs		0.00	Total DSEs	•	**	0.00
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco			0.00
	ļ.	0.00	Dase Nate 1 ee 3ecc	ona Group	\$	0.00
	H SUBSCRIBER GRO	DUP	SIX	KTY-EIGHTH	SUBSCRIBER GRO	JP
	\			KTY-EIGHTH		
OMMUNITY/ AREA	\	DUP	SIX	KTY-EIGHTH		JP
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
COMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
COMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
OMMUNITY/ AREA	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
CALL SIGN DSE	H SUBSCRIBER GRO	OUP 0	SIX COMMUNITY/ AREA	KTY-EIGHTH	I SUBSCRIBER GROU	JP <b>0</b>
COMMUNITY/ AREA	H SUBSCRIBER GRO	DUP	COMMUNITY/ AREA	DSE DSE	I SUBSCRIBER GROU	JP 0 DSE
CALL SIGN DSE	CALL SIGN	DUP 0 DSE 0.00	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE	CALL SIGN	JP  O  DSE  O O O O O O O O O O O O O O O O O O

	COMPUTATION OF SUBSCRIBER GROU CALL SIGN		Ti .	SEVENTIETH		JP		
COMMUNITY/ AREA		0	Ti .		I SUBSCRIBER GROU	JP		
	CALL SIGN	T	COMMUNITY/ ARE	SEVENTIETH SUBSCRIBER GROUP  COMMUNITY/ AREA  0				
	CALL SIGN	DSF	COMMONTTY AREA					
		D0L	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-FIRST S	SUBSCRIBER GROU	JP	SEVEN	TY-SECONE	SUBSCRIBER GROU	JP		
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
otal DSEs		0.00	Total DSEs			0.00		
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		

Base Rate Fe and Syndicated	RIBER GROUP	SUBSCR					
O COMMUNITY/ AREA O Computation SE CALL SIGN DSE CALL SIGN DSE Base Rate Form and Syndicated Exclusivity Surcharge for Partially Distant		LOCK A: (	В				
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate For and Syndicated Exclusivity Surcharge for Partially Distant	H SUBSCRIBER GROUP	SUBSCRIBER GROU	TY-THIRD	SEVEN			
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Formand Syndicated Exclusivity Surcharge for Partially Distant			COMMUNITY/ AREA	0			COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge for Partially Distant	CALL SIGN DSE		i i	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant							
Exclusivity Surcharge for Partially Distant							
Surcharge for Partially Distant							
for Partially Distant							
Partially Distant	·····   ·				<del>-</del>		
Stations Stations							
	0.00		Total DSEs	0.00			otal DSEs
\$ 0.00 Gross Receipts Second Group \$ 0.00	\$ 0.00	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
\$ 0.00 Base Rate Fee Second Group \$ 0.00	\$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	roup	<b>3ase Rate Fee</b> First G
FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP	H SUBSCRIBER GROUP	NTY-SIXTH	SEVEN	JP	SUBSCRIBER GROU	TY-FIFTH	SEVEN
0 COMMUNITY/ AREA 0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
SE CALL SIGN DSE CALL SIGN DSE	CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	····· <del>                                </del>						
	· · · · · · · · · · · · · · · · · · ·						
	•						
0.00   Total DSEs   0.00	0.00		Total DSEs	0.00			Fotal DSEs
		Group			\$	Group	Gross Receipts Third (
					·	<del></del> -	Isos.p.to Time (
p \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	\$ 0.00	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third (

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.  SYSTEM ID#  34851								Name
SEVENT	Y-SEVENTH	COMPUTATION OF SUBSCRIBER GRO	ION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP R GROUP  COMMUNITY/ AREA  O					
COMMUNITY/ AREA	<b>A</b>		0	COMMUNITY/ AREA	4		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVE	NTY-NINTH	SUBSCRIBER GRO	JP		EIGHTIETH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

