

<b>A</b> Accounting Period	<b>ACCOUNTING PERIOD COVERED BY THIS STATEMENT:</b>	
	2025/1	(enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)

<b>B</b> Owner	<b>INSTRUCTIONS:</b> Give the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. In line 2, list any other 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. <span style="float: right;">63486</span>	
	1	<b>LEGAL NAME OF OWNER OF CABLE SYSTEM:</b> United Fiber, LLC
	2	<b>BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):</b> United Fiber MO, LLC
3	<b>MAILING ADDRESS OF OWNER OF CABLE SYSTEM:</b> 30208 Hwy. 136, P.O. Box 757 <small>(Number, street, rural route, apartment, or suite number)</small> Maryville, MO 64468 <small>(City, town, state, zip)</small>	
<b>C</b> System	<b>INSTRUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.	
	1	<b>IDENTIFICATION OF CABLE SYSTEM:</b>
2	<b>MAILING ADDRESS OF CABLE SYSTEM:</b> <small>(Number, street, rural route, apartment, or suite number)</small> <small>(City, town, state, zip code)</small>	

BARCODE DAT.  
Filing Period  
634

<b>E</b> Secondary Transmission Service: Sub- scribers and Rates	BLOCK 1		
	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
<b>Residential:</b>			
• Service to first set	7,322	39.95	
• Service to additional set(s)			
• FM radio (if separate rate)			
<b>Motel, hotel</b>			
<b>Commercial</b>			
<b>Converter</b>			
• Residential			
• Non-residential			

<b>F</b> Services Other Than Secondary Transmissions: Rates	BLOCK 1			
	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
<b>Continuing Services:</b>			<b>Installation: Non-residential</b>	
• Pay cable			• Motel, hotel	
• Pay cable—add'l channel			• Commercial	
• Fire protection			• Pay cable	
• Burglar protection			• Pay cable-add'l channel	
<b>Installation: Residential</b>			• Fire protection	
• First set	99.00		• Burglar protection	
• Additional set(s)			<b>Other services:</b>	
• FM radio (if separate rate)			• Reconnect	
• Converter			• Disconnect	
			• Outlet relocation	
			• Move to new address	

<b>M</b> Channels	<b>CHANNELS</b> <b>Instructions:</b> 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.
	<p>1. Enter the total number of channels on which the cable system carried television broadcast stations <span style="float: right;">33</span></p> <p>2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services <span style="float: right;">150+</span></p>

<b>N</b> Individual to Be Contacted for Further Information	<b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED:</b> (Identify an individual we can contact about this statement of account.)	
	Name	BRUCE BEARD, CINNAMON MUELLER Telephone 314-462-9000
	Address	1714 DEER TRACK TRAILS, SUITE 230 <small>(Number, street, rural route, apartment, or suite number)</small> ST. LOUIS, MO 63131 <small>(City, town, state, zip)</small>
	Email (optional)	BBEARD@CINNAMONMUELLER.COM Fax (optional)

<b>O</b> Certification	<b>CERTIFICATION</b> (This statement of account must be certified and signed in accordance with Copyright Office regulations.) Signature Space O – this form will be submitted with an electronic "/s/" signature (e.g., /s/John Smith). Do not forget to enter an electronic signature by typing "/s/" followed by your name in the signature box in Space O of tab "page 8, space M-O".	
	Typed or printed name:	DARREN P. FARNAN
	Title:	CHIEF DEVELOPMENT OFFICER <small>(Title of official position held in corporation or partnership)</small>
	Date:	August 18, 2025

**Total Gross Receipts**

**\$ 1,740,182.05**

OK


**Subgroup Gross Receipts Total**

**\$ 1,740,182.05**

<b>Subgroup</b>		<b>Subgroup/Community Name</b>	<b>Gross Receipts</b>
FIRST	1	Clinton and Clay Counties	\$ 458,002.17
SECOND	2	Gentry, Holt, Worth, Daviess, and Nodaway	\$ 315,615.21
THIRD	3	Andrew, Buchanan, and DeKalb Counties	\$ 865,960.49
FOURTH	4	Andrew and DeKalb Counties	\$ 100,604.18
FIFTH	5		
SIXTH	6		
SEVENTH	7		
EIGHTH	8		
NINTH	9		
TENTH	10		
ELEVENTH	11		
TWELVTH	12		
THIRTEENTH	13		
FOURTEENTH	14		
FIFTEENTH	15		
SIXTEENTH	16		
SEVENTEENTH	17		
EIGHTEENTH	18		
NINTEENTH	19		
TWENTIETH	20		
TWENTY-FIRST	21		
TWENTY-SECOND	22		
TWENTY-THIRD	23		
TWENTY-FOURTH	24		
TWENTY-FIFTH	25		
TWENTY-SIXTH	26		
TWENTY-SEVENTH	27		
TWENTY-EIGHTH	28		
TWENTY-NINTH	29		
THIRTIETH	30		
THIRTY-FIRST	31		
THIRTY-SECOND	32		
THIRTY-THIRD	33		
THIRTY-FOURTH	34		
THIRTY-FIFTH	35		
THIRTY-SIXTH	36		
THIRTY-SEVENTH	37		
THIRTY-EIGHTH	38		
THIRTY-NINTH	39		
FORTIETH	40		

