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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
2 22 24	\$ ALLOCATION NUMBER					
2-28-24						

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY TH	IS STATEMENT:							
Accounting Period	2023/2								
Bowner	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF SHELLSBURG CABLEVISION, INC USA COMMUNICATIONS	CABLE SYSTEM							
				(0249652023/2				
					024965 2023/2				
	PO BOX 389 SHELLSBURG, IA 52332-0389								
С	INSTRUCTIONS: In line 1, give any business or names already appear in space B. In line 2, give								
System	1 IDENTIFICATION OF CABLE SYSTEM:	<u> </u>	<u> </u>		<u> </u>				
	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 Served	with all communities. CITY OR TOWN		STATE						
First	SHELLSBURG		IA						
Community	Below is a sample for reporting communities if	you report multiple cha	innel line-ups in S	pace G.					
	CITY OR TOWN (SAMPLE)		STATE	CH LINE UP	SUB GRP#				
Sample	Alda		MD	A	1				
•	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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

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

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

Ε

Secondary Transmission Service: Subscribers and

Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1		BLOG	BLOCK 2			
	NO. OF			NO. OF			
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS		RATE	
Residential:							
 Service to first set 	293	\$ 83.71	FTTH BASIC	-	\$	-	
 Service to additional set(s) 			FTTH LIFELINE	13	\$	21.15	
 FM radio (if separate rate) 			FTTH EXPANDED	86	\$	92.09	
Motel, hotel	49	\$ 20.09	FTTH BASIC W/HD	364	\$	98.40	
Commercial	101	\$ 13.92	FTTH EXPANDED W/HD	600	\$	106.78	
Converter			LOCAL PROGRAMMING		\$	27.14	
 Residential 					1		
Non-residential					1		

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SHELLSBURG CABLEVISION, INC 024965 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2 B'CAST 3 TYPE 4 DISTANT? 5 BASIS OF 6 LOCATION OF STATION SIGN **CHANNEL** OF (Yes or No) **CARRIAGE NUMBER STATION** (If Distant) **KGAN** 2 N No **CEDAR RAPIDS, IA KWWL** 7 N No WATERLOO, IA See instructions for additional information **KCRG** 9 N No CEDAR RAPIDS, IA on alphabetization. **KRIN** 12 WATERLOO, IA N No **KWKB** 20 N **IOWA CITY, IA** No **KFXA** 28 Ν No CEDAR RAPIDS, IA **KPXR** 48 N No CEDAR RAPIDS, IA

FORW SAJE. FAGE 3.					OVOTEM ID#	
SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program base	system during the country of the cou	ne accounting n June 24, 198 4), or 76.63 (re d in the next p	period, except (11, permitting the eferring to 76.61 aragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; ar	and low power television stations) only on a part-time basis under in network programs [sections id (2) certain stations carried on a	G Primary Transmitters:
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eac each multicast stream cast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servic Column 5: If you heable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and stron "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column 6: Give the FCC.	CC rules, regular here in space only on a substand also in spation and also in spation and also in spation and also in spation associated with a spation associated with a case. For example stem carried the in each case we entering the le cast), "E" (for no ese terms, see pation is outside ice area, see pation is outside ice area, see pation of a distant static icion on a part-tiricion of a distant is entered into or a primary transis simulcasts, also aree categories, e location of each canadian station canadian station and a canadian station and a categories, e location of each canadian station and a canadian station and a categories, e location of each canadian station and a canadian station and a categories, e location of each canadian station and a canadian station and a canadian station and a categories, e location of each canadian station and a canadian an	tions, or author G—but do list citute basis. Ince I, if the state erning substitute sign. Do not read a station acceptrams must be the FCC has, WRC is Challe station. Whether the stater "N" (for nead and ince basis because (v) of the station and uning the ame basis because multicast streen or before Jumitter or an assisted the formal and the station. For the station, if any, give	orizations: it in space I (the tion was carried ute basis station eport origination ording to its ove be reported in co as assigned to th unnel 4 in Washin ation is a network twork), "N-M" (for educational), or e general instruction accounting perior use of lack of acc am that is not su ne 30, 2009, bet isociation repres you carried the co of the general in U.S. stations, li e the name of the	e Special Statement both on a substitus, see page (v) of program services of the air designation of the services of the television station of the television of the televi	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your string "LAC" if your cable system apacity. payment because it is the subject em or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. to which the station is licensed by the which the station is identifed.	Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						T
SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
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				1
BLE SYSTEM: EVISION, INC			SYSTEM ID# 024965	Name
EVISION				
vevery television sta uring the accounting fect on June 24, 198 and (4), or 76.63 (ru plained in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; ar	only on a part-time basis under n network programs [sections nd (2) certain stations carried on a	G Primary Transmitters:
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With respect to any distant stations carried by your carregulations, or authorizations: pace G—but do list it in space I (the Special Statement substitute basis. In space I, if the station was carried both on a substitute of concerning substitute basis stations, see page (v) of as call sign. Do not report origination program services and with a station according to its over-the-air designation least streams must be reported in column 1 (list each number the FCC has assigned to the television station ample, WRC is Channel 4 in Washington, D.C. This mained the station. The letter "N" (for network), "N-M" (for network multicated the station. The see page (v) of the general instructions located in the station during the accounting period. Indicate by enterpart-time basis because of lack of activated channel can station during the accounting period. 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FORM SA3E, PAGE 3.						1		
LEGAL NAME OF OWN SHELLSBURG					SYSTEM ID# 024965	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these th Column 6: Give the	C rules, regula here in space only on a substand also in space formation concurr. In the station's call associated with -2". Simulcast sechannel numbers, regular carried the in each case we entering the left east), "E" (for not see terms, see pation is outside the distant station on a part-tinion of a distant entered into or a primary transmissimulcasts, also ree categories, a location of each canadian station on space categories, a location of each canadian station on space categories, a location of each canadian station on space categories, a location of each canadian station on space categories, a location of each canadian station on space categories, a location of each canadian station on space categories, a location of each canadian station on space categories, a location of each canadian station of each canadian station of each canadian station on space categories, a location of each canadian station of each canadian station on space categories, a location of each canadian station of each canadian s	tions, or author G—but do list itute basis. ce I, if the staterning substitution in a station according to the station according to the station. The station according to the station. The station according to the station according to the station. The station according to the station according to the station according to the station and the station according to the station according to the station. The station according to the station according	orizations: it in space I (the tion was carried ute basis station: eport origination cording to its ove be reported in co as assigned to th annel 4 in Washin etwork), "N-M" (for educational), or e general instruction carea, (i.e. "di general instruction counting period cuse of lack of accounting period cuse of	e Special Statemer both on a substitus, see page (v) of program services r-the-air designation of the television station of the television shocated in the stant"), enter "Yes ons located in the plete column 5, storated the television of the television of the television of the television of the plete column 5, storated the television of the primary of the television of the tel	the basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example in for broadcasting over-the-air in may be different from the channel sendent station, or a noncommercial st), "I" (for independent), "I-M" inmercial educational multicast). If not, enter "No". For an expaper SA3 form. "If not, enter "No". For an expaper SA3 form. It is the subject em or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.			
		CHANN	EL LINE-UP	AE				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator statement of the space of the system during the accounting period, except (1) stations of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4) substitute program basis, as explained in the next paragraph.	certain network programs [sections)]; and (2) certain stations carried on a Primary Transmitters:
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator statement of the carried by your cable system during the accounting period, except (1) stations of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4)).	ons and low power television stations) rried only on a part-time basis under certain network programs [sections)]; and (2) certain stations carried on a Primary Transmitters:
In General: In space G, identify every television station (including translator statement of the carried by your cable system during the accounting period, except (1) stations of FCC rules and regulations in effect on June 24, 1981, permitting the carriage of 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4)).	certain network programs [sections)]; and (2) certain stations carried on a Primary Transmitters:
Substitute Basis Stations: With respect to any distant stations carried by y 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 St 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 s basis. For further information concerning substitute basis stations, see page in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program see ach multicast stream associated with a station according to its over-the-air de cast stream as "WETA-2". Simulcast streams must be reported in column 1 (lis WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television its community of license. For example, WRC is Channel 4 in Washington, D.C. on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an educational station, by entering the letter "N" (for network), "N-M" (for network r (for independent multicast), "E" (for noncommercial educational), or "E-M" (for Information of local service area, see page (v) of the general instructions located Column 4: If the station is outside the local service area, (i.e. "distant"), enter planation of local service area, see page (v) of the general instructions located Column 5: If you have entered "Yes" in column 4, you must complete column cable system carried the distant station during the accounting period. Indicate the carried the distant station on a part-time basis because of lack of activated chards a written agreement entered into on or before June 30, 2009, between a cab	ement and Program Log)—if the postitute basis and also on some other v) of the general instructions located vices such as HBO, ESPN, etc. Identify gnation. For example, report multi- each stream separately; for example station for broadcasting over-the-air in his may be different from the channel independent station, or a noncommercial ulticast), "I" (for independent), "I-M" incommercial educational multicast). in the paper SA3 form. "Yes". If not, enter "No". For an ex- the paper SA3 form. 5, stating the basis on which your entering "LAC" if your cable system nel capacity. valty payment because it is the subject system or an association representing
the cable system and a primary transmitter or an association representing the ption "E" (exempt). For simulcasts, also enter "E". If you carried the channel on a explanation of these three categories, see page (v) of the general instructions I Column 6: Give the location of each station. For U.S. stations, list the comm FCC. For Mexican or Canadian stations, if any, give the name of the communit Note: If you are utilizing multiple channel line-ups, use a separate space G for	y other basis, enter "O." For a further cated in the paper SA3 form. Inity to which the station is licensed by the with which the station is identifed.
CHANNEL LINE-UP AF	
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS (CHANNEL OF NUMBER STATION) (Yes or No) CARRIA (If Distant)	GE C

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
SHELLSBURG	CABLEVISIO	ON, INC			024965	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you heable 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 distant stat for the retransmiss of the cable system and ston "E" (exempt). For explanation of these the Column 6: Give the	G, identify every eystem during the cons in effect on 6.61(e)(2) and (4.5 is, as explained stations: With record only on a substand also in spanformation concurr. The station's call associated with the constant of a distant the entered into or a primary transmissimulcasts, also are categories, the constant of the co	r television state accounting June 24, 1984), or 76.63 (rd in the next pespect to any tions, or authors, or author	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its over be reported in compart of the same assigned to the tion is a network etwork), "N-M" (for educational), or egeneral instruction is a network of lack of accounting period use of la	1) stations carried a carriage of certain (e)(2) and (4))]; are carried by your case. Special Statement both on a substitution, see page (v) of program services are the air designation of the television station of the television of the te	r. If not, enter "No". For an expaper SA3 form. tating the basis on which your string "LAC" if your cable system apacity. payment because it is the subject em or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. to which the station is licensed by the which the station is identifed.	G Primary Transmitters: Television
-	<u> </u>	CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