EGAL NAME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.  SYSTEM ID#  34851								Name
BL	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
EIGH1	ΓY-FIRST	SUBSCRIBER GRO	JP	EIGHT	TY-SECONE	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
<b>Base Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
EIGHT	Y-THIRD	SUBSCRIBER GRO	JP	EIGH1	TY-FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subso	criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Midstate Commu						S	34851	Name
EIG	HTY-FIFTH	COMPUTATION OF SUBSCRIBER GROU	JP	II .	SHTY-SIXTH	RIBER GROUP I SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
								İ
								İ
								İ
								İ
								İ
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	1
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GROU		ii –		I SUBSCRIBER GRO	UP	İ
COMMUNITY/ AREA			0	COMMUNITY/ AREA	\		0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
								İ
								İ
								İ
								İ
								İ
								İ
								İ
								İ
								İ
								İ
								İ
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	İ
Raco Data Eco Thind	Group	¢	0.00	Raco Pata Fao Farr	th Group	¢	0.00	1
Base Rate Fee Third	Group	<u></u> \$	0.00	Base Rate Fee Four	ui Gioup	\$	0.00	1
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	s above.	\$		1

Midstate Communication	BLE SYSTEM: <b>s Inc.</b>				S	YSTEM ID# 34851
			TE FEES FOR EAC			
	I SUBSCRIBER GRO				H SUBSCRIBER GROU	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
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 Sec	ond Group	\$	0.00
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00
NINETY-FIRS	SUBSCRIBER GRO	UP	NINE	TY-SECONE	SUBSCRIBER GROU	JP
OMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
		<u></u>				
		0.00	Total DSEs			0.00
otal DSEs			11		-	
Total DSEs	<u> </u>		Gross Receipts Four	rth Group	\$	0.00
Fotal DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.  SYSTEM ID#  34851								
	COMPUTATION O							
	SUBSCRIBER GRO		ii e		SUBSCRIBER GROU			
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN DSE					
otal DSEs		0.00	Total DSEs	<u>.</u>		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		
	SUBSCRIBER GRO		i i		H SUBSCRIBER GROU			
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0		
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Fotal DSEs		0.00	Total DSEs			0.00		
	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00		
Total DSEs Gross Receipts Third Group  Base Rate Fee Third Group	\$			·	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.  SYSTEM ID#  34851								Name
				TE FEES FOR EACH				
	SEVENTH	SUBSCRIBER GROU	JP <b>0</b>	11		I SUBSCRIBER GROU	JP <b>0</b>	9
COMMUNITY/ AREA			U	COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
								and Syndicated
								Exclusivity
		-						Surcharge
								for
								Partially Distant
		-						Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
NINET	Y-NINTH	SUBSCRIBER GROU	JP	ONE H	JNDREDTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e <b>base rat</b> 3, line 1, s	e fees for each subso	riber group	as shown in the boxes	above.	\$		

Nam	34031	LEGAL NAME OF OWNER OF CABLE SYSTEM:  Midstate Communications Inc.  SYSTEM ID#  34851								
		IBER GROUP	SUBSCR	TE FEES FOR EAC	BASE RA	COMPUTATION OF	OCK A: C	BL		
•	JP	SUBSCRIBER GROU	SECOND	ONE HUNDRE	JP	SUBSCRIBER GROU	ED FIRST	ONE HUNDRE		
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA		
Comput of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
Base Rat										
and										
Syndica Exclusi							-			
Surcha						_				
for										
Partia							-			
Dista: Statio										
Station										
							-			
		•				•				
						•				
	0.00	Ц		Tatal DCCa	0.00			intel DCF		
	•			Total DSEs				otal DSEs		
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G		
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	oup	Base Rate Fee First Gr		
	'	\$ SUBSCRIBER GROU				\$ SUBSCRIBER GROU				
	'							ONE HUNDRE		
	JP			ONE HUNDRE	JP			ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE		
	JP <b>0</b>	SUBSCRIBER GROU	D FOURTH	ONE HUNDRE	JP <b>0</b>	SUBSCRIBER GROU	ED THIRD	ONE HUNDRE COMMUNITY/ AREA  CALL SIGN		
	DSE	SUBSCRIBER GROU	DSE	ONE HUNDRE COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	ONE HUNDRE COMMUNITY/ AREA  CALL SIGN  Total DSEs		
	DSE O.000	SUBSCRIBER GROU	DSE	ONE HUNDRE COMMUNITY/ AREA CALL SIGN  Total DSEs	JP  O  DSE  O  O  O O O O	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA		