1. Call Sign	2. B'cast Channel Number	3. Type of Station	6. Location of Station	DSE	Space G Basis of Carriage
KNPN	26	N	ST. JOSEPH, MO	0.250	
KNPN-DT2	26.2	N-M	ST. JOSEPH, MO	0.250	
KCTV	24	N	KANSAS CITY, MO	0.250	
KCTV-DT2	24.2	I-M	KANSAS CITY, MO	1.000	
KNPG	16	N	ST. JOSEPH, MO	0.250	
KNPG-DT2	16.2	I-M	ST. JOSEPH, MO	1.000	
KNPG-DT3	16.3	I-M	ST. JOSEPH, MO	1.000	
KMBC	29	N	KANSAS CITY, MO	0.250	
KMBC-DT2	29.2	I-M	KANSAS CITY, MO	1.000	
KCJO-LD	30	N	ST. JOSEPH, MO	0.250	
KSMO-DT2	47.2	I-M	KANSAS CITY, MO	1.000	
KCPT	18	E	KANSAS CITY, MO	0.250	
KCPT-DT2	18.2	E-M	KANSAS CITY, MO	0.250	
KSMO-DT3	47.3	I-M	KANSAS CITY, MO	1.000	
KSMO-DT4	47.4	I-M	KANSAS CITY, MO	1.000	
KTAJ	21	I	ST. JOSEPH, MO	1.000	
KMCI	41	I	LAWRENCE, KS	1.000	
KMCI-DT2	41.2	I-M	LAWRENCE, KS	1.000	
KMCI-DT3	41.3	I-M	LAWRENCE, KS	1.000	
KSMO-DT5	47.5	I-M	KANSAS CITY, MO	1.000	
KSHB	42	N	KANSAS CITY, MO	0.250	
KSHB-DT2	42.2	I-M	KANSAS CITY, MO	1.000	
KSHB-DT3	42.2	I-M	KANSAS CITY, MO	1.000	
KPXE	30	I	KANSAS CITY, MO	1.000	
WDAF	34	N	KANSAS CITY, MO	0.250	
WDAF-DT2	34.2	I-M	KANSAS CITY, MO	1.000	
WDAF-DT3	34.3	I-M	KANSAS CITY, MO	1.000	
KCWE	31	I	KANSAS CITY, MO	1.000	
KCWE-DT2	31.2	I-M	KANSAS CITY, MO	1.000	
KSMO	47	I	KANSAS CITY, MO	1.000	
KQTV	2	N	ST. JOSEPH, MO	0.250	
KQTV-DT2	2.2	I-M	ST. JOSEPH, MO	1.000	
KCTV-DT3	24.3	I-M	KANSAS CITY, MO	1.000	
KCTV-DT4	24.4	I-M	KANSAS CITY, MO	1.000	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	



1. Call Sign	2. B'cast Channel Number	3. Type of Station	6. Location of Station	DSE	Space G Basis of Carriage
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
#N/A					
#N/A					
#N/A					
#N/A					

















































1. Call Sign	2. B'cast Channel Number	3. Type of Station	6. Location of Station	DSE	Space G Basis of Carriage
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	
				#N/A	

LEGAL NAME OF OWNER OF CABLE SYSTEM:

**United Fiber, LLC**

**SYSTEM ID#**

**20251**

**Instructions:** Use this sheet to enter any notes or other information that you feel might assist the Copyright Examiner in the examination of your Statement of Account.