				OVOTEM ID#	
				024965	Name
RS: TELEVISIO	N				
ystem during the ons in effect on 61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 4), or 76.63 (re d in the next p	period, except (1, permitting the eferring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; ar	only on a part-time basis under in network programs [sections ad (2) certain stations carried on a	Primary Transmitters:
CC rules, regular here in space only on a substrand also in spatformation concorm. In station's call associated with associated with associated with a carried the in each case where the cast), "E" (for not see terms, see pation is outside ce area, see pation is outside ce area, see pation on a part-tirion of a distant static ion on a part-tirion of a distant entered into or a primary transr simulcasts, also aree categories, e location of each canadian station canadian station canadian station of each canadian station of each canadian station of each canadian station of station of station of each canadian station of station of station of station of each canadian station of s	tions, or author G—but do list itute basis. ce I, if the sta erning substitute basis. The state of a station acceptation of the station acceptation of the station. The station acceptation of the station of the station. The station of the local serving (v) of the station of the local serving (v) of the station of the local serving the station of the station. For the station of the station. For the station of	orizations: it in space I (the tion was carried ute basis station eport origination ording to its ove be reported in co as assigned to th unnel 4 in Washin ation is a network etwork), "N-M" (for educational), or e general instruction accounting perior use of lack of acc am that is not su ne 30, 2009, bet esociation repres you carried the co of the general ir U.S. stations, lie the name of the	e Special Statement both on a substitus, see page (v) of program services of the air designation of the services of the television station of the television of the televi	ant and Program Log)—if the stee basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example on for broadcasting over-the-air in may be different from the channel sendent station, or a noncommercial set), "I" (for independent), "I-M" numercial educational multicast). See paper SA3 form. See "If not, enter "No". For an expaper SA3 form. Seating the basis on which your sering "LAC" if your cable system apacity. Payment because it is the subject eem or an association representing to transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form.	Television
g multiple chan		•		nannei iine-up.	
2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
	CABLEVISIO CRS: TELEVISIO G, identify every system during the ons in effect or of 6.61(e)(2) and (a sis, as explained the control of the co	system during the accounting ons in effect on June 24, 198 (a.61(e)(2) and (4), or 76.63 (resis, as explained in the next postations: With respect to any CC rules, regulations, or author here in space G—but do list only on a substitute basis, and also in space I, if the state formation concerning substiturm. In station's call sign. Do not reason associated with a station accounty. Simulcast streams must be channel number the FCC hase. For example, WRC is Charter case, "E" (for noncommercial set terms, see page (v) of the cast), "E" (for noncommercial set terms, see page (v)	CABLEVISION, INC ERS: TELEVISION G, identify every television station (including to system during the accounting period, except (cons in effect on June 24, 1981, permitting the deficiency) and (4), or 76.63 (referring to 76.61 sis, as explained in the next paragraph. Stations: With respect to any distant stations: Crules, regulations, or authorizations: There in space G—but do list it in space I (the only on a substitute basis. and also in space I, if the station was carried formation concerning substitute basis station associated with a station according to its over a channel number the FCC has assigned to the channel number the FCC has assigned to the channel number the station is a networ entering the letter "N" (for network), "N-M" (for east), "E" (for noncommercial educational), or set terms, see page (v) of the general instruction is outside the local service area, (i.e. "does area, see page (v) of the general instruction on a part-time basis because of lack of action of a distant multicast stream that is not sue entered "Yes" in column 4, you must come distant station during the accounting periodion on a part-time basis because of lack of action of a distant multicast stream that is not sue entered into on or before June 30, 2009, bet a primary transmitter or an association repressimulcasts, also enter "E". If you carried the caree categories, see page (v) of the general instruction of each station. For U.S. stations, licenadian stations, if any, give the name of the grandler channel line-ups, use a separate such a primary transmitter or an association repressimulcation of each station. For U.S. stations, licenadian stations, if any, give the name of the grandler channel line-ups, use a separate such a primary transmitter or an association of the general instruction. For U.S. stations, licenadian stations, if any, give the name of the grandler channel line-ups, use a separate such as the process of the general instruction.	CABLEVISION, INC Grest Television Grest Television Grest dentify every television station (including translator stations a system during the accounting period, except (1) stations carried ons in effect on June 24, 1981, permitting the carriage of certain (a.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; are sis, as explained in the next paragraph. 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				SYSTEM ID# 024965	Name
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2. B'CAST CHANNEL NUMBER	CHANN 3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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For U.S. stations, list the community with a multiple channel line-ups, use a s	ABLEVISION, INC SETELEVISION identify every television station (including translator stations and low power television stations) stem during the accounting period, except (1) stations carried only on a part-time basis under ns in effect on June 24, 1981, permitting the carriage of certain network programs [sections in 16(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (2)); and (2) certain stations carried on a sa sexplained in the next paragraph. ations: With respect to any distant stations carried by your cable system on a substitute program rules, regulations, or authorizations: are in space G—but do list it in space I (the Special Statement and Program Log)—if the nly on a substitute basis. and also in space I, if the station was carried both on a substitute basis and also on some other remation concerning substitute basis stations, see page (v) of the general instructions located in. station's call sign. 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The entered "Yes" in column 4, you must complete column 5, stating the basis on which your et elisant station during the accounting period. Indicate

FORW SASE, FAGE 3.					OVOTEM ID#	
SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the ons in effect on 6.61(e)(2) and (4 sis, as explained	ne accounting I June 24, 198 4), or 76.63 (re d in the next p	period, except (1, permitting the eferring to 76.61 aragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections id (2) certain stations carried on a	Primary Transmitters:
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWNE
SHELLSBURG (
PRIMARY TRANSMITTER
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FORM SA3E. PAGE 3.					OVOTEM ID	u l
SHELLSBURG					SYSTEM ID: 024965	Name
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						ı
LEGAL NAME OF OWNE					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTER						
In General: In space G, carried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76.6 substitute program basis	identify every stem during the ns in effect on 61(e)(2) and (4 s, as explaine	television stane accounting June 24, 198), or 76.63 (red) of the next p	period, except (31, permitting the eferring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections d (2) certain stations carried on a	G Primary Transmitters:
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For U.S. stations, list the community stations, if any, give the name of the community with rechannel line-ups, use a separate space G for each community with the channel line-ups, use a separate space G for each community with rechannel line-ups, use a separate space G for each community with rechannel line-ups, use a separate space G for each community with rechannel line-ups, use a separate space G for each community with rechannel line-ups, use a separate space G for each community with rechannel line-ups, use a separate space G for each community with rechannel line-ups.	vision every television station (including translator stations and low power television stations) ing the accounting period, except (1) stations carried only on a part-time basis under ect on June 24, 1981, permitting the carriage of certain network programs [sections and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a lained in the next paragraph. 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FORM SA3E, PAGE 3.						1
LEGAL NAME OF OWN SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on .61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 I), or 76.63 (re d in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	1) stations carried carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections id (2) certain stations carried on a ble system on a substitute program	G Primary Transmitters: Television
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				SYSTEM ID# 024965	Name
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2. B'CAST CHANNEL NUMBER	CHANN 3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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Simulcast streams must be reported in column 1 (list each entering the letter "N" (for network), "N-M" (for network multicates), "E" (for noncommercial educational), or "E-M" (for no	CABLEVISION, INC RS: TELEVISION Is, identify every television station (including translator stations and low power television stations) ystem during the accounting period, except (1) stations carried only on a part-time basis under ones in effect on June 24, 1981, permitting the carriage of certain network programs [sections 61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a is, as explained in the next paragraph. Lations: With respect to any distant stations carried by your cable system on a substitute program to rules, regulations, or authorizations: here in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis. and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located m. In station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-2º. Simulcast streams must be reported in column 1 (list each stream separately; for example channel number the FCC has assigned to the television station for broadcasting over-the-air in e. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station. In each case whether the station is a network station, an independent station, or a noncommercial entering the letter "N" (for network), "N-M" (for network multicast), "If (for independent), "I-M" ast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form. Liton is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an exage rase, see page (v) of the general instructions located in the paper SA3 form. Liton is outside the local service area, (i.e. "dista