LEGAL NAME OF OWNE  Midstate Commun						SY	STEM ID# 34851	Name
ONE HUNDRE		COMPUTATION OF SUBSCRIBER GROU	JP	li	RED SIXTH	IBER GROUP SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
		-						Exclusivity
						-		Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs		Ц	0.00	
Gross Receipts First Gr	OUD	<b>\$</b>	0.00	Gross Receipts Seco	nd Group	<b>\$</b>	0.00	
Gloss Necelpts I list Gl	oup	4	0.00	Gross Receipts Secon	па Огоар	Ψ	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
	EVENTH	SUBSCRIBER GROU		li		SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts 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.	\$		

LEGAL NAME OF OWNE  Midstate Commun						SY	STEM ID# 34851	Name
ONE HUNDRE		COMPUTATION OF SUBSCRIBER GROU	JP	li	RED TENTH	IBER GROUP SUBSCRIBER GROUI		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
		-						
						•		
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
ONE HUNDRED EL	.EVENTH	SUBSCRIBER GROU	JP <b>0</b>	ONE HUNDRED		SUBSCRIBER GROUI	0	
COMMONT IT AREA				COMMONT T/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
						•	<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OW Midstate Comm						S	34851	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	•
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	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 / 1505			0.00	T			0.00	
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	
ONE HUNDRED	FIFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	4		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	I the <b>base ra</b> tock 3, line 1,	te fees for each subs space L (page 7)	scriber group	as shown in the boxe	es above.	\$		

	YSTEM ID# 34851	5						Midstate Commun
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	Bl
9		SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROU	ITEENTH	NE HUNDRED SEVEN
Computa	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and								
Syndicat								
Exclusiv Surchar								
for								
Partiall								
Distan								
Station							-	
			<u> </u>					
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	VENTIETH	İ		SUBSCRIBER GROU	ITEENTH	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						-		
		H				-		***************************************
						-	-	
	0.00			Total DSEs	0.00			Fotal DSEs
	0.00		Group			\$	roup	
		\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	Fotal DSEs Gross Receipts Third G

madiato dominia	nications	Inc.					YSTEM ID# 34851	Name
E	BLOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GRO	JP	ONE HUNDRED TWE	NTY-SECONE	SUBSCRIBER GROUP	)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		_						Base Rate I
								and
								Syndicate Exclusivit
		_						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	
							1	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	NTY-THIRD	SUBSCRIBER GROUP	1	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP	•	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
otal DSEs			0.00	Total DSEs			0.00	
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	
2 Det- E ^ ! ! !		to food for the last		an above to 0	b			
inter here and in bloc			ander group	as shown in the boxe	ъ авоче.	\$		

Name	YSTEM ID# 34851	S						LEGAL NAME OF OWNE Midstate Commun
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
•		SUBSCRIBER GROUP	NTY-SIXTH	ONE HUNDRED TWE		SUBSCRIBER GROUP	NTY-FIFTH	ONE HUNDRED TWEN
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicate								
Exclusivit								
Surcharge								
for								
Partially								
Distant		-					u	
Stations								
		H					-	
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
		SUBSCRIBER GROUP	ΓΥ-EIGHTH	ONE HUNDRED TWEN		SUBSCRIBER GROUP	SEVENTH	IE HUNDRED TWENTY-
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							-	
							<u> </u>	
							-	
							-	
	0.00			Total DSEs	0.00			otal DSEs
			_	Gross Receipts Fourth	0.00	\$	roup	Succes December Thind C
	0.00	\$	Group	Gioss Receipts Fourth	0.00	*	noup	Gross Receipts Third G