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
8/18/2025	\$
	ALLOCATION NUMBER

Return completed workbook by  
 email to:

[coplicsoa@copyright.gov](mailto:coplicsoa@copyright.gov)

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

<b>A</b> Accounting Period	<b>ACCOUNTING PERIOD COVERED BY THIS STATEMENT:</b> <b>2025/1</b>			
<b>B</b> Owner	<p><b>Instructions:</b>                  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.</p> <input type="checkbox"/> Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. <span style="float: right;"><b>63486</b></span>			
	<p><b>LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM</b></p> <p><b>United Fiber, LLC</b>  <b>United Fiber MO, LLC</b></p> <p style="text-align: right;"><b>6348620251</b>  <b>63486 2025/1</b></p> <p><b>30208 Hwy. 136, P.O. Box 757</b>  <b>Maryville, MO 64468</b></p>			
<b>C</b> System	<p><b>INSTRUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.</p>			
	1	<b>IDENTIFICATION OF CABLE SYSTEM:</b>		
	2	<p><b>MAILING ADDRESS OF CABLE SYSTEM:</b></p> <p>(Number, street, rural route, apartment, or suite number)</p> <p>(City, town, state, zip code)</p>		
<b>D</b> Area Served	<p><b>Instructions:</b> For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities.</p>			
	CITY OR TOWN		STATE	
First Community	<b>AGENCY</b>		<b>MO</b>	
	Below is a sample for reporting communities if you report multiple channel line-ups in Space G.			
Sample	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
	<b>Alda</b>	<b>MD</b>	<b>A</b>	<b>1</b>
	<b>Alliance</b>	<b>MD</b>	<b>B</b>	<b>2</b>
	<b>Gering</b>	<b>MD</b>	<b>B</b>	<b>3</b>

**Privacy Act Notice:** Section 111 of title 17 of the United States Code authorizes the Copyright Office 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 Office'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 filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

**United Fiber, LLC**

**SYSTEM ID#**

**63486**

**Instructions:** List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future 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.

**D**  
Area  
Served

CITY OR TOWN

STATE

CH LINE UP

SUB GRP#

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
AGENCY	MO	B	3
AMAZONIA	MO	B	3
AMITY	MO	B	3
BARNARD	MO	A	2
BOLCKOW	MO	B	3
BURLINGTON JCTN	MO	A	2
CAMERON	MO	A	1
CLARKSDALE	MO	B	3
Conception jct	MO	A	2
COSBY	MO	B	3
COUNTRY CLUB	MO	B	3
De Kalb	MO	B	3
DEARBORN	MO	B	3
EASTON	MO	B	3
FAIRPORT	MO	B	3
FAUCETT	MO	B	3
FILLMORE	MO	B	3
GOWER	MO	A	1
GRAHAM	MO	A	2
GUILFORD	MO	A	2
HELENA	MO	B	3
Grant City	MO	A	1
HOPKINS	MO	A	2
KING CITY	MO	A	2
MARYVILLE	MO	A	2
OREGON	MO	A	2
OSBORN	MO	A	1
PICKERING	MO	A	2
PLATTSBURG	MO	A	1
QUITMAN	MO	A	2
REA	MO	B	4
ROSENDALE	MO	B	3
SAINT JOSEPH	MO	B	3
SAVANNAH	MO	B	4
SKIDMORE	MO	A	2
STANBERRY	MO	A	2
STEWARTSVILLE	MO	B	3
UNION STAR	MO	B	4
Excelsior Springs	MO	A	1

First  
Community

See instructions for  
additional information  
on alphabetization.

Add rows as necessary.



<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
-------------	--	-----------------------------------

<b>E</b>  <b>Secondary Transmission Service: Subscribers and Rates</b>	<p><b>SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES</b>  <b>In General:</b> 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).  <b>Number of Subscribers:</b> 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).  <b>Rate:</b> 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.  <b>Block 1:</b> 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. <b>Note:</b> 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)."  <b>Block 2:</b> 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.</p>				
BLOCK 1			BLOCK 2		
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
<b>Residential:</b> • Service to first set • Service to additional set(s) • FM radio (if separate rate)	<b>7,322</b>	<b>\$ 39.95</b>			
<b>Motel, hotel</b>					
<b>Commercial</b>					
<b>Converter</b> • Residential • Non-residential					

<b>F</b>  <b>Services Other Than Secondary Transmissions: Rates</b>	<p><b>SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES</b>  <b>In General:</b> 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.  <b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed.  <b>Block 2:</b> 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.</p>				
BLOCK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
<b>Continuing Services:</b> • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection		<b>Installation: Non-residential</b> • Motel, hotel • Commercial • Pay cable • Pay cable-add'l channel • Fire protection • Burglar protection			
<b>Installation: Residential</b> • First set • Additional set(s) • FM radio (if separate rate) • Converter	<b>\$ 99.00</b>	<b>Other services:</b> • Reconnect • Disconnect • Outlet relocation • Move to new address			