FORW SASE, FAGE S.					EVETEM ID#	
SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space (carried by your cable's FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 oc Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy	G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With record or record or a substant also in spate formation concerm. he station's call associated with -2". Simulcast see channel numbers tem carried the statem carried the castem castem carried the castem c	r television starte accounting a June 24, 198 1), or 76.63 (rd in the next pespect to any tions, or authors are the station according to the station.	period, except (81, permitting the eferring to 76.61 paragraph. distant stations prizations: it in space I (the tion was carried ute basis station eport origination cording to its over be reported in cas assigned to the tion I washing the tion washing to the tion I washing the t	1) stations carried a carriage of certain (e)(2) and (4))]; are carried by your case. Special Statement both on a substitution, see page (v) of program services are the air designation olumn 1 (list each the television station on the program of the television station on the services of the television station of the services of the ser	and low power television stations) only on a part-time basis under in network programs [sections and (2) certain stations carried on a ble system on a substitute program and and Program Log)—if the atte basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example on for broadcasting over-the-air in hay be different from the channel	G Primary Transmitters: Television
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		CHANN	IEL LINE-UP	AQ		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORWISASE, FAGE 3.	== == == == == == == == == == == == ==				EVETEM ID#	
SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy	G, identify every ystem during the one in effect on .61(e)(2) and (4 sis, as explained tations: With rec rules, regula here in space only on a substand also in spa formation concern. h station's call associated with -2". Simulcast se channel numbers of the station of the station of the station's call section of the station's call section of the station of the stat	r television starte accounting a June 24, 198 1), or 76.63 (rd in the next pespect to any tions, or authors are the station according to the station.	period, except (81, permitting the eferring to 76.61 paragraph. distant stations prizations: it in space I (the tion was carried ute basis station eport origination cording to its over be reported in cas assigned to the tion I washing the tion washing to the tion I washing the t	1) stations carried e carriage of certai (e)(2) and (4))]; ar carried by your case Special Statement both on a substitute, see page (v) of program services er-the-air designation olumn 1 (list each the television station ington, D.C. This material expression of the carried expr	and low power television stations) only on a part-time basis under n network programs [sections and (2) certain stations carried on a ble system on a substitute program and and Program Log)—if the atte basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example on for broadcasting over-the-air in the program Log)—if the stream separately; and the channel of the program Log)—if the stream separately; and the channel of the program Log)—if the stream separately; and the channel of the program Log)—if the stream separately; and the channel of the program Log)—if the stream Log in the channel of the program Log)—if the stream Log in the channel of the program Log in the channel of the p	G Primary Transmitters: Television
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		CHANN	IEL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E, PAGE 3.						T
LEGAL NAME OF OWN SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect on .61(e)(2) and (4 sis, as explained	ne accounting June 24, 198 I), or 76.63 (re d in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	1) stations carried carriage of certai (e)(2) and (4))]; an	and low power television stations) only on a part-time basis under n network programs [sections d (2) certain stations carried on a ble system on a substitute program	G Primary Transmitters: Television
basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these th Column 6: Give the	cc rules, regula here in space only on a substand also in spa formation concurr. In station's call associated with -2". Simulcast sechannel numbers, regular carried the in each case we entering the letter on on a part-tinion of a distant entered into or a primary transfer includes a categories, elocation of each categories, elocation of each categories, elocation of each canadian station canadian	tions, or author G—but do list itute basis. ce I, if the staterning substitution in a station according to the station according to the station. The station is the station in commercial page (v) of the station in commercial page (v) of the station in during the ame basis becamen the station or before Junitter or an assister "E". If y see page (v) ch station. For its in any, given it is a station.	orizations: it in space I (the tion was carried ute basis station: eport origination cording to its ove be reported in co as assigned to th annel 4 in Washin etwork), "N-M" (for educational), or e general instruction accounting period cuse of lack of accounting period cuse of l	e Special Statemer both on a substitus, see page (v) of program services r-the-air designation of the television station of the television shocated in the stant"), enter "Yes ons located in the plete column 5, storated the television of the television of the plete column 5, storated the television of the plete column 5, storated the television of the primary hannel on any othest the television of the television	te basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multistream separately; for example in for broadcasting over-the-air in may be different from the channel endent station, or a noncommercial st), "I" (for independent), "I-M" intercial educational multicast). It paper SA3 form. "If not, enter "No". For an expaper SA3 form. atting the basis on which your ring "LAC" if your cable system apacity. Dealer the designation of the paper SA3 form. The paper SA3 form. The subject error and association representing transmitter, enter the designation that is the subject in the paper SA3 form. The p	
		CHANN	EL LINE-UP	AS		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORW SASE, FAGE 3.	ED 05 04 DL 5 01	OTEN 4			SVSTEM ID#	
SHELLSBURG					SYSTEM ID# 024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s	G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explained stations: With record only on a substand also in spatformation concerm. In station's call associated with -2". Simulcast see channel numbers the cast, "E" (for not see terms, see pation is outside ce area, see pation is outside ce area, see pation on a part-tirion of a distant entered into or a primary transisimulcasts, also	r television started accounting a June 24, 1984), or 76.63 (red in the next prespect to any tions, or authors, or authors, or authors, or authors, or authors, or authors, or authors assign. Do not red a station account of the station account of the station. Whether the station, whether the station account of the station and unity of the station or before Junititer or an assign of the station or before Junititer or an assign of the station of the s	period, except (81, permitting the eferring to 76.61 paragraph. distant stations orizations: it in space I (the tion was carried ute basis station eport origination cording to its over be reported in compart of the end o	1) stations carried a carriage of certai (e)(2) and (4))]; are carried by your case. Special Statement both on a substitute, see page (v) of program services are the air designation of the television station of the television of television of the television of television of the television of the television of the television of television of the television of the television of the television of television of the television of televis	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your string "LAC" if your cable system apacity. payment because it is the subject em or an association representing transmitter, enter the designa- ler basis, enter "O." For a further	G Primary Transmitters: Television
Column 6: Give the FCC. For Mexican or C	e location of eac Canadian station	ch station. For ns, if any, give	r U.S. stations, li the name of the	ist the community e community with	I in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
Note: If you are utilizin	g multiple chan		use a separate s EL LINE-UP		hannel line-up.	
	. DIG 4.0T					
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.					OVOTEM ID#			
LEGAL NAME OF OWN					SYSTEM ID#	Name		
SHELLSBURG	CABLEVISIO	JN, INC			024965			
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), 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 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 en								
Note: If you are utilizin	g multiple chan	nel line-ups, ι	use a separate s	pace G for each c	hannel line-up.			
		CHANN	EL LINE-UP	AU				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
SHELLSBURG					024965	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy	G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explained tations: With record or record and also in spate formation concern. A station's call associated with -2". Simulcast sechannel numbers of the control of the co	r television standard tele	period, except (81, permitting the eferring to 76.61 paragraph. distant stations prizations: it in space I (the tion was carried ute basis station eport origination cording to its over the period of the effect of	1) stations carried e carriage of certai (e)(2) and (4))]; an carried by your case Special Statement both on a substitute, see page (v) of program services er-the-air designation olumn 1 (list each the television station ington, D.C. This materiage of carried services er-the-air designation.	and low power television stations) only on a part-time basis under in network programs [sections id (2) certain stations carried on a ble system on a substitute program int and Program Log)—if the te basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify on. For example, report multi- stream separately; for example in for broadcasting over-the-air in may be different from the channel endent station, or a noncommercial	G Primary Transmitters: Television
(for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you had cable system carried the carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the	east), "E" (for no se terms, see pation is outside ce area, see pation entered "Ye ne distant static ion on a part-tiri ion of a distant entered into or a primary transsimulcasts, also ree categories, e location of eaccanadian station	oncommercial page (v) of the the local servage (v) of the ges" in column on during the amelians becamulticast strem or before Jumitter or an aspect of enter "E". If give see page (v) ch station. Forns, if any, give intel line-ups, to	educational), or a general instructive area, (i.e. "digeneral instructive 4, you must comaccounting perioduse of lack of actam that is not sune 30, 2009, bet association repressor of the general in r U.S. stations, lie the name of the use a separate s	"E-M" (for noncontions located in the istant"), enter "Yes ons located in the inplete column 5, std. Indicate by entectivated channel caubject to a royalty ween a cable systemating the primary shannel on any other instructions located ist the community with a pace G for each continuations and the community with a pace G for each continuations located and the community with a pace G for each continuations located and the community with a pace G for each continuations located and the community with a pace G for each continuations located and the community with a pace G for each continuations located and the community with a pace G for each continuations located and the continuations locate	r. If not, enter "No". For an expaper SA3 form. ating the basis on which your ring "LAC" if your cable system apacity. payment because it is the subject em or an association representing ransmitter, enter the designa- er basis, enter "O." For a further in the paper SA3 form. to which the station is licensed by the which the station is identifed.	
	T	CHANN	IEL LINE-UP	AV		<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.						1	
SHELLSBURG					SYSTEM ID# 024965	Name	
PRIMARY TRANSMITTE		•					
In General: In space G carried by your cable sy FCC rules and regulation 76.59(d)(2) and (4), 76. substitute program bas	i, identify every ystem during the ons in effect on 61(e)(2) and (4 is, as explaine	television stane accounting June 24, 198), or 76.63 (red) to in the next p	period, except (31, permitting the eferring to 76.61 paragraph.	1) stations carried e carriage of certai (e)(2) and (4))]; ar	and low power television stations) only on a part-time basis under n network programs [sections d (2) certain stations carried on a	Primary Transmitters: Television	
substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 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 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							
The same and annual same annual sa	,a.a.p.o oa		•				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	CHANN 3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SHELLSBURG CABLEVISION, INC 024965 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 AM or FM S/D LOCATION OF STATION

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2023/2
LEGAL NAME OF OWNER OF						S	SYSTEM ID#	Name
SHELLSBURG CABLE	VISION, II	NC					024965	Numo
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	IT AND PROGRAM LOG	i				ı
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe	riod, under spe	cific present and former FC0	C rules, regula	ations, or au	thorizations. F	or a further	Substitute
1. SPECIAL STATEMENT								Carriage:
During the accounting per broadcast by a distant star	iod, did you			s, any nonne	twork televi		X No	Special Statement and Program Log
Note: If your answer is "No' log in block 2.	', leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ıst complet	e the program	1	
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 progran Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. Stated as "6:00–6:30 p.m."	itute prograce, please a of every no distant statisgulations, o tion. Do no ucy" or "NE or was broad sign of the sadian statica th and day re "5/7." es when the Example: a er "R" if the	am on a separa attach additional network televition and that your authorizations to use general conditional described as a separation broadca on solution of the separation broadca on solution of the separation broadca on solution (the separation broadca on solution of the separation broadca on solution (the separation of the separatio	al pages. Ision program (substitute pur cable system substitute pur cable system substitute pur cable system substitute pur cable system substitute programs. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." "Yes." Otherwise enter "Nating the substitute programs are community to which the community with which the stem carried the substitute pur carried the substitute pur carried by a system from 6:01:10 was substituted for programs.	rogram) that, at for the progeral instruction "basketball". o." m. station is licentation is identation is identation is identation. Use table system. 5 p.m. to 6:2	during the ramming or ons located List specifinsed by the stiffied). In unmerals, List the times: 30 p.m. so our system	accounting f another stati in the paper ic program FCC or, in with the mont nes accurately should be was required	th /	
to delete under FCC rules a gram was substituted for pr effect on October 19, 1976.	ogramming							
					EN SUBST		7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	E PROGRAM 3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES TO	FOR DELETION	
	100 01 110	OTTLE CICIT	i. Cirtioit C LOCATION	7410 0711	1110111	10		
					 		 	
							 	
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ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 6. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 **PART-TIME CARRIAGE LOG** In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J 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 Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS HOURS DATE ТО DATE **FROM** TO **FROM**

LEGA	AL NAME OF OWNER OF CABLE SYSTEM: ELLSBURG CABLEVISION, INC		SYSTEM ID# 024965	Name					
Inst all a (as	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's secc identifed in space E) during the accounting period. For a further explanation of how to de (vii) of the general instructions.	ondary transmis	ssion service	K Gross Receipts					
	Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amour	880,195.93 nt of gross receipts)						
ConConIf youIf you	YRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. Four system did not carry any distant television stations, leave block 3 blank. Enter the arternation block 1 on line 1 of block 4, and calculate the total royalty fee. Four system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.			L Copyright Royalty Fee					
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b $\!$	e entered on li	ine 1 of						
3 be	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.								
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be entered	on line						
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	e is 1.064 perc	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.	<u> </u>	880,195.93						
	This is your minimum fee.	\$	9,365.28						
Block	space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? Yes—Complete the DSE schedule. X No—Leave block 3 below blank and complete line 1, block 4. Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero								
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00						
	Line 3. Add lines 1 and 2 and enter here	\$	-						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, ente	\$	9,365.28	Cable systems submitting additional					
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE	\$	725.00	additional fees. Division for the					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	10,090.28	appropriate form for submitting the					
	EFT Trace # or TRANSACTION ID #			additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to								

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC	SYSTEM ID# 024965							
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations. 2. Enter the total number of activated channels on which the cable system carried television broadcast stations 7 and nonbroadcast services								
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)								
for Further Information	Name LAINIE SCOTT Telephone 319-436-2224 Address 124 MAIN ST, PO BOX 389 (Number, street, rural route, apartment, or suite number)								
	SHELLSBURG, IA 52332 (City, town, state, zip)								
	Email apinvoice@usacomm.coop Fax (optional)								
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)								
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)								
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or								
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.	n							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]								
	X /s/ Curtis Eldred								
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	: "F2"							
	Typed or printed name: Curtis Eldred								
	Title: General Manager (Title of official position held in corporation or partnership)								
	Date: February 28, 2024								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
SHELLSBURG CABLEVISION, INC	024965	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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system service of providing secondary transmissions of primary broadcast transmitters, the system sha scribers and amounts collected from subscribers receiving secondary transmissions pursuant to For more information on when to exclude these amounts, see the note on page (vii) of the general instraper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondar made by satellite carriers to satellite dish owners? X NO	for the basic I not include sub- section 119." ructions in the	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 of For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 to		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	-	
x_	days	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-	
	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further a contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	ssistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyrique 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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2023/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

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

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

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 (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

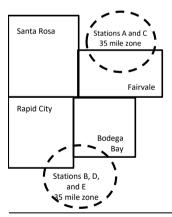
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



Distant Stations Carr	ied	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00
 \$6.384.00

	\$4,00 1100									
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: 2023/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

DSE SCHEDULE, PAGE	= 11. (CONTINUED)										
1	LEGAL NAME OF OWNER OF CABL	S	SYSTEM ID#								
ı	SHELLSBURG CABLEV		024965								
	SUM OF DSEs OF CATEGOR	Y "O" STATION	IS:								
	 Add the DSEs of each station 										
	Enter the sum here and in line		0.00								
2	Instructions:	Ni 11 - 1 i - 4 4	-:	:	- I-# "O" iI						
	In the column headed "Call S of space G (page 3).	olgn": list the cal	i signs of all distant stations i	dentified by the	e letter "O" in column 5						
Computation	In the column headed "DSE"			as "1.0"; for ea	ach network or noncom-						
	mercial educational station, give the DSE as ".25."										
Category "O"			CATEGORY "O" STATION		1						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Add rows as											
necessary.											
Remember to copy all											
formula into new											
rows.											