LEGAL NAME OF OW Midstate Commi						S	34851	Name
			F BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
ONE HUNDRED TW	ENTY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDR	ED THIRTIETH	SUBSCRIBER GROU	Р	•
COMMUNITY/ AREA	A		0	COMMUNITY/ ARE	A		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	
ONE HUNDRED T	HIRTY-FIRST	SUBSCRIBER GROU	Р	ONE HUNDRED TH	IRTY-SECOND	SUBSCRIBER GROU	P	
COMMUNITY/ AREA	<b>4</b>		0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
		_						
						•		
Total DSEs		11	0.00	Total DSEs		Ш	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
2.300 . 1000ipto 11iii	- 2.0 <del>.</del> p	· ·			C. 3up	*		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fou	irth Group	\$	0.00	
			criber group	as shown in the boxe	es above.			
Enter here and in blo	ock 3, line 1,	space L (page 7)				\$		

LEGAL NAME OF OWN Midstate Commu						S	34851	Name
ONE HUNDRED TH	IRTY-THIRD	COMPUTATION OF SUBSCRIBER GROUP		it .	RTY-FOURTH	RIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TH	IIRTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED T	HIRTY-SIXTH	SUBSCRIBER GROUP	)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs		II.	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
							<u> </u>	
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 OW Midstate Comm						S	34851	Name
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EAC		RIBER GROUP	o	_
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
,	•							
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED T		SUBSCRIBER GROUP	0	ONE HUNDRED		I SUBSCRIBER GRO	UP <b>0</b>	
COMMONT T/ AREA	A			COMMONT 17 AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add	d the <b>base rat</b>	e fees for each subsc	riber aroun	as shown in the boxes	s above.			
Enter here and in blo			<b>5</b> T			\$		

Name	YSTEM ID# 34851	S						LEGAL NAME OF OWNE  Midstate Commun
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A: (	Bl
•		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED FORT		SUBSCRIBER GROUI	RTY-FIRST	ONE HUNDRED FOR
<b>9</b> Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and Syndicated								
Exclusivity								
Surcharge		H				_		
for								
Partially								
Distant								
Stations								
	0.00		ļ.	Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
		·	,	,			'	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED FOR		SUBSCRIBER GROUI	RTY-THIRD	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		H						
		<b>-</b>						
						-		
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs Gross Receipts Third G

LEGAL NAME OF OWNE Midstate Commun						S	YSTEM ID# 34851	Name
В	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	RTY-FIFTH	SUBSCRIBER GROUP			ORTY-SIXTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FORTY	-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-EIGHTH	SUBSCRIBER GROUP	)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN Midstate Commu						S	34851	Nan
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FOR	RTY-NINTH	SUBSCRIBER GRO		H .		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Comput
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rat
								and
								Syndica
								Exclusiv Surcha
								for
								Partial
								Distar
								Station
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FI	FTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		_						
otal DSEs			0.00	Total DSEs			0.00	
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	
2030 Rate i de IIIII U	Стоир	<u> </u>	0.00	Jase Rate 1 66 i Oui	ал Отоир	Ψ	0.00	
Base Rate Fee Third  Base Rate Fee: Add the Enter here and in block	he <b>base ra</b>		0.00	Base Rate Fee Four		\$	0.00	