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>		<b>G</b>  <b>Primary Transmitters: Television</b>			
<p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>					
<b>CHANNEL LINE-UP AA</b>					
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
<b>KCTV</b>	<b>24</b>	<b>N</b>	<b>NO</b>		<b>KANSAS CITY, MO</b>
<b>KCTV-DT2</b>	<b>24.2</b>	<b>I-M</b>	<b>NO</b>		<b>KANSAS CITY, MO</b>
<b>KMBC</b>	<b>29</b>	<b>N</b>	<b>No</b>		<b>KANSAS CITY, MO</b>
<b>KMBC-DT2</b>	<b>29.2</b>	<b>I-M</b>	<b>No</b>		<b>KANSAS CITY, MO</b>
<b>KCPT</b>	<b>18</b>	<b>E</b>	<b>Yes</b>	<b>0</b>	<b>KANSAS CITY, MO</b>
<b>KCPT-DT2</b>	<b>18.2</b>	<b>E-M</b>	<b>Yes</b>	<b>0</b>	<b>KANSAS CITY, MO</b>
<b>KCTV-DT3</b>	<b>24.3</b>	<b>I-M</b>	<b>NO</b>		<b>KANSAS CITY, MO</b>
<b>KCTV-DT4</b>	<b>24.4</b>	<b>I-M</b>	<b>NO</b>		<b>KANSAS CITY, MO</b>
<b>KMCI</b>	<b>41</b>	<b>I</b>	<b>NO</b>		<b>LAWRENCE, KS</b>
<b>KMCI-DT2</b>	<b>41.2</b>	<b>I-M</b>	<b>NO</b>		<b>LAWRENCE, KS</b>
<b>KMCI-DT3</b>	<b>41.3</b>	<b>I-M</b>	<b>NO</b>		<b>LAWRENCE, KS</b>
<b>KSMO-DT2</b>	<b>47.2</b>	<b>I-M</b>	<b>NO</b>		<b>KANSAS CITY, MO</b>
<b>KSHB</b>	<b>42</b>	<b>N</b>	<b>No</b>		<b>KANSAS CITY, MO</b>
<b>KSHB-DT2</b>	<b>42.2</b>	<b>I-M</b>	<b>No</b>		<b>KANSAS CITY, MO</b>
<b>KSHB-DT3</b>	<b>42.2</b>	<b>I-M</b>	<b>No</b>		<b>KANSAS CITY, MO</b>
<b>KPXE</b>	<b>30</b>	<b>I</b>	<b>No</b>		<b>KANSAS CITY, MO</b>
<b>WDAF</b>	<b>34</b>	<b>N</b>	<b>No</b>		<b>KANSAS CITY, MO</b>
<b>WDAF-DT2</b>	<b>34.2</b>	<b>I-M</b>	<b>No</b>		<b>KANSAS CITY, MO</b>

See instructions for additional information on alphabetization.

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>  <div style="text-align: center; font-size: 2em; font-weight: bold;">G</div> <b>Primary Transmitters: Television</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>  <p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>					
<b>CHANNEL LINE-UP AA, CONT.</b>					
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
WDAF-DT3	34.3	I-M	NO		KANSAS CITY, MO
KCWE	31	I	NO		KANSAS CITY, MO
KCWE-DT2	31.2	I-M	NO		KANSAS CITY, MO
KSMO	47	I	NO		KANSAS CITY, MO
KTAJ	21	I	Yes	0	ST. JOSEPH, MO
KSMO-DT3	47.3	I-M	NO		KANSAS CITY, MO
KSMO-DT4	47.4	I-M	NO		KANSAS CITY, MO
KSMO-DT5	47.5	I-M	NO		KANSAS CITY, MO

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>		<b>G</b>  <b>Primary Transmitters: Television</b>
<p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>		