Name		OWNER OF CABLE SYSTEM: RG CABLEVISION, IN	С				<u> </u>	024965
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-1 Column 6	st the call sign of all distant: For each station, give the correspond with the information of the correspond with the information of the color of t	e number of hours ynation given in space e total number of hom 2 by the figure in al point. This is the tation, give the "typeumn 4 by the figure in	our cable system a J. Calculate only ours that the station column 3, and given basis of carriage value" as "1.0." Fun column 5, and g	carried the station one DSE for each n broadcast over the the result in decovalue" for the station each network of the result in control or each network of the result in t	during the accounting per station. he air during the accounting the air during the accounting the accounting in a column 4. This figure is a column 4. This	ng period. gure must onal station, than the	
Capacity	0.10.101111		CATEGORY LA	C STATIONS:		ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3. N JRS C ID BY S	UMBER OF HOURS TATION ON AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE	6. DS	;E
			÷		=	<u>x</u>	=	
			÷		= -	<u>x</u>		
						x x		
			÷	:	=	x	=	
			÷				<u> </u>	
			÷		=	x x	=	
	Add the DSEs of Enter the su	oF CATEGORY LAC ST of each station. Im here and in line 2 of pa			>	0.00		
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 regular tions 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 deleter 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 the decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper S							e deleted an the third	
		Sl	JBSTITUTE-BA	SIS STATION	S: COMPUTA	TION OF DSEs		
	1. CALL SIGN	2. NUMBER OF	3. NUMBER OF DAYS	4. DSE	1. CALL SIGN	2. NUMBER OF	3. NUMBER OF DAYS	4. DSE
	01014	PROGRAMS	IN YEAR		Ololi	PROGRAMS	IN YEAR	
		÷		=		÷		=
		-				÷		=
		+		=		÷		=
		*		=		÷		
	Add the DSEs	OF SUBSTITUTE-BASIS of each station. Im here and in line 3 of pa			▶	0.00		
5		ER OF DSEs: Give the amos applicable to your system		in parts 2, 3, and	4 of this schedule a	and add them to provide th	e total	
Total Number	1. Number	of DSEs from part 2 ●				·	0.00	
of DSEs	2. Number	of DSEs from part 3 ●					0.00	
	3. Number	of DSEs from part 4 ●			>	•	0.00	
	TOTAL NUMBE	ER OF DSEs				>		0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/2

	OWNER OF CABLES						S	YSTEM ID# 024965	Name
In block A: • If your answer if schedule.	ck A must be comp "Yes," leave the re	mainder of pa	•	of the DSE schedu	ule blank and	complete part	8, (page 16) of the		6
			BLOCK A: 7	ELEVISION MA	ARKETS				Computation of 3.75 Fee
effect on June 24,		schedule—D0	•				C rules and regula	itions in	3.701 66
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re instructions for th Satellite Television	gulations price be DSE Sched on Extension a	or to June 25, 1 dule. (Note: The and Localism A	981. For further exeletter M below refact of 2010.)	planation of prefers to an exe	permitted station mpt multicast s	m was permitted to ons, see the stream as set forth	,	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherec instructions fo E Carried pursus *F A station pre	les and reguled pursuant to on as defined al educationa I station (76.6 r DSE scheduant to individuationsly carried THF station wi	ations cited being the FCC markin 76.5(kk) (76) Istation [76.59] ist) (see paragrule). It was a waiver of FC don a part-time thin grade-B co	6.59(d)(1), 76.61(e) (c), 76.61(d), 76.63 aph regarding subsectorules (76.7) e or substitute basi ontour, [76.59(d)(5	e in effect on .57, 76.59(b), .(1), 76.63(a) 3(a) referring stitution of gra	June 24, 1981 76.61(b)(c), 70 referring to 76 to 76.61(d)] andfathered state e 25, 1981	6.63(a) referring to		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			rksheet on page 14	4 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	•	<u> </u>			<u> </u>	<u> </u>		0.00	
								0.00	
		Е	BLOCK C: CO	MPUTATION OF	3.75 FEE				
Line 1: Enter the	e total number of	DSEs from բ	oart 5 of this s	schedule				-	
Line 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve				-	
	line 2 from line 1 leave lines 4–7 b			•		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 partially
Line 5: Multiply I	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 an	d enter here	e and on line 2	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965										
	_	BLOC	K A: TELEVI	SION MARKETS	(CONTINI	UED)				
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6	
									Computation of 3.75 Fee	
									3.75 Fee	
		<u> </u>								
		<u> </u>								
			-							
		<u> </u>								
		l								
		<u></u>								
		<u> </u>								
		l	11	1	· · · · · · · · · · · · · · · · · · ·	1	1			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC 024965 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. the DSE Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Schedule for Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute -Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B. column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 6. PERMITTED 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT SIGN DSE PERIOD **CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSES

LEGAL NA		EM ID#)24965	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	195.93	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge \$\$\$\$		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC	SYSTEM ID# 024965									
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.										
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1).										
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$										
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here										
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$										
		E. Subtract 4.000 from the total DSEs (the figure on line C in										
		section 2) and enter here										
		F. Multiply line D by line E and enter here										
		Enter here and on line 2, block 4, space L (page 7)										
		Syndicated Exclusivity Surcharge										
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of particle of the total number of DSEs from part 5. sock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. sur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. sur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. sis a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local servare," see page (v) of the general instructions.	ow									
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did y	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?										
		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) ▶ _\$ 880,195	5.93									
	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.)	0.00									
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1)	<u>-</u> _									
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ <u>\$ 6,170.17</u>										
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. D. Multiply line B by line C and enter here.	_									
		E. Add lines A, and D. This is your base rate fee. Enter here	-									
		and in block 3, line 1, space L (page 7)										
		Base Rate Fee	<u> </u>									

DSE SCH	HEDU	ULE. PAGE 17.	ACCOUNTING	G PERIOD: 2023/2
LEGAL N	IAME	OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Marra
SHEL	LSE	BURG CABLEVISION, INC	024965	Name
Section 4	If the	ne figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	Α.	Enter 0.01064 of gross receipts		8
		(the amount in section 1)		
	B	Enter 0.00701 of gross receipts		Computation
		(the amount in section 1) \$	_	of
				Base Rate Fee
	C.	. Multiply line B by 3.000 and enter here > \$		
	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		
		. Add lines A, C, and F. This is your base rate fee.		
	0.	Enter here and in block 3, line 1, space L (page 7)		
		Base Rate Fee	0.00	
receipt exclusive station DSEs. Finally NOTE also co if your How to Step 1 carried the sai Step 3 subscr system Comp groups In each eldent Give subscr	neral: s fron ion, y Divide or th and t i: Ade or th and t i: For to th th i: For th i: For th ii: For th th iii: Th	It If any of the stations you carried were partially distant, the statute allows you, in computing or subscribers located within the station's local service area, from your system's total gross reyou must: de all of your subscribers into subscriber groups, each group consisting entirely of subscribers he same group of stations. Next: Treat each subscriber group as if it were a separate cable sethe portion of your system's gross receipts attributable to that group, and calculate a separate dup the separate base rate fees for each subscriber group. That total is the base rate fee for ny portion of your cable system is located within the top 100 television market and the station ute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete bothe system is wholly located outside all major television markets, complete block A only. The each community served, determine the local service area of each wholly distant and each phat community. The each wholly distant and each partially distant station you carried, determine which of your set estation's local service area. A subscriber located outside the local service area of a station is oken, the station is distant to the subscriber.) Find your subscribers into subscriber groups according to the complement of stations to which group must consist entirely of subscribers who are distant to exactly the same complement of have only one subscriber group when the distant stations it carried have local service areas of the base rate fee for each subscriber group: Block A contains separate sections, one for the communities/areas represented by each subscriber group.	eceipts. To take advantage of this state are distant to the same system. Determine the number of e base rate fee for each group. For your system. In is not exempt in part 7, you must in block A and B below. However, coartially distant station you subscribers were located is distant to that station (and, by the host stations. Note that a cable that coincide. In each of your system's subscriber	Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations, and for Partially Permitted Stations
4 of thi 2) any par	is sch portion	stem is located wholly outside all major and smaller television markets, give each station's DS shedule; or, ion of your system is located in a major or smaller televison market, give each station's DSE of this schedule.		
 Add t 	he D	OSEs for each station. This gives you the total DSEs for the particular subscriber group.		

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

• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions

• 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

in the paper SA3 form.

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 024965 SHELLSBURG CABLEVISION, INC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

GAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965											
				TE FEES FOR EAC		BER GROUP SUBSCRIBER GROUN					
	FIRST	SUBSCRIBER GRO			JP 0	9					
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
								Base Rate Fe			
								and			
								Syndicated			
								Exclusivity			
								Surcharge for			
						 		Partially			
								Distant			
								Stations			
						.					
		<u> </u>					·····				
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00				
·	·					<u>·</u>					
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00				
	THIRD	SUBSCRIBER GRO)UP		FOURTH	SUBSCRIBER GRO	JP				
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				
				11							
			criber group as	s shown in the boxes a	above.						
Enter here and in bloc						\$	0.00				

	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HELLSBURG CABLEVISION, INC 024965									
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	FIFTH	SUBSCRIBER GRO	UP		SIXTH	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		
				1		-		Distant		
						-		Stations		
Tatal DOFa			0.00	Tatal DCCa			0.00			
Total DSEs		•		Total DSEs	d C	•	0.00			
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco		\$	0.00			
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	····			-						
				1						
	····					-				
	····		···							
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 C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
				 						
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$				

	024965					<u> </u>		SHELLSBURG CA
		ES FOR EACH SUBSCRIBER GROUP						E
9	JP	SUBSCRIBER GROU	TENTH			SUBSCRIBER GRO	NINTH	_
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I	BOL	O/ LE CICIV	DOL	O/ALL OIGH	DOL	O/ LE CICIT	DOL	O/ LEE CICIV
and								
Syndicate								
Exclusivit								
Surcharg								
for								
Partially								
Distant								
Stations								
		H						
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	ıd Groun	Gross Receipts Secor	0.00	\$	roun	Gross Receipts First Gr
	0.00		la Group	Gross receipts occor	0.00	Ψ	Toup	iross recorpts i irst Or
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First Gr
	JP	SUBSCRIBER GROU	TWELVTH		JP	SUBSCRIBER GRO	LEVENTH	E
	0		COMMUNITY/ AREA	0			OMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
						<u> </u>		
							···	
			<u> </u>		<u></u>		<u></u>	
			•					
						<u> </u>		
			<u> </u>				<u> </u>	
	0.00			Total DSEs	0.00			otal DSEs
	_							
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Proup	Gross Receipts Third G

	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HELLSBURG CABLEVISION, INC 024965									
E	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	RTEENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP 0	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
			<u></u>					Exclusivity Surcharge		
			···					for		
								Partially		
								Distant		
								Stations		
			<u></u>							
										
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00			
F	FTEENTH	SUBSCRIBER GROU	JP		SIXTEENTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
										
Total DSEs	_		0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	<u></u>	0.00	Gross Receipts Four	th Group	\$	0.00			
·					-					
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
				**						
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# IELLSBURG CABLEVISION, INC 024965									
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	NTEENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
						-		Surcharge for		
			<u> </u>					Partially		
								Distant		
								Stations		
			-			H				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00			
	INTEENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			<u> </u>							
						-				
			<u></u>							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third (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			
				Ш						
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 1ELLSBURG CABLEVISION, INC 024965									
[BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	ITY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
	···							Exclusivity Surcharge		
								for		
								Partially		
								Distant		
								Stations		
	···									
	···					-				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00			
	TY-THIRD	SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP 0			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	···					-				
						<u> </u>				
		<u> </u>				H				
	···									
					••••	-				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			iber group a	as snown in the boxes a	bove.	\$				

LEGAL NAME OF OWNE						S	024965	Name
E	BLOCK A:	COMPUTATION OF	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
TWEN	ITY-FIFTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco		\$	0.00	
	SEVENTH	SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	as snown in the boxes a	ibove.	\$		

	024965					O14, 114O	IDEE VIOI	SHELLSBURG CA	
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	E	
۵	JP	SUBSCRIBER GROU	THIRTIETH		JP	SUBSCRIBER GRO	ITY-NINTH		
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
Computati of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
and									
Syndicate									
Exclusivit									
Surcharg									
for									
Partially									
Distant									
Stations									
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	0.00			T	0.00				
	0.00	-		Total DSEs	0.00	al DSEs			
	0.00	\$	d Group	Gross Receipts Secon	0.00	oss Receipts First Group \$ 0.00			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	sase Rate Fee First Group \$ 0.00			
	JP	SUBSCRIBER GROU	Y-SECOND	THIRT	JP	SUBSCRIBER GRO	RTY-FIRST	THIR	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
			<u></u>						
			<u> </u>						
		H			<u></u>	-	····		
			<u></u>						
			-						
	0.00			Total DSEs	0.00			otal DSEs	
						ross Receipts Third Group \$ 0.00			
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	

	GAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
				ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	TY-THIRD	SUBSCRIBER GROU		ii		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity Surcharge		
								for		
								Partially		
								Distant		
								Stations		
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00				Gross Receipts Seco	ond Group	\$	0.00			
Base Rate Fee First Group \$ 0.00				Base Rate Fee Seco	and Group	\$	0.00			
THIF	RTY-FIFTH	SUBSCRIBER GROU	JP	TH	HIRTY-SIXTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						-				
						-				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	<u> </u>	0.00	Gross Receipts Four	th Group	\$	0.00			
·	*				•					
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	bove.	\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# O24965									
				ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	SEVENTH	SUBSCRIBER GROU		ii		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
						-		Surcharge for		
	···					-		Partially		
								Distant		
								Stations		
						H				
						H				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	ross Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00					
Base Rate Fee First Group \$ 0.00				Base Rate Fee Seco	ond Group	\$	0.00			
THIR	TY-NINTH	SUBSCRIBER GROU	JP		FORTIETH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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	···					-				
						-				
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Proup	•	0.00	Gross Receipts Four	th Group	•	0.00			
TOTOSS NECCIPIS THIIU C	лоир	Ψ	0.00	Oloss Necelpis Poul	ai Group	Ψ	3.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
B B-4- 5 A		- for a formal of	:I	··						
Base Rate Fee: Add the Enter here and in block			inei group a	as shown in the doxes a	IDUVE.	\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
[BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
FOF	RTY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity Surcharge		
	···							for		
								Partially		
								Distant		
								Stations		
	···	 				-				
Total DSEs		-	0.00	Total DSEs			0.00			
ross 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			
	TY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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	<u></u>		ļ							
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	s				
	.,, 0	(I==0= */								

	EGAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
				ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	RTY-FIFTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
								Surcharge for		
								Partially		
								Distant		
								Stations		
						H				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	ross Receipts First Group \$ 0.00				nd Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00			
FORTY-	SEVENTH	SUBSCRIBER GROU	JP	FOR	RTY-EIGHTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
	-				•					
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Dana Data Es . A 1111	- h	food for soul	ih	ale arreste de la	hava					
Base Rate Fee: Add th Enter here and in block			inei group a	as shown in the doxes a	buve.	\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# HELLSBURG CABLEVISION, INC 024965									
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	TY-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
						-		Surcharge for		
	···				····	-		Partially		
								Distant		
								Stations		
						H				
			-			H				
					••••					
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00			
FIF	TY-FIRST	SUBSCRIBER GROU	JP	FIF	TY-SECOND	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						H				
						H				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00			
Base Rate Fee: Add th			iber group a	as shown in the boxes a	bove.					
Enter here and in block	პ, iine 1, s	pace ∟ (page 7)				\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
				ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	TY-THIRD	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
						-		Surcharge for		
								Partially		
								Distant		
								Stations		
						H				
						H				
Total DSEs			0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00				Gross Receipts Seco	and Group	\$	0.00			
	Base Rate Fee First Group \$ 0.00				ond Group	\$	0.00			
	-TY-FIFTH	SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP 0			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						H				
						H				
		<u> </u>								
						H				
	<u> </u>									
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
				Щ						
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	bove.	\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965									
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP				
	-SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
						-		Surcharge for		
			<u> </u>			-		Partially		
								Distant		
								Stations		
						H				
			-			H				
Total DSEs			0.00	Total DSEs			0.00			
ross 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			
FIF	TY-NINTH	SUBSCRIBER GRO	UP		SIXTIETH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						-				
			<u> </u>			·				
			<u> </u>			·				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00			
	P	·			C. Gup	<u>-</u>				
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00			
				++						
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
[BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
SIX	TY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU	JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity Surcharge		
								for		
						-		Partially		
								Distant		
								Stations		
						-				
Total DSEs		-	0.00	Total DSEs			0.00			
ross Receipts First Group \$ 0.00				Gross Receipts Seco	nd Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00			
SIX	TY-THIRD	SUBSCRIBER GROU	JP	SIX	TY-FOURTH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	···									
						-				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Base Rate Fee: Add th			iber group a	as shown in the boxes a	bove.					
Enter here and in block	3, line 1, s∣	pace L (page 7)				\$				

	EGAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
				ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	CTY-FIFTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
						-		Surcharge for		
	<u> </u>		······································		····			Partially		
								Distant		
								Stations		
	-					H				
			••••••		••••					
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	ross Receipts First Group \$ 0.00				nd Group	\$	0.00			
Base Rate Fee First G	roup	e	0.00	Base Rate Fee Seco	nd Group	¢	0.00			
		SUBSCRIBER GROU				SUBSCRIBER GROU	-			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
			<u> </u>			-				
						-				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00			
				-11						
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes a	bove.	\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
-	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
SIX	TY-NINTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU	JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
								Exclusivity		
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	···		<u> </u>			H		Partially		
								Distant		
								Stations		
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	···					<u> </u>				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First G	ross Receipts First Group \$ 0.00				and Group	\$	0.00			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00			
SEVEN	NTY-FIRST	SUBSCRIBER GRO	UP	SEVEN	ITY-SECOND	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
	···		<u></u>			H				
	···		<u> </u>			H				
Total DSEs			0.00	Total DSEs		 	0.00			
Gross Receipts Third 0	Group	<u> </u>	0.00	Gross Receipts Four	th Group	\$	0.00			
		·				· · · · · · · · · · · · · · · · · · ·				
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
				Н						
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	ibove.	\$				

	GAL NAME OF OWNER OF CABLE SYSTEM: HELLSBURG CABLEVISION, INC 024965									
	BLOCK A:	COMPUTATION O	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP				
	TY-THIRD	SUBSCRIBER GROU		ii		SUBSCRIBER GROU	JP	9		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated		
	···							Exclusivity Surcharge		
								for		
								Partially		
								Distant		
								Stations		
	···									
	···									
Total DSEs			0.00	Total DSEs			0.00			
ross 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			
	NTY-FIFTH	SUBSCRIBER GROU		II		SUBSCRIBER GROU	JP 0			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
					••••	-				
										
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00			
Dana Bata Fa A LLC	. he	for for and	ila	H ale and the state of	h					
Base Rate Fee: Add the Enter here and in block			ıneı group a	as shown in the doxes a	υυν ε .	\$				

SHELLSBURG CA						\$	024965	Name
I	BLOCK A:	COMPUTATION C	OF BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	SEVENTH	SUBSCRIBER GRO	UP	SEVE	NTY-EIGHTH	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			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
				-				
			····	-				
	···			1		H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G		\$	0.00	Base Rate Fee Second		\$	0.00	
	TY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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	th Group	\$	0.00	
Page Pote For Third C	`roup		0.00	Page Bate Fee Fee	th Crown		0.00	
Base Rate Fee Third G	oroup	\$	0.00	Base Rate Fee Four	ит Стоир	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	s shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE SHELLSBURG CA						S	YSTEM ID# 024965	Name
				TE FEES FOR EAC				
	ITY-FIRST	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
						-		Syndicated Exclusivity
	···					H		Surcharge
								for
								Partially
								Distant Stations
	···				•••••	H		Otations
	<u></u>							
								
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FIGH	TV THIPD	SUBSCRIBER GROU	ID.	FIGH	ITV EOLIDTH	SUBSCRIBER GROU	ID.	
COMMUNITY/ AREA		- SOBSCRIBER GROC	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 Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth Group \$ 0.00			0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	s shown in the boxes a	above.	\$		

R GROUP 0 Computation N DSE of Base Rate F and Syndicated Exclusivity			ATE FEES FOR EACH		COMPUTATION (BLOCK A:	
0	SUBSCRIBER GROU	SHTY-SIXTH	II EIG				
Computation N DSE of Base Rate F and Syndicated Exclusivity		EIGHTY-SIXTH SUBSCRIBER GROUP					EIGH
N DSE of Base Rate F and Syndicate Exclusivity		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
Base Rate F and Syndicate Exclusivity	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity	OF ILLE STORY	502	O' LEE GIGIT	502	CALL GIGIT	502	O' ILL O'O'I
Exclusivity							
Surcharge							
for							
Partially							
Distant Stations							
Stations	-						
0.00			Total DSEs	0.00			otal DSEs
0.00	\$	nd Group	Gross Receipts Secon	0.00	Gross Receipts First Group \$ 0.00		
0.00	\$	nd Group	Base Rate Fee Secon	0.00	Base Rate Fee First Group \$ 0.00		
R GROUP	SUBSCRIBER GROU	ITY-EIGHTH	EIGH	UP	SUBSCRIBER GRO	-SEVENTH	EIGHTY-
0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
N DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
······							
				<u>.</u>			
				····		····	
	-			 			
0.00			Total DSEs	0.00			otal DSEs
0.00	<u> </u>	n Group	Gross Receipts Fourt	0.00	<u> </u>	Group	Gross Receipts Third C
	*	. C. 5up	S. 222 / Goodpio i ouit		.*	- · ~~P	
0.00	\$	n Group	Base Rate Fee Fourt	0.00	\$	Group	sase Rate Fee Third G

LEGAL NAME OF OWNE						S	024965	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-NINTH	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
						-		for
						-		Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco	and Group	\$	0.00	
NINE	TY-FIRST	SUBSCRIBER GROU	IP	NINE	TY-SECOND	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	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th	e base rate	e fees for each subscri	ber group a	as shown in the boxes a	bove.			
Enter here and in block						\$		

LEGAL NAME OF OWNE						S	024965	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-THIRD	SUBSCRIBER GROU		ii		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity Surcharge
	···					-		for
						-		Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco	nd Group	\$	0.00	
NINE	TY-FIFTH	SUBSCRIBER GROU	JP	NI	NETY-SIXTH	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	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
·	•				•			
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
D D E		- for a for	U		h			
Base Rate Fee: Add th Enter here and in block			ivei group a	as shown in the doxes a	υυν ε .	\$		

LEGAL NAME OF OWNE SHELLSBURG CA						S	024965	Name
				ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	SEVENTH	SUBSCRIBER GROU		ii		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
	<u> </u>							Surcharge for
						-		Partially
								Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00			Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco	and Group	\$	0.00	
NINE	TY-NINTH	SUBSCRIBER GROU	JP	ONE H	IUNDREDTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•••••	-		
						H		
						1		
Total DSEs	-		0.00	Total DSEs	•		0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th	e base rate	e fees for each subscr	iber group a	as shown in the boxes a	bove.			
Enter here and in block						\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	ED FIRST	SUBSCRIBER GROU		ii ii		SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
				-		H		Syndicated Exclusivity
	······································					H		Surcharge
								for
								Partially
		1						Distant
				-		H		Stations
				1		H		
T-4-1 DOE-			0.00	T-A-I DOE-			0.00	
Total DSEs 0.00 Gross Receipts First Group \$ 0.00				Total DSEs 0.00 Gross Receipts Second Group \$ 0.00				
Gross Receipts First Gi	oup	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	ED THIRD	SUBSCRIBER GROU		11		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		Щ	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 th Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