LEGAL NAME OF OWNI						S	YSTEM ID# 34851	Name
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EAC		RIBER GROUP SUBSCRIBER GROU	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant Stations
								Otations
Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	TY-FIFTH	SUBSCRIBER GROU		Ħ		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
,	•				'			
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	he <b>base rat</b> k 3, line 1, s	te fees for each subsc space L (page 7)	riber group	as shown in the boxes	s above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP
DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations    O.00
DSE CALL SIGN DSE CALL SIGN DSE GALL SIGN DSE Base Rate Formula Syndicated Exclusivity Surcharge for Partially Distant Stations  Total DSEs O.00  St Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  DFIFTY-NINTH SUBSCRIBER GROUP  EA 0 COMMUNITY/ AREA 0  Computatio of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
DSE   CALL SIGN   DSE   CALL SIGN   DSE   CALL SIGN   DSE   Base Rate Form and Syndicated Exclusivity Surcharge for Partially Distant Stations
and Syndicated Exclusivity Surcharge for Partially Distant Stations
Syndicated Exclusivity Surcharge for Partially Distant Stations  Total DSEs 0.00  Gross Receipts Second Group \$ 0.00  St Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0
Exclusivity Surcharge for Partially Distant Stations  Total DSEs Gross Receipts Second Group St Group
Surcharge for Partially Distant Stations  O.00 Total DSEs O.00 St Group \$ 0.00 Gross Receipts Second Group \$ 0.00  St Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP  EA 0 COMMUNITY/ AREA 0
Partially Distant Stations  O.00 Total DSEs O.00 Gross Receipts Second Group \$ 0.00  St Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP  EA O COMMUNITY/ AREA 0
Distant Stations  O.00 Total DSEs O.00 Gross Receipts Second Group St Group
Stations  O.00 St Group St Gro
Total DSEs 0.00 St Group \$ 0.0
st Group \$ 0.00 Gross Receipts Second Group \$ 0.00  st Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP EA 0 COMMUNITY/ AREA 0
st Group \$ 0.00 Gross Receipts Second Group \$ 0.00  st Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP EA 0 COMMUNITY/ AREA 0
st Group \$ 0.00 Gross Receipts Second Group \$ 0.00  st Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP EA 0 COMMUNITY/ AREA 0
st Group \$ 0.00 Gross Receipts Second Group \$ 0.00  st Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP EA 0 COMMUNITY/ AREA 0
st Group \$ 0.00 Gross Receipts Second Group \$ 0.00  st Group \$ 0.00 Base Rate Fee Second Group \$ 0.00  D FIFTY-NINTH SUBSCRIBER GROUP EA 0 COMMUNITY/ AREA 0
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ird Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00
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ase Rate Fee First G	roup	¢	0.00	Base Rate Fee Seco	nd Group	•	0.00	
ase Nate i ee i list c		\$	0.00	Dase Nate i ee Seco	пи Стоир	\$	0.00	
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	۲	SUBSCRIBER GROUI	EIGHTH		<u>0</u>	SUBSCRIBER GROU	EVENIA	COMMUNITY/ AREA
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	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Name	YSTEM ID# 34851	<b>5</b> `				Inc.		LEGAL NAME OF OWNE  Midstate Commun
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9		SUBSCRIBER GROU	TENTH			SUBSCRIBER GROU	NINTH	
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				TE FEES FOR EACH				
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	DSE	SUBSCRIBER GROUP	DSE	CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN

Name	YSTEM ID# 34851					Inc.	R OF CABL	Midstate Commun
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9	JP	SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GROL	ITEENTH	
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Name	YSTEM ID# 34851	S						LEGAL NAME OF OWNE Midstate Commun
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Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Name	YSTEM ID# 34851					Inc.	R OF CABL	Midstate Commun
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9		SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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				TE FEES FOR EACH				
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Name	YSTEM ID# 34851					Inc.		LEGAL NAME OF OWNE Midstate Commun
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	SEVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						_		
and						-		
Syndicated Exclusivity								
Surcharge						_		
for								
Partially								
Distant								
Stations		-						
		<b>-</b>						
							-	
	0.00			Total DSEs	0.00			Γotal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
	0.00							
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROU		Base Rate Fee Secon	_	\$ SUBSCRIBER GROU		
	0.00			Base Rate Fee Secon	_			FIFT
	0.00				JP			FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00 JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	FIFT
	0.00  JP	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE	SUBSCRIBER GROU	Y-NINTH  DSE	CALL SIGN  CALL SIGN  Total DSEs
	0.00	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	Y-NINTH  DSE	FIFT COMMUNITY/ AREA  CALL SIGN

	34851	S						LEGAL NAME OF OWNE  Midstate Commun
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	/-SECOND			SUBSCRIBER GROU	TY-FIRST	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and							-	
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Partially						-		
Distant							_	
Stations								
						-		
	0.00	11	<u> </u>	T	0.00		<u> </u>	
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
					0.00			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First G
	-	SUBSCRIBER GROU				SUBSCRIBER GROU		
=	-							SIXT
	UP			SIXT	JP			SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT
	UP <b>0</b>	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	TY-THIRD	SIXT COMMUNITY/ AREA CALL SIGN
	DSE	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA  CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	SIXT COMMUNITY/ AREA CALL SIGN
	DSE  DSE	SUBSCRIBER GROU	/-FOURTH	SIXT COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA

Name	YSTEM ID# 34851					Inc.		LEGAL NAME OF OWNE  Midstate Commun
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	(TY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
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for Partially								
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	0.00			Total DSEs	0.00			Γotal DSEs
				Gross Receipts Secon	0.00	\$	oup	Gross Receipts First G
	0.00	\$	d Group	Gross reccipis occor				
	0.00	\$	d Group	Gross receipts occor				
	0.00	\$		Base Rate Fee Secon	0.00	\$	oup	3ase Rate Fee First Gr
	0.00		d Group	Base Rate Fee Secon		\$ SUBSCRIBER GROU		
	0.00	\$	d Group	Base Rate Fee Secon				SIXTY-S
	<b>0.00</b>	\$	d Group	Base Rate Fee Secon	JP			SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	COMMUNITY/ AREA
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-S
	0.00 JP	\$ SUBSCRIBER GROU	d Group Y-EIGHTH	Base Rate Fee Secon SIXT COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	SEVENTH	SIXTY-E COMMUNITY/ AREA  CALL SIGN
	0.00  JP  Ose	\$ SUBSCRIBER GROU	d Group Y-EIGHTH  DSE	Base Rate Fee Secon SIXT COMMUNITY/ AREA  CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	SIXTY-S COMMUNITY/ AREA  CALL SIGN  Fotal DSEs
	O.00  JP  OSE  O.00	\$ SUBSCRIBER GROU	d Group Y-EIGHTH  DSE	Base Rate Fee Secon  SIXT  COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE O.00	SUBSCRIBER GROU	DSE	SIXTY-S

Name	YSTEM ID# 34851	S`						LEGAL NAME OF OWNE  Midstate Commun
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GROU	Y-NINTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and		-						
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Surcharge for								
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				Total DSEs	0.00			Total DSEs
	0.00				0.00	•		
	0.00	\$	d Group	Gross Receipts Secon	0.00	Þ	roup	Fross Receipts First G
		\$	d Group	Gross Receipts Secon	0.00	\$	roup	Fross Receipts First G
		\$		Gross Receipts Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon	0.00		-oup	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	-oup	Base Rate Fee First G
	0.00 0.00	\$	d Group	Base Rate Fee Secon	<b>0.00</b>	\$	-oup	Base Rate Fee First G
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First Gr SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First Gr SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	COMMUNITY/ AREA
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00  0.00  JP  DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  SEVENT  COMMUNITY/ AREA  CALL SIGN	JP 0	\$ SUBSCRIBER GROU	TY-FIRST	SEVEN  COMMUNITY/ AREA  CALL SIGN
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon SEVENT COMMUNITY/ AREA	0.00 JP	\$ SUBSCRIBER GROU	TY-FIRST	Base Rate Fee First G SEVEN COMMUNITY/ AREA
	0.00  0.00  JP  DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  SEVENT  COMMUNITY/ AREA  CALL SIGN	JP 0	\$ SUBSCRIBER GROU	TY-FIRST  DSE	SEVEN  COMMUNITY/ AREA  CALL SIGN