CHANNEL LINE-UP AB					
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
KNPN	26	N	No		ST. JOSEPH, MO
KNPN-DT2	26.2	N-M	No		ST. JOSEPH, MO
KNPG	16	N	No		ST. JOSEPH, MO
KNPG-DT2	16.2	I-M	No		ST. JOSEPH, MO
KNPG-DT3	16.3	I-M	No		ST. JOSEPH, MO
KMBC	29	N	No		KANSAS CITY, MO
KMBC-DT2	29.2	I-M	No		KANSAS CITY, MO
KCJO-LD	30	N	No		ST. JOSEPH, MO
KQTV	2	N	No		ST. JOSEPH, MO
KCPT	18	E	No		KANSAS CITY, MO
KCPT-DT2	18.2	E-M	No		KANSAS CITY, MO
KTAJ	21	I	NO		ST. JOSEPH, MO
KMCI	41	I	YES	0	LAWRENCE, KS
KMCI-DT2	41.2	I-M	YES	0	LAWRENCE, KS
KMCI-DT3	41.3	I-M	YES	0	LAWRENCE, KS
WDAF-DT2	34.2	I-M	NO		KANSAS CITY, MO
KQTV-DT2	2.2	I-M	NO		ST. JOSEPH, MO

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>				<b>SYSTEM ID#</b> <b>63486</b>		<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>						<b>G</b>  <b>Primary Transmitters: Television</b>
<p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"><li>• 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.</li><li>• 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.</li></ul> <p><b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>						
<b>CHANNEL LINE-UP AB</b>						
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID# 63486</b>	<b>Name</b>
--	-----------------------------	-------------

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

**G**

**Primary Transmitters: Television**

**CHANNEL 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

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
<p><b>PRIMARY TRANSMITTERS: TELEVISION</b></p> <p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>		<p style="font-size: 2em; font-weight: bold;">G</p> <p><b>Primary Transmitters: Television</b></p>

CHANNEL LINE-UP <b>AF</b>					
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>				SYSTEM ID# <b>63486</b>	Name
<b>PRIMARY TRANSMITTERS: TELEVISION</b>					
<p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as “WETA-2”. Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>					<b>G</b>
<b>CHANNEL LINE-UP AG</b>					
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>					<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>						<b>G</b>  <b>Primary Transmitters: Television</b>
<p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>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.</li> <li>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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>						
<b>CHANNEL LINE-UP AH</b>						
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
--	-----------------------------------	-------------

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

**G**

**Primary  
Transmitters:  
Television**

<b>CHANNEL LINE-UP AI</b>					
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>					SYSTEM ID# <b>63486</b>	Name
<p><b>PRIMARY TRANSMITTERS: TELEVISION</b></p> <p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <p><b>Column 1:</b> 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).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>					<b>G</b>	<b>Primary Transmitters: Television</b>
<b>CHANNEL LINE-UP AJ</b>						
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 OWNER OF CABLE SYSTEM:					<b>SYSTEM ID#</b>	<b>Name</b>
<b>United Fiber, LLC</b>					<b>63486</b>	

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

CHANNEL LINE-UP <b>AK</b>					
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

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b> <b>In General:</b> 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. <b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: <ul style="list-style-type: none"> <li>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.</li> <li>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.</li> </ul> <b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). <b>Column 2:</b> 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. <b>Column 3:</b> 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. <b>Column 4:</b> 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. <b>Column 5:</b> 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. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. <b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">G</div> Primary Transmitters: Television

**CHANNEL LINE-UP AL**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>				SYSTEM ID# <b>63486</b>		Name	
<p><b>PRIMARY TRANSMITTERS: TELEVISION</b></p> <p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as “WETA-2”. Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>						<p><b>G</b></p> <p><b>Primary Transmitters: Television</b></p>	
<b>CHANNEL LINE-UP AM</b>							
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>  <b>In General:</b> 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. <b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <b>Column 1:</b> 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 multi-cast stream as “WETA-2”. Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). <b>Column 2:</b> 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. <b>Column 3:</b> 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. <b>Column 4:</b> 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. <b>Column 5:</b> 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. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. <b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.					
<b>CHANNEL LINE-UP AN</b>					
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

**G**

**Primary  
Transmitters:  
Television**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
--	-----------------------------------	-------------

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

**G**

**Primary Transmitters: Television**

<b>CHANNEL LINE-UP AO</b>					
<b>1. CALL SIGN</b>	<b>2. B'CAST CHANNEL NUMBER</b>	<b>3. TYPE OF STATION</b>	<b>4. DISTANT? (Yes or No)</b>	<b>5. BASIS OF CARRIAGE (If Distant)</b>	<b>6. LOCATION OF STATION</b>

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID# 63486</b>	<b>Name</b>
--	-----------------------------	-------------

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AP**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>				<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>					<b>G</b>  <b>Primary Transmitters: Television</b>
<p><b>In General:</b> 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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>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.</li> <li>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.</li> </ul> <p><b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).</p> <p><b>Column 2:</b> 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.</p> <p><b>Column 3:</b> 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.</p> <p><b>Column 4:</b> 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.</p> <p><b>Column 5:</b> 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.</p> <p>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.</p> <p><b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p> <p><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.</p>					
CHANNEL 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