SHELLSBURG CA						S	024965	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACI	H SUBSCRI	BER GROUP		
	ED FIFTH	SUBSCRIBER GROU		ii i		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs 0.00				Total DSEs 0.00				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second		\$	0.00	
	SEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					····	-		
						-		
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th			ber group a	as shown in the boxes al	bove.			
Enter here and in block	J, III E 1, S	pace L (page /)				¥		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACI	H SUBSCRI	BER GROUP		
	ED NINTH	SUBSCRIBER GROU		ONE HUND	RED TENTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and Syndicated
						-		Exclusivity
					•••••			Surcharge
								for
								Partially
								Distant
								Stations
			ļ					
Total DSEs			0.00	Total DSEs			0.00	
Total DSEs 0.00 Gross Receipts First Group \$ 0.00				Total DSEs 0.00 Gross Receipts Second Group \$ 0.00				
Gross Receipts First Gr	оир	4	0.00	Gloss Necelpts Seco	na Group	Ψ	0.00	
Base Rate Fee First Gi		\$	0.00	Base Rate Fee Secon		\$	0.00	
	LEVENTH	SUBSCRIBER GROU				SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
					•••••	-		
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				-				
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes al	bove.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
[BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	RTEENTH	SUBSCRIBER GROU		ii		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
						-		Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	IFTEENTH	SUBSCRIBER GROU		ii i		SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	-		0.00	Total DSEs	!		0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		
		- *						

SHELLSBURG CA						S	024965	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED SEVE	ENTEENTH	SUBSCRIBER GROU		ii		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	<i></i>		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			<u></u>					Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
			<u></u>					
			····			-		
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		\$	0.00	
	IINTEENTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>			H		
						H		
			···					
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	
			.,					
Enter here and in bloc			nber group a	as shown in the boxes a	above.	\$		

SHELLSBURG CA						S	024965	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED TWE	NTY-FIRST	SUBSCRIBER GROU	IP	ONE HUNDRED TWE	NTY-SECOND	SUBSCRIBER GROUP		Q Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								-
		1						
								Stations
Tatal DCCa			0.00	Total DOEs			0.00	
Total DSEs Gross Receipts First G	roup	•	0.00	Total DSEs Gross Receipts Seco	nd Group	•	0.00	
Gloss Receipts Filst G	Ιουρ	\$	0.00	Gloss Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	NTY-THIRD	SUBSCRIBER GROUP		<u> </u>		SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs		 	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				···				
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

SHELLSBURG CA						•	024965	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TW	ENTY-FIFTH	SUBSCRIBER GROUP		ii		I 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 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TWENT	Y-SEVENTH	SUBSCRIBER GROUP)	ONE HUNDRED TW	'ENTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		····					
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	ENTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRI	ED THIRTIETH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						H		Syndicated Exclusivity
	····					H		Surcharge
								for
								Partially
								Distant
						H		Stations
	····					H		
T			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TH	IIRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED TH	RTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····					H		
						H		
						H		
						H		
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	
				Ш				
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	bove.	\$		

SHELLSBURG CA						S	024965	Name
[BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED THI	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THI	IRTY-FOURTH	SUBSCRIBER GROUP		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
						H		Stations
	···				····	H		
T			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	IRTY-FIFTH	SUBSCRIBER GROUP		<u> </u>		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 G	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
				Н				
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

SHELLSBURG CA						S	024965	Name
[BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	1 SUBSCRI	BER GROUP		
ONE HUNDRED THIRTY	/-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TH	IRTY-EIGHTH	SUBSCRIBER GROUP		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
	···							
T D			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	na Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED THI	RTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···					-		
	<u> </u>							
			<u> </u>					
Total DSEs	-	L.	0.00	Total DSEs		11	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes al	bove.	\$		

LEGAL NAME OF OWNE SHELLSBURG CA						S	024965	Name	
			BASE RA	ATE FEES FOR EACH					
	RTY-FIRST	SUBSCRIBER GROUP				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	
	······································				•••••	H		Distant	
								Stations	
	<u></u>								
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00		
	RTY-THIRD	SUBSCRIBER GROUP		 		SUBSCRIBER GROUP	_		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	<u></u>								
	<u></u>								
	<u></u>								
Total DSEs	-		0.00	Total DSEs	•		0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
Base Rate Fee Third G	Froup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
				<u> </u>					
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes al	bove.	\$			
		(1°9- ° /							

SHELLSBURG CA						S	024965	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FO	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTY-SIXTH	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
					····	-		Exclusivity
	···				····			Surcharge
								for
								Partially
								Distant
								Stations
T-4-1 DOE-			0.00	T-t-I DOE-			0.00	
Total DSEs		•	0.00	Total DSEs	and Canalia	•	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FORTY	/-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	ORTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					····			
						-		
Total DSEs			0.00	Total DSEs			0.00	
	roup	•			h Croun	•		
Gross Receipts Third C	σιουρ		0.00	Gross Receipts Fourt	н Group	φ	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				••				
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWNE SHELLSBURG CA						S	024965	Name	
				ATE FEES FOR EAC					
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
								and	
								Syndicated	
								Exclusivity	
								Surcharge for	
								Partially	
								Distant	
								Stations	
	<u> </u>					-			
	<u>"</u>			-					
Total DSEs			0.00	Total DSEs	•		0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
Base Rate Fee First G	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	P	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	<u></u>			· · · · · · · · · · · · · · · · · · ·					
	<u></u>								
				-	····				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00		
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00		
	•	<u> </u>			•	<u>. </u>			
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes a	bove.	\$			
	, ,, 0	· /9- '/							

LEGAL NAME OF OWNE						S	024965	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-THIRD	SUBSCRIBER GROU		ii		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
						H		Distant Stations
					····			Giationo
					····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Seco		\$	0.00	
	TY-FIFTH	SUBSCRIBER GROU				SUBSCRIBER GROU	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
						-		
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	iroup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add th Enter here and in block			ber group a	as shown in the boxes a	bove.	\$		

						-		SHELLSBURG CA	
		BER GROUP	I SUBSCRII	TE FEES FOR EACH	F BASE RA	COMPUTATION (BLOCK A:	E	
9		SUBSCRIBER GROUP	FTY-EIGHTH			SUBSCRIBER GROU	-SEVENTH	ONE HUNDRED FIFTY	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate I	202	07.22 5.6.1	202	67.22 57517	202	07.122 01011	302	G, 122 G.G.1	
and									
Syndicate									
Exclusivit									
Surcharg for									
Partially			<u></u>		···		<u></u>		
Distant			••••						
Stations									
			-				-		
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	Gross Receipts First Group \$ 0.00			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
		SUBSCRIBER GROUP	ED SIXTIETH	ONE HUNDR)	SUBSCRIBER GROU	FTY-NINTH	ONE HUNDRED FI	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
			••••		••••••••••••				
	0.00			Total DSEs	0.00		-	otal DSEs	
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G	
				Base Rate Fee Fourth	0.00				

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GRO	UP		SECONE	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	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 G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Foul	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ц				
Base Rate Fee: Add t Enter here and in block			criber group a	as shown in the boxes a	above.	\$	0.00	

SHELLSBURG CA						\$	024965	Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FIFTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			0.00				2.22	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	SEVENTH	SUBSCRIBER GRO				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	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 t Enter here and in block			criber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER SHELLSBURG CAE						S	YSTEM ID# 024965	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
	NINTH	SUBSCRIBER GROU			TENTH	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
								Gtations
							<u> </u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	l Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
	.EVENTH	SUBSCRIBER GROU	Р		TWELVTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-	 	
							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block 3	base rate 3, line 1, sp	fees for each subscri	ber group a	s shown in the boxes abo	ove.	\$		

LEGAL NAME OF OWNE							024965	Name
	BLOCK A:	COMPUTATION C	OF BASE RA	ATE FEES FOR EAC	H SUBSCR	BER GROUP		
	RTEENTH	SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<mark></mark>							Syndicated Exclusivity
								Surcharge
	<u></u>							for
								Partially Distant
								Stations
	···							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		SUBSCRIBER GRO	0.00	
COMMUNITY/ AREA	IFIEENIH	SUBSCRIBER GRO	0	COMMUNITY/ AREA				
GOIMMONT IT AREA				COMMONT IT AIRE	······································		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>							
	<u> </u>							
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes a	above.	\$		

AL NAME OF OWNER OF CABLE SYSTEM: ELLSBURG CABLEVISION, INC BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SEVENTEENTH SUBSCRIBER GROUP								
	Name							
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP								
SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP								
MMUNITY/ AREA 0 COMMUNITY/ AREA 0	9							
	Computation							
ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	of							
	Base Rate Fe							
	and							
	Syndicated							
	Exclusivity							
	Surcharge							
	for							
	Partially Distant							
	Stations							
	Otations							
I DSEs Total DSEs 0.00								
ss Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00								
e Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00								
NINTEENTH SUBSCRIBER GROUP TWENTIETH SUBSCRIBER GROUP								
MMUNITY/ AREA 0 COMMUNITY/ AREA 0								
ALL SIGN DSE CALL SIGN DSE CALL SIGN DSE								
DSES Total DSES 0.00								
DSEs								

FORM SA3E. PAGE 19.

SHELLSBURG C			-			\$	024965	Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCR	BER GROUP		
TWE	NTY-FIRST	SUBSCRIBER GRO	UP	TWEN	NTY-SECONE	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			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
				-				
	·····							
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		11		SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····							
				-				
				-				
			••••					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Croup	c c	0.00	Base Rate Fee Four	th Croup	•	0.00	
Dase Nate Fee Hilliu	Огоир	\$	0.00	Dase Nate Fee Poul	ит Отоир	\$	0.00	
Base Rate Fee: Add Enter here and in bloc			criber group a	s shown in the boxes a	above.	\$		

SHELLSBURG CA						\$	024965	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCR	BER GROUP		
	NTY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
	<u></u>	 	<u>.</u>					Surcharge for
	···		····					Partially
								Distant
								Stations
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TWENTY	-SEVENTH	SUBSCRIBER GRO	UP	TWE	NTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
			····					
	···		····					
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	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			criber group a	s shown in the boxes a	above.	\$		

LEGAL NAME OF OWNE SHELLSBURG CA							024965	Name
				TE FEES FOR EAC				
	ITY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
			····					Surcharge
								for
								Partially
								Distant Stations
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
•					·			
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	RTY-FIRST	SUBSCRIBER GRO		11		SUBSCRIBER GRO	_	
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 C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	II s shown in the boxes a	above.	\$		

	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP THIRTY-THIRD SUBSCRIBER GROUP THIRTY-FOURTH SUBSCRIBER GROUP							
	UP							
9	0			COMMUNITY/ AREA	0		ITY/ AREA	
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	GN DSE	
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and								
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Surcharge			<u> </u>					
for	······		<u></u>					
Partially	·····		<u>-</u>					
Distant Stations								
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	0.00			Total DSEs	0.00		· S	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	eipts First Group	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Foo First Croup	
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	LID	OLIDOODIDED ODO	DTV OVTU		-			
		SUBSCRIBER GRO	RTY-SIXTH	THI	DUP	SUBSCRIBER GRO	THIRTY-FIFTH	
	UP 0	SUBSCRIBER GRO	RTY-SIXTH		-			
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
		SUBSCRIBER GRO	RTY-SIXTH	THI	DUP		THIRTY-FIFTH	
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
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	DSE	11		THI COMMUNITY/ AREA	DUP 0	SUBSCRIBER GRO	THIRTY-FIFTH ITY/ AREA GN DSE	
	0	11		THI COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	THIRTY-FIFTH	
	DSE	11	DSE	THI COMMUNITY/ AREA CALL SIGN	DUP 0	SUBSCRIBER GRO	THIRTY-FIFTH ITY/ AREA GN DSE	
	DSE DSE O.000	CALL SIGN	DSE	THI COMMUNITY/ AREA CALL SIGN Total DSEs	DUP 0 DSE 0 O.000	CALL SIGN	THIRTY-FIFTH ITY/ AREA GN DSE	
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LEGAL NAME OF OWNER SHELLSBURG CAR			•			S	YSTEM ID# 024965	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
THIRTY-S COMMUNITY/ AREA	SEVENTH	SUBSCRIBER GROU	P 0	THIRT COMMUNITY/ AREA	Y-EIGHTH	1 SUBSCRIBER GROU	P 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	Base Rate Fee
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								Syndicated
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								Surcharge for
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Total DSEs		_	0.00	Total DSEs		-	0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	l Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
THIRT	Y-NINTH	SUBSCRIBER GROU	Р		FORTIETH	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 Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes abo	ove.	\$		