				TE FEES FOR EAC				
	Y-THIRD	SUBSCRIBER GRO		ii e		I SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	Y-FIFTH	SUBSCRIBER GRO	UP	SEV	ENTY-SIXTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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	
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	
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Name	YSTEM ID# 34851					Inc.	R OF CABL	Midstate Commun
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	Y-EIGHTH			SUBSCRIBER GROU	EVENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and								
Syndicated Exclusivity								
Surcharge						-		
for								
Partially								
Distant								
Stations								
						-		
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	0.00							
	0.00	\$		Base Rate Fee Secon	0.00	\$	oup	<b>3ase Rate Fee</b> First Gr
	0.00	\$ SUBSCRIBER GROU	d Group		'	\$ SUBSCRIBER GROU		
	0.00		d Group		'			SEVENT
	0.00		d Group		JP			SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT COMMUNITY/ AREA
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	0.00 JP 0	SUBSCRIBER GROU	d Group	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	Y-NINTH	SEVENT
	DSE	SUBSCRIBER GROU	d Group	CALL SIGN	JP 0	SUBSCRIBER GROU	Y-NINTH	SEVENT COMMUNITY/ AREA  CALL SIGN
	0.00  JP	SUBSCRIBER GROU	d Group  EIGHTIETH  DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE DSE O.000	SUBSCRIBER GROU	Y-NINTH	SEVENT COMMUNITY/ AREA  CALL SIGN  Total DSEs
	DSE	SUBSCRIBER GROU	d Group  EIGHTIETH  DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	Y-NINTH	SEVENT

	ID.			TE FEES FOR EACH				
9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GROU	Y-FIRST	
_	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	302	07122 01011	202	07.122.01011	202	57.22 5.5.t	202	07.22 0.0.1
and								
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	<b>Base Rate Fee</b> First Gr
	0.00		d Group	Base Rate Fee Second	0.00		oup	<b>Base Rate Fee</b> First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr EIGHT
	0.00	\$	d Group	Base Rate Fee Second	<b>0.00</b>	\$	oup	ase Rate Fee First Gr
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup Y-THIRD	Sase Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup Y-THIRD	Sase Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup Y-THIRD	Sase Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup Y-THIRD	Base Rate Fee First Gr EIGHT COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Second EIGHTY COMMUNITY/ AREA	0.00 JP 0	SUBSCRIBER GROU	oup Y-THIRD	Sase Rate Fee First Gr EIGHT COMMUNITY/ AREA
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	0.00  JP	SUBSCRIBER GROU	d Group	EIGHTY COMMUNITY/ AREA CALL SIGN  Total DSEs	0.00  DSE  0.00	SUBSCRIBER GROU	OUP  Y-THIRD  DSE	EIGHT COMMUNITY/ AREA CALL SIGN
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	0.00  JP	SUBSCRIBER GROU	d Group	EIGHTY COMMUNITY/ AREA CALL SIGN  Total DSEs	0.00  DSE  0.00	SUBSCRIBER GROU	OUP  Y-THIRD  DSE	EIGHT COMMUNITY/ AREA  CALL SIGN  Total DSEs

Name	YSTEM ID# 34851	S`				Inc.		LEGAL NAME OF OWNE  Midstate Commun
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GROU	TY-FIFTH	
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Name	YSTEM ID# 34851							LEGAL NAME OF OWNE Midstate Commun
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9		SUBSCRIBER GROU	NINTIETH			SUBSCRIBER GROU	Y-NINTH	
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LEGAL NAME OF OWNE Midstate Commun						S	YSTEM ID# 34851	Name
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Name 9	YSTEM ID# 34851							LEGAL NAME OF OWNE  Midstate Commun
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LEGAL NAME OF OWNE Midstate Commun						S	YSTEM ID# 34851	Name
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Name	YSTEM ID# 34851					Inc.	ications	Midstate Commun
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	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	oup SEVENTH	Base Rate Fee First Gr ONE HUNDRED FORTY- COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	oup SEVENTH	Base Rate Fee First Gr ONE HUNDRED FORTY- COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	oup SEVENTH	Base Rate Fee First Gr ONE HUNDRED FORTY- COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	oup SEVENTH	Base Rate Fee First Gr ONE HUNDRED FORTY- COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA	0	\$ SUBSCRIBER GROUP	oup SEVENTH	Base Rate Fee First Gr ONE HUNDRED FORTY- COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROUP	d Group  TY-EIGHTH  DSE	Base Rate Fee Secon ONE HUNDRED FOR COMMUNITY/ AREA  CALL SIGN	DSE	\$ SUBSCRIBER GROUP	DSE	Base Rate Fee First Gr ONE HUNDRED FORTY- COMMUNITY/ AREA  CALL SIGN