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
--	-----------------------------------	-------------

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

G

**Primary Transmitters:  
Television**

**CHANNEL 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

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
--	-----------------------------------	-------------

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

G

**Primary Transmitters: Television**

**CHANNEL 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

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>			
<b>PRIMARY TRANSMITTERS: TELEVISION</b>  <b>In General:</b> 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. <b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> <b>Column 1:</b> 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 multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). <b>Column 2:</b> 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. <b>Column 3:</b> 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. <b>Column 4:</b> 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. <b>Column 5:</b> 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. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. <b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.		<b style="font-size: 2em;">G</b>  <b>Primary Transmitters: Television</b>			
<b>CHANNEL LINE-UP AT</b>					
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>   <div style="font-size: 2em; font-weight: bold; text-align: center;">G</div> <b>Primary Transmitters: Television</b>
--	-----------------------------------	--

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

<b>CHANNEL LINE-UP AU</b>					
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 OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	Name
--	-----------------------------------	------

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi-cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

**Column 2:** Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

**Column 3:** Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

**Column 4:** If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

**Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

**Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

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

**G**

**Primary Transmitters: Television**

**CHANNEL LINE-UP AV**

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>  <div style="text-align: center; font-size: 2em; font-weight: bold;">G</div> <b>Primary Transmitters:</b> <b>Television</b>
<b>PRIMARY TRANSMITTERS: TELEVISION</b>  <b>In General:</b> 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. <b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: <ul style="list-style-type: none"> <li>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.</li> <li>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.</li> </ul> <b>Column 1:</b> 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 multi-cast stream as “WETA-2”. Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). <b>Column 2:</b> 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. <b>Column 3:</b> 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. <b>Column 4:</b> 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. <b>Column 5:</b> 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. <b>Column 6:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. <b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.		

CHANNEL LINE-UP AW					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
-------------	--	-----------------------------------

H

**Primary Transmitters: Radio**

**PRIMARY TRANSMITTERS: RADIO**  
**In General:** List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.

**Special Instructions Concerning All-Band FM Carriage:** Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form.

**Column 1:** Identify the call sign of each station carried.  
**Column 2:** State whether the station is AM or FM.  
**Column 3:** If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.  
**Column 4:** Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION

LEGAL NAME OF OWNER OF CABLE SYSTEM:	<b>SYSTEM ID#</b>	
<b>United Fiber, LLC</b>	<b>63486</b>	Name

**SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG**

**In General:** In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.

**1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE**

• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?  Yes  No

**Note:** If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.

**2. LOG OF SUBSTITUTE PROGRAMS**

**In General:** List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.

**Column 1:** Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for further information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."

**Column 2:** If the program was broadcast live, enter "Yes." Otherwise enter "No."

**Column 3:** Give the call sign of the station broadcasting the substitute program.

**Column 4:** Give the broadcast 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).

**Column 5:** Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."

**Column 6:** State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."

**Column 7:** Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.

I

Substitute  
Carriage:  
Special  
Statement and  
Program Log

SUBSTITUTE PROGRAM				WHEN SUBSTITUTE CARRIAGE OCCURRED			7. REASON FOR DELETION
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
-------------	--	-----------------------------------

**J**

**Part-Time Carriage Log**

**PART-TIME CARRIAGE LOG**

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

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

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

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

DATES AND HOURS OF PART-TIME CARRIAGE								
CALL SIGN	WHEN CARRIAGE OCCURRED				CALL SIGN	WHEN CARRIAGE OCCURRED		
	DATE	FROM	HOURS TO			DATE	FROM	HOURS TO
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	
			—				—	