SHELLSBURG CA						\$	024965	Name
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
FO	RTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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								Syndicated
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								Partially
								Distant
								Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
FO	RTY-THIRD	SUBSCRIBER GRO	UP	FOF	RTY-FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
	Croun	¢			th Crous	•		
Gross Receipts Third	Group	4	0.00	Gross Receipts Foul	ui Group	*	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	s shown in the boxes a	above.	\$		

	BLEVISI	O11, 1110					024965	Name
E	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
	RTY-FIFTH	SUBSCRIBER GRO	DUP	F	ORTY-SIXTH	SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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						-		Partially Distant
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FORTY-	SEVENTH	SUBSCRIBER GRO	DUP	FC	RTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	FORTY-SEVENTH SUBSCRIBER GROUP MMUNITY/ AREA 0		_					
			U	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN				CALL SIGN		
CALL SIGN	DSE	CALL SIGN				CALL SIGN		
CALL SIGN	DSE	CALL SIGN				CALL SIGN		
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	DSE	CALL SIGN				CALL SIGN		
Total DSEs		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Fotal DSEs Gross Receipts Third G	Group	\$	0.00 0.00	Total DSEs Gross Receipts Fou	DSE	\$	DSE	
Total DSEs	Group	CALL SIGN	DSE	Total DSEs	DSE	CALL SIGN	DSE	

LEGAL NAME OF OWNE SHELLSBURG CA			•			S	YSTEM ID# 024965	Name
				TE FEES FOR EAC				
	TY-NINTH	SUBSCRIBER GRO				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
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			<u></u>					Distant Stations
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FIF	TY-FIRST	SUBSCRIBER GRO	UP	FIF	TY-SECOND	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u></u>			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	s shown in the boxes a	bove.	\$		

FORM SA3E. PAGE 19.

Name	024965					ON, INC	CABLEVISI	SHELLSBURG (
				TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	Y-FOURTH	FIF COMMUNITY/ AREA	IP 0	SUBSCRIBER GRO		COMMUNITY/ ARE
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	0.00			Total DSEs	0.00	-		Total DSEs
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	0.00	\$	d Group	Gross Receipts Secon	0.00	3	t Group	Gross Receipts First
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	0.00		d Group	Base Rate Fee Secon	0.00	\$ SUBSCRIBER GROU	t Group	3ase Rate Fee First
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	0.00	\$	d Group	Base Rate Fee Secon	0.00		t Group	3ase Rate Fee First
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon F COMMUNITY/ AREA	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A	Base Rate Fee First
	0.00 JP	SUBSCRIBER GROU	d Group FTY-SIXTH DSE	Base Rate Fee Secon F COMMUNITY/ AREA CALL SIGN Total DSEs	0.00	CALL SIGN	t Group FIFTY-FIFTH A DSE	CALL SIGN CALL SIGN Fotal DSEs
	0.00 JP O DSE	\$ SUBSCRIBER GROU	d Group FTY-SIXTH DSE	Base Rate Fee Secon F COMMUNITY/ AREA CALL SIGN	0.00	SUBSCRIBER GROU	t Group FIFTY-FIFTH A DSE	CALL SIGN

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Name	YSTEM ID# 024965	S						EGAL NAME OF OW HELLSBURG
		BER GROUP	I SUBSCRI	TE FEES FOR EAC	BASE RA	: COMPUTATION O	BLOCK A:	
0	JP	SUBSCRIBER GROU		FI		SUBSCRIBER GRO	TY-SEVENTH	
9	0			COMMUNITY/ AREA	0		A	OMMUNITY/ ARE
Computat of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	JP	SUBSCRIBER GROU	SIXTIETH			SUBSCRIBER GRO		
	JP 0	SUBSCRIBER GROU	SIXTIETH	COMMUNITY/ AREA		1 SUBSCRIBER GRO	FIFTY-NINTH	
		SUBSCRIBER GROU	SIXTIETH		JP	SUBSCRIBER GROUND CALL SIGN	FIFTY-NINTH	MMUNITY/ ARE
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9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	UP 0	SUBSCRIBER GROU	Y-FOURTH	SIXT COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	IXTY-THIRD	SI) OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	Y-FOURTH	SIXT COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	IXTY-THIRD	SI) OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	Y-FOURTH	SIXT COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	IXTY-THIRD	SI) OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	Y-FOURTH	SIXT COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	IXTY-THIRD	SI) OMMUNITY/ AREA
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	UP 0	SUBSCRIBER GROU	Y-FOURTH	SIXT COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	IXTY-THIRD	SI) OMMUNITY/ AREA
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	DSE DSE 0.00	CALL SIGN	Y-FOURTH DSE	SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	DUP DSE 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	SUBSCRIBER GRO	DSE	CALL SIGN otal DSEs cross Receipts Third of
	DSE DSE 0.00	CALL SIGN	Y-FOURTH DSE Group	SIXT COMMUNITY/ AREA CALL SIGN Total DSEs	DUP DSE 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	SUBSCRIBER GRO	DSE	CALL SIGN CALL SIGN otal DSEs

LEGAL NAME OF OWNE						\$	024965	Name
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	XTY-FIFTH	SUBSCRIBER GRO		İİ		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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				-				
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco		\$	0.00	
	-SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GRO	_	
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 C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes a	above.	\$		

	024965					ON, INC	DLEVISIO	SHELLSBURG CA
		BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	E
9		SUBSCRIBER GROU	EVENTIETH			SUBSCRIBER GRO	TY-NINTH	
Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I	332	07.22 0.0.1		07.22 5.5.1	232	07.22 0.0.1	332	07.22 0.0.1
and								
Syndicate								
Exclusivit								
Surcharg								
for								
Partially Distant								
Stations			<u></u>				···	
			<u> </u>		<u></u>	 	<u> </u>	
							<u> </u>	
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	iross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	ase Rate Fee First Gı
	JP	SUBSCRIBER GROU	Y-SECOND	SEVENT	JP	SUBSCRIBER GRO	ITY-FIRST	SEVEN
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			••••					
			••••••		<u> </u>			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

SHELLSBURG CA			-			\$	024965	Name
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCR	BER GROUP		
		SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
			····					Distant Stations
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVE	NTY-FIFTH	SUBSCRIBER GRO	UP	SEV	/ENTY-SIXTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		 	····					
						H		
T DO. T			0.00	T			0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Foul	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 blood			criber group a	s shown in the boxes a	above.	\$		

	024965					ON, INC	ABLEVISIO	SHELLSBURG CA
		IBER GROUP	SUBSCRI	TE FEES FOR EACH				
9		SUBSCRIBER GROU	TY-EIGHTH			SUBSCRIBER GRO	-SEVENTH	
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F		0.122						<u> </u>
and								
Syndicated								
Exclusivity								
Surcharge			<u> </u>					
for			<u>-</u>		····			
Partially Distant					····			
Stations					····			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	JP	I SUBSCRIBER GROU	EIGHTIETH		UP	SUBSCRIBER GRO	NTY-NINTH	SEVEN
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			<u>-</u>		<u></u>			
					····			
						H		
		Ц	<mark></mark>			H		
	0.00			Total DSEs	0.00			Fotal DSEs
			Group		0.00		Oroug	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third C

SHELLSBURG CA			-			\$	024965	Name
				TE FEES FOR EAC	H SUBSCR	BER GROUP		
EIG	HTY-FIRST	SUBSCRIBER GRO				SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
				-				Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	HTY-THIRD	SUBSCRIBER GRO		11		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	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 Foul	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	s shown in the boxes a	above.	\$		

SHELLSBURG CA						•	024965	Name
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
EIG	HTY-FIFTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
	····		····					Exclusivity Surcharge
			····					for
								Partially
								Distant
								Stations
			····					
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First C	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	
EIGHTY	-SEVENTH	SUBSCRIBER GRO	UP	EIG	HTY-EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····							
			····					
				-				
			····					
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	s shown in the boxes a	above.	\$		

SHELLSBURG CA			-			•	024965	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	HTY-NINTH	SUBSCRIBER GRO				SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-				Exclusivity Surcharge
								for
								Partially
						<u> </u>		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	
NIN	IETY-FIRST	SUBSCRIBER GRO	UP	NINE	TY-SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-		H		
			••••			H		
	····		···					
Total DSEs			0.00	Total DSEs	1		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 t			criber group a	as shown in the boxes a	above.	\$		

| BIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Bas Styles 9 computation of ase Rate F and Syndicated Exclusivity Surcharge for Partially Distant Stations |
|--|--|
| NITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA COI COI COI COI COI COI COI CO | omputation of ase Rate F and Syndicated Exclusivity Surcharge for Partially Distant |
| Colors DSE CALL SIGN DSE CALL SIGN DSE Bas Sty Example 1 | omputation of ase Rate F and Syndicated Exclusivity Surcharge for Partially Distant |
| BIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE SAY DE CALL SIGN DSE DE CALL SIGN DE C | of
ase Rate F
and
Syndicated
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Surcharge
for
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| Sy Ex St | ase Rate F
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for
Partially
Distant |
| | Syndicated
Exclusivity
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| | Exclusivity Surcharge for Partially Distant |
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| Es <u>0.00</u> Total DSEs <u>0.00</u> | |
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| Es <u>0.00</u> Total DSEs <u>0.00</u> | |
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| | |
| ceipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 | |
| | |
| te Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 | |
| NINETY-FIFTH SUBSCRIBER GROUP NINETY-SIXTH SUBSCRIBER GROUP | |
| NITY/ AREA 0 COMMUNITY/ AREA 0 | |
| SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE | |
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| Es 0.00 Total DSEs 0.00 | |
| sceipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00 | |
| V VIOV | |
| te Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 | |

LEGAL NAME OF OWNE						\$	024965	Name
				TE FEES FOR EAC	H SUBSCR	BER GROUP		
	-SEVENTH	SUBSCRIBER GRO		11		SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
				-				Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
	····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINE	ETY-NINTH	SUBSCRIBER GRO	UP	11		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		····					
				-				
	••••		••••					
	····							
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	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			criber group a	s shown in the boxes a	above.	\$		

SHELLSBURG CA			-			•	024965	Name
	BLOCK A:	COMPUTATION C	OF BASE RA	ATE FEES FOR EAC	H SUBSCR	BER GROUP		
	RED FIRST	SUBSCRIBER GRO		11		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
			····					
T + 1 DOF			0.00	T 1 1 DOE			0.00	
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 G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	RED THIRD	SUBSCRIBER GRO		11		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
				-		H		
			<u>.</u>					
				-				
			····					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Page Pate Fee Third	Croup	6	0.00	Page Pate Foe Four	th Croup	•	0.00	
Base Rate Fee Third	Jioup	\$	0.00	Base Rate Fee Four	и Огоир	\$	0.00	
Base Rate Fee: Add t Enter here and in block			criber group a	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
E	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
	RED FIFTH	SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	<u> </u>							
T-4-1 D05-			0.00	T-4-1 D05-			0.00	
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 G		\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO				SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes a	above.	\$		