Name	YSTEM ID# 34851					Inc.		LEGAL NAME OF OWNE Midstate Commun	
				TE FEES FOR EACH					
9	JP	SUBSCRIBER GROU	FIFTIETH			SUBSCRIBER GROU	Y-NINTH	ONE HUNDRED FORT	
Computation	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fo									
and									
Syndicated Exclusivity									
Surcharge									
for						_			
Partially									
Distant									
Stations									
	0.00			Total DSEs	0.00		<u> </u>	Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	<b>Base Rate Fee</b> First Gr	
	0.00	\$ SUBSCRIBER GROU						Base Rate Fee First Gr	
	0.00							ONE HUNDRED FIFT	
	0.00			ONE HUNDRED FIFT	JP			ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	COMMUNITY/ AREA	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT	
	0.00 JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT	JP <b>0</b>	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIFT COMMUNITY/ AREA  CALL SIGN	
	JP 0	SUBSCRIBER GROU	/-SECOND	ONE HUNDRED FIFT COMMUNITY/ AREA  CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	ONE HUNDRED FIFT	

Name	YSTEM ID# 34851							LEGAL NAME OF OWNE  Midstate Commun
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-FOURTH	ONE HUNDRED FIFT		SUBSCRIBER GROU	Y-THIRD	ONE HUNDRED FIFT
Computatio	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F						-		
and								
Syndicated Exclusivity								
Surcharge						-		
for							-	
Partially								
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Stations								
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	Total DSEs 0.00			Total DSEs	0.00			Total DSEs
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	0.00	\$	d Group	Gross Receipts Secon			- C	·
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	0.00		d Group	Base Rate Fee Secon	JP	\$	oup	Base Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Secon		\$	oup	Base Rate Fee First Gr
	0.00	\$	d Group	Base Rate Fee Secon	JP	\$	oup	Base Rate Fee First Gr
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED FI COMMUNITY/ AREA	JP <b>0</b>	\$ SUBSCRIBER GROU	oup	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA
	0.00	\$ SUBSCRIBER GROU	d Group TY-SIXTH DSE	Base Rate Fee Secon  ONE HUNDRED FI  COMMUNITY/ AREA  CALL SIGN	DSE	\$ SUBSCRIBER GROU	OUP  TY-FIFTH  DSE	ONE HUNDRED FIF COMMUNITY/ AREA  CALL SIGN

Name	YSTEM ID# 34851	S				Inc.	R OF CABL	Midstate Commun	
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL	
9		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FI		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED FIFTY-	
Computatio	COMMUNITY/ AREA 0				0		COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and									
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for									
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Stations									
	0.00	Щ		T-4-I DOE-	0.00			F-4-1 DOF-	
	Total DSEs				0.00			Total DSEs	
	-		Gross Receipts Second Group \$ 0.00			\$	nun	Gross Receipts First Gr	
	-	\$	d Group	Gross Receipts Secon		<u>*</u>	oup	,	
	-	\$		Base Rate Fee Secon	0.00	\$			
	0.00		d Group	Base Rate Fee Secon	0.00	\$	oup		
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	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	
	0.00 0.00 JP	\$ SUBSCRIBER GROU	d Group	ONE HUNDREI COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	oup Y-NINTH	ONE HUNDRED FIFT COMMUNITY/ AREA  CALL SIGN	
	0.00  0.00  JP  DSE	\$ SUBSCRIBER GROU	d Group  SIXTIETH  DSE	Base Rate Fee Secon ONE HUNDREI COMMUNITY/ AREA  CALL SIGN	0.00	\$ SUBSCRIBER GROU	OUP Y-NINTH	Base Rate Fee First Gr ONE HUNDRED FIFT COMMUNITY/ AREA	

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Midstate Communications Inc. 34851 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. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Midstate Communications Inc. 34851 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. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Midstate Communications Inc. 34851 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 

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FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Midstate Communications Inc. 34851 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. SEVENTY-THIRD SUBSCRIBER GROUP SEVENTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the 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 . . . . . . . . . . . . . . . SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 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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