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>				
<b>GROSS RECEIPTS</b> <b>Instructions:</b> The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.		<b>K</b> <b>Gross Receipts</b>				
<b>IMPORTANT:</b> You must complete a statement in space P concerning gross receipts.		<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: right;">\$</td> <td style="text-align: right;"><b>1,740,182.05</b></td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">(Amount of gross receipts)</td> </tr> </table>	\$	<b>1,740,182.05</b>	(Amount of gross receipts)	
\$	<b>1,740,182.05</b>					
(Amount of gross receipts)						
<b>COPYRIGHT ROYALTY FEE</b> <b>Instructions:</b> Use the blocks in this space L to determine the royalty fee you owe: <ul style="list-style-type: none"> <li>• Complete block 1, showing your minimum fee.</li> <li>• Complete block 2, showing whether your system carried any distant television stations.</li> <li>• If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.</li> <li>• If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.</li> </ul> <p>▶ If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.</p> <p>▶ If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below.</p> <p>▶ If part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line 2 in block 4 below.</p>		<b>L</b> <b>Copyright Royalty Fee</b>				
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K <span style="float: right;">\$ <b>1,740,182.05</b></span> Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here. <span style="float: right;">\$ <b>18,515.54</b></span> This is your minimum fee.					
Block 2	<b>DISTANT TELEVISION STATIONS CARRIED:</b> Your answer here must agree with the information you gave in space G. If, in space G, you identified 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? <input checked="" type="checkbox"/> Yes—Complete the DSE schedule. <input type="checkbox"/> No—Leave block 3 below blank and complete line 1, block 4.					
Block 3	Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero <span style="float: right;">\$ <b>6,945.28</b></span> Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero <span style="float: right;"><b>0.00</b></span> Line 3. Add lines 1 and 2 and enter here <span style="float: right;">\$ <b>6,945.28</b></span>					
Block 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE:</b> Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger <span style="float: right;">\$ <b>18,515.54</b></span> Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. <span style="float: right;"><b>0.00</b></span> Line 3. <b>INTEREST CHARGE:</b> Enter the amount from line 4, space Q, page 9 (Interest Worksheet) <span style="float: right;"><b>0.00</b></span> Line 4. <b>FILING FEE.</b> <span style="float: right;">\$ <b>725.00</b></span> <b>TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.</b> <span style="float: right;">\$ <b>19,240.54</b></span> Add Lines 1, 2 and 3 of block 4 and enter total here					
EFT Trace # or TRANSACTION ID # <span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span>		Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing Division for the appropriate form for submitting the additional fees.				
Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions located in the paper SA3 form and the Excel instructions tab for more information.)						

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>M</b> <b>Channels</b>	<p><b>CHANNELS</b></p> <p><b>Instructions:</b> 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.</p> <p>1. Enter the total number of channels on which the cable system carried television broadcast stations . . . . . <span style="border: 1px solid black; padding: 2px 20px;">33</span></p> <p>2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services . . . . . <span style="border: 1px solid black; padding: 2px 20px;">150+</span></p>	
<b>N</b> <b>Individual to Be Contacted for Further Information</b>	<p><b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED:</b> (Identify an individual we can contact about this statement of account.)</p> <p>Name <b>BRUCE BEARD, CINNAMON MUELLER</b> Telephone <b>314-462-9000</b></p> <p>Address <b>1714 DEER TRACK TRAILS, SUITE 230</b> <small>(Number, street, rural route, apartment, or suite number)</small></p> <p><b>ST. LOUIS, MO 63131</b> <small>(City, town, state, zip)</small></p> <p>Email <b>BBEARD@CINNAMONMUELLER.COM</b> Fax (optional) _____</p>	
<b>O</b> <b>Certification</b>	<p><b>CERTIFICATION</b> (This statement of account must be certified and signed in accordance with Copyright Office regulations.)</p> <ul style="list-style-type: none"> <li>• I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li><input type="checkbox"/> <b>(Owner other than corporation or partnership)</b> I am the owner of the cable system as identified in line 1 of space B; or</li> <li><input type="checkbox"/> <b>(Agent of owner other than corporation or partnership)</b> 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</li> <li><input checked="" type="checkbox"/> <b>(Officer or partner)</b> 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.</li> </ul> <p>• 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)]</p> <div style="margin-top: 20px;"> <span style="font-size: 2em; vertical-align: middle; margin-right: 10px;">X</span> <span style="border: 1px solid black; padding: 2px 20px; display: inline-block;">/s/ Darren Farnan</span> </div> <p style="font-size: 0.8em; margin-top: 10px;">Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.</p> <p>Typed or printed name: <b>DARREN P. FARNAN</b></p> <p style="text-align: center;">_____</p> <p>Title: <b>CHIEF DEVELOPMENT OFFICER</b> <small>(Title of official position held in corporation or partnership)</small></p> <p>Date: <b>August 18, 2025</b></p>	