Q Computati of Base Rate I and Syndicate Exclusivit Surcharg for Partially Distant	024965	BER GROUP	LOUDOOD		FORM SA3E. PAGE 19. Nonpermitted 3.75 Stations LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#									
Computation of Base Rate F and Syndicate Exclusivity Surcharge for Partially	0		LOUDOODI	SHELLSBURG CABLEVISION, INC 024965										
Computation of Base Rate F and Syndicate Exclusivity Surcharge for Partially Distant	0		1 SUBSURI	TE FEES FOR FACE	F BASF RA	COMPUTATION C	BLOCK A:							
Computation of Base Rate F and Syndicate Exclusivity Surcharge for Partially Distant			X A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ITH SUBSCRIBER GROUP ONE HUNDRED TENTH SUBSCRIBER GROUP											
of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant	DSE			COMMUNITY/ AREA	0			COMMUNITY/ AREA						
Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN						
Syndicated Exclusivity Surcharge for Partially Distant		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN						
Exclusivit Surcharge for Partially Distant			••••											
Surcharge for Partially Distant														
for Partially Distant														
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			····											
	0.00			Total DSEs	0.00			otal DSEs						
	0.00	\$	nd Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First						
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First (
	UP	SUBSCRIBER GROU	O TWELVTH	ONE HUNDREI	UP	SUBSCRIBER GRO	ELEVENTH	ONE HUNDRED						
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA						
4	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN						
						 								
"			····											
**			••••											

0.00 0.00 Base Rate Fee Third Group Base Rate Fee Fourth Group

Gross Receipts Fourth Group

0.00

Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)

\$			

0.00

Gross Receipts Third Group

						ON, INC	RFFA121	SHELLSBURG CA	
		BER GROUP	I SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	E	
0	JP	SUBSCRIBER GROU	URTEENTH	ONE HUNDRED FO	JP	SUBSCRIBER GRO	RTEENTH	ONE HUNDRED THI	
9 Commutation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F	DOL	OALL GIOIN	DOL	OALE GIGIN	DOL	GALL GIGIT	DOL	OALL GIGIN	
and			••••••••••						
Syndicate									
Exclusivit									
Surcharge									
for									
Partially									
Distant									
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		H							
			-						
			•••••••••••••••••••••••••••••••••••••••						
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	nd Group	Gross Receipts Secon	0.00				
			•				•	·	
	0.00	\$	nd Group	Base Rate Fee Secon	0.00	Base Rate Fee First Group \$ 0.00			
	JP	SUBSCRIBER GROU	SIXTEENTH	ONE HUNDRED	JP	SUBSCRIBER GRO	FTEENTH	ONE HUNDRED FI	
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
						<u> </u>			
			•••••••••••••••••••••••••••••••••••••••						
							_		
			 				-		
							-		
			<u></u>						
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	n Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	
				11					

LEGAL NAME OF OWNER SHELLSBURG CA			•			S	024965	Name
			BASE RA	ATE FEES FOR EAC				
	ENTEENTH	SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
				-				and
				-				Syndicated Exclusivity
				-				Surcharge
								for
								Partially
								Distant
								Stations
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED NI	NTEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	TWENTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-	<u> </u>			
				-				
				-				
Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	II	bove.	\$		

LEGAL NAME OF OWNER SHELLSBURG CAR			•			S	YSTEM ID# 024965	Name
			BASE RA	TE FEES FOR EACH				
	NTY-FIRST	SUBSCRIBER GROUP			ITY-SECONE	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 Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED TWEN	ITY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	NTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							····	
								
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block	e base rate	e fees for each subscripace L (page 7)	ber group a	s shown in the boxes ab	oove.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
	,	IBER GROUP		TE FEES FOR EACH		COMPUTATION C			
9 Commutation	0	SUBSCRIBER GROUP	ENTT-SIXTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	ENIT-FIFIR	COMMUNITY/ AREA	
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and Syndicate									
Exclusivity									
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for									
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	0.00			Total DSEs	0.00			Total DSEs	
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		\$		Gross Receipts Secon	0.00	\$			
	0.00		d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G	
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	0.00	\$ I SUBSCRIBER GROUP	d Group	Base Rate Fee Secon ONE HUNDRED TWE COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROU	Group 'Y-SEVENTH	Base Rate Fee First G NE HUNDRED TWENT COMMUNITY/ AREA	
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	LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965									
		IBER GROUP	SUBSCR	TE FEES FOR EACH	F BASE RA	COMPUTATION (BLOCK A:			
9		H SUBSCRIBER GROUP	O THIRTIETH	ii		SUBSCRIBER GROU	ENTY-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										
Syndicated										
Exclusivity										
Surcharge for			<u></u>							
Partially			<u></u>		····	-				
Distant										
Stations							•••••			
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			<u> </u>							
	0.00			Total DSEs	0.00	Total DSEs 0.00				
	0.00	\$	d Group	Gross Receipts Secon	0.00	Gross Receipts First Group \$ 0.00				
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G		
		SUBSCRIBER GROUP	TY-SECONE	ONE HUNDRED THIR)	SUBSCRIBER GROU	IRTY-FIRST	ONE HUNDRED TH		
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA			
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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	0.00			Total DSEs	0.00			Fotal DSEs		
			Group				Group			
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third C		

	024965	S						LEGAL NAME OF OWNE SHELLSBURG CA	
		BER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH		COMPUTATION C			
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
Computation 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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	0.00		-1.0	Total DSEs		Total DSEs 0.00			
	0.00	\$	id Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	Base Rate Fee First Group \$ 0.00			
		SUBSCRIBER GROU	RTY-SIXTH	i i		SUBSCRIBER GRO	RTY-FIFTH	ONE HUNDRED THIR	
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
			<u></u>		<u> </u>				
			<u> </u>						
	0.00			Total DSEs	0.00			otal DSEs	
				lla	Gross Receipts Third Group \$ 0.00				
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	поир	oross receipts Tillia G	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP			
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP		11	RTY-EIGHTH	SUBSCRIBER GROUP		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee	
				-				and Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
				-					
	·								
				-					
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00		
ONE HUNDRED THIRT	ΓY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRED	FORTIETH	SUBSCRIBER GROU	IP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				-					
				-		H			
				-	•				
Total DSEs	•		0.00	Total DSEs			0.00		
Gross Receipts Third Gr	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block 3	e base rate 3, line 1, sp	e fees for each subscri	ber group a	s shown in the boxes ab	ove.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SHELLSBURG CABLEVISION, INC 024965								
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
	RTY-FIRST	SUBSCRIBER GROUP		11	TY-SECOND	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 Gr	oup	\$	0.00	Gross Receipts Second	l Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	l Group	\$	0.00	
ONE HUNDRED FOR	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOR	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						=		
Total DSEs	!!		0.00	Total DSEs		-	0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes abo	ove.	\$		

SHELLSBURG CA			-			\$	024965	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED FO	ORTY-FIFTH	SUBSCRIBER GROUP	•	ONE HUNDRED	FORTY-SIXTH	SUBSCRIBER GROUP)	9 Computation
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Second	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROUP	•	ONE HUNDRED F	ORTY-EIGHTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		<u></u>					
								
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Foul	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	above.	\$		

SHELLSBURG CA						\$	024965	Name			
[BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCR	BER GROUP					
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDR	ED FIFTIETH	SUBSCRIBER GRO	UP	9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of			
								Base Rate Fee			
				-				and Syndicated			
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								Surcharge			
								for			
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Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$ 0.00							
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00				
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GRO	UP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
				-							
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Total DSEs		-	0.00	Total DSEs			0.00				
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00				
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00				
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes a	above.	\$					

SHELLSBURG CA						S	024965	Name
[BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCRI	BER GROUP		
	TY-THIRD	SUBSCRIBER GROU		ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP			۵	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
	···							Exclusivity Surcharge
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								Partially
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$ 0.00				
Base Rate Fee First G	roup	\$	0.00		sase Rate Fee Second Group \$ 0.00			
	TY-FIFTH	SUBSCRIBER GROU		ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA 0			_	
COMMUNITY/ AREA			0				0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
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						-		
Total DSEs			0.00	Total DSEs	-		0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th			ber group a	s shown in the boxes al	bove.			
Enter here and in block	. J, IIIIE 1, S	pace L (page /)				٧		

SAL NAME OF CANALE SYSTEM: HELLSBURG CABLEVISION, INC BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE CALL	HELLSBURG CABLEVIS
ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE An Syndic Exclusion Surch fo Parti Dist Stati Dist Stati Dist Stati DIST Stati DIST	BLOCK /
ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP OMMUNITY/ AREA O CALL SIGN DSE An Syndic Exclusion Surch fo Parti Dist Stati Dist Stati Dist Stati DIST Stati DIST	
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Syndic Exclus Surch fo Parti Dist Statis otal DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Gross Receipts Group \$	
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otal DSEs	
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otal DSEs ross Receipts First Group s 0.00 Gross Receipts Second Group s 0.00 Gross Receipts Second Group s 0.00 ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0 OMMUNITY/ AREA	
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ross Receipts First Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
ross Receipts First Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
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ross Receipts First Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
ross Receipts First Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
ross Receipts First Group \$ 0.00 ase Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
ase Rate Fee First Group \$ 0.00 ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA O OMMUNITY/ AREA O OMMUNITY/ AREA O	otal DSEs
ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP OMMUNITY/ AREA O COMMUNITY/ AREA O	oss Receipts First Group
OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	ase Rate Fee First Group
	ONE HUNDRED FIFTY-NINT
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	OMMUNITY/ AREA
	CALL SIGN DSE
otal DSEs 0.00 Total DSEs 0.00	
ross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	otal DSEs
ase Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC. 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee INSTRUCTIONS: and Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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Form SA3E Long Form (Rev. 05-17)

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ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SHELLSBURG CABLEVISION, INC. 024965 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee INSTRUCTIONS: and Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FORTY-FIFTH SUBSCRIBER GROUP FORTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group FORTY-SEVENTH SUBSCRIBER GROUP FORTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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Radio

Accepted

C	Cable Worksheet		Total amount of remittance	Number of SAs rec'd		Initials		
			Date of remittance	Check	EFT	FILII	NG FEES	
Cable ID #						Amount	Initials	
Examined by		Reviewed by	Date examination completed	Allocation	n number			
Space A Accounting Period				1				
	Janu	uary 1 - June 30, 2017	[☐ July 1 - December 31, 2017				
	Lette	er sent	[☐ Information received				
	Acce	epted		Phone call/Date/Contact				
Space B Owner								
	Lette	er sent	[Information red	ceived			
	Acce	epted	[Phone call/Date	e/Contact			
Space D Area Served								
	Lette	er sent	[Information red	ceived			
	Acce	epted		Phone call/Date	e/Contact			
Space E Secondary Transission								
Service Subscribers:	Lette	er sent		☐ Information received				
and Rates	✓ Acce	epted]	Phone call/Date/Contact				
Space G Primary Transmitters:								
Television	Lette	er sent	[☐ Information received				
	Acce	epted		Phone call/Dat	e/Contact			
Space H Primary Transmitters:								

Phone call/Date/Contact

		Space I Substitute Carriage	
Letter sent	☐ Information received	1	
Accepted	☐ Phone call/Date/Contact		
		Space J Part-time Carriage Log	
✓ Letter sent	☐ Information received	(SA3 only)	
Accepted	Phone call/Date/Contact		
		Space K Gross Receipts	
Letter sent	☐ Information received	1	
Letter sent	Phone call/Date/Contact		
		Space L Copyright Filing and Royalty Fees	
Royalty Fee should be	Refund request to fiscal		
Letter sent	☐ Information received		
Accepted	Phoe call/Date/Contact		
		Space M Channels	
Letter sent	☐ Information received		
Accepted	Phone call/Date/Contact		
		Space O Certification	
Letter sent	☐ Information received		
Accepted	Phone call/Date/Contact		
		Space P Statement of Gross Receipts	
Letter sent	☐ Information received		
Accepted	Phone call/Date/Contact		
		Space Q Interest Assessment	
Letter sent	☐ Info/add'l fee received		
Accepted	Phone call/Date/Contact		