**Privacy Act Notice:** Section 111 of title 17 of the United States Code authorizes the Copyright Office 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 Office'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 filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
<p><b>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</b></p> <p>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:</p> <p style="padding-left: 40px;">“In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.”</p> <p>For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.</p> <p>During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?</p> <p><input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> YES. Enter the total here and list the satellite carrier(s) below. . . . . \$ _____</p>		<b>P</b>  <b>Special Statement Concerning Gross Receipts Exclusion</b>
Name _____ Mailing Address _____	Name _____ Mailing Address _____	
<p><b>INTEREST ASSESSMENTS</b></p> <p>You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.</p> <p>Line 1 Enter the amount of late payment or underpayment . . . . . _____</p> <p style="text-align: right;">x _____</p> <p>Line 2 Multiply line 1 by the interest rate* and enter the sum here . . . . . -</p> <p style="text-align: right;">x _____ days</p> <p>Line 3 Multiply line 2 by the number of days late and enter the sum here . . . . . -</p> <p style="text-align: right;">x 0.00274</p> <p>Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) . . . . . \$ _____</p> <p style="text-align: right;">(interest charge) -</p> <p>* To view the interest rate chart click on <a href="http://www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a>. For further assistance please contact the Licensing Division at (202) 707-8150 or <a href="mailto:licensing@copyright.gov">licensing@copyright.gov</a>.</p> <p>** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.</p> <p>NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.</p> <p>Owner _____</p> <p>Address _____</p> <p>First community served _____</p> <p>Accounting period _____</p> <p>ID number _____</p>		<b>Q</b>  <b>Interest Assessment</b>

**Privacy Act Notice:** Section 111 of title 17 of the United States Code authorizes the Copyright Office 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 Office'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 filing, a determination that would be made by a court of law.

<b>1</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	SYSTEM ID# <b>63486</b>
----------	--	----------------------------

<b>SUM OF DSEs OF CATEGORY "O" STATIONS:</b> • Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule.	<b>4.50</b>
---	-------------

**2**  
**Computation of DSEs for Category "O" Stations**

**Instructions:**  
**In the column headed "Call Sign":** list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3).  
**In the column headed "DSE":** for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."

CATEGORY "O" STATIONS: DSEs					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
<b>KMCI</b>	<b>1.000</b>	<b>KMCI-DT2</b>	<b>1.000</b>	<b>KMCI-DT3</b>	<b>1.000</b>
<b>KTAJ</b>	<b>1.000</b>	<b>KCPT</b>	<b>0.250</b>	<b>KCPT-DT2</b>	<b>0.250</b>

Add rows as necessary. Remember to copy all formula into new rows.

|

--	--	--	--	--	--

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>					<b>SYSTEM ID#</b> <b>63486</b>		
<b>3</b>  <b>Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity</b>	<b>Instructions: CAPACITY</b> <b>Column 1:</b> List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). <b>Column 2:</b> For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. <b>Column 3:</b> For each station, give the total number of hours that the station broadcast over the air during the accounting period. <b>Column 4:</b> Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. <b>Column 5:</b> For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." <b>Column 6:</b> Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.							
	<b>CATEGORY LAC STATIONS: COMPUTATION OF DSEs</b>							
	1. CALL SIGN	2. NUMBER OF HOURS CARRIED BY SYSTEM	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	6. DSE		
		÷	=		x	=		
	÷	=		x	=			
	÷	=		x	=			
	÷	=		x	=			
	÷	=		x	=			
	÷	=		x	=			
	÷	=		x	=			
<b>SUM OF DSEs OF CATEGORY LAC STATIONS:</b> Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule, .....▶					<b>0.00</b>			
<b>4</b>  <b>Computation of DSEs for Substitute-Basis Stations</b>	<b>Instructions:</b> <b>Column 1:</b> 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 regulations 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). <b>Column 2:</b> For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. <b>Column 3:</b> Enter the number of days in the calendar year: 365, except in a leap year. <b>Column 4:</b> Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).							
	<b>SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs</b>							
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷	=			÷	=	
	÷	=			÷	=		
	÷	=			÷	=		
	÷	=			÷	=		
	÷	=			÷	=		
	÷	=			÷	=		
<b>SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS:</b> Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule, .....▶					<b>0.00</b>			
<b>5</b>  <b>Total Number of DSEs</b>	<b>TOTAL NUMBER OF DSEs:</b> Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system.							
	1. Number of DSEs from part 2 ●		_____▶			<b>4.50</b>		
	2. Number of DSEs from part 3 ●		_____▶			<b>0.00</b>		
	3. Number of DSEs from part 4 ●		_____▶			<b>0.00</b>		
TOTAL NUMBER OF DSEs					<b>4.50</b>			

<b>LEGAL NAME OF OWNER OF CABLE SYSTEM:</b> <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	<b>Name</b>
---	-----------------------------------	-------------

**Instructions:** Block A must be completed.  
 In block A:  
 • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.  
 • If your answer if "No," complete blocks B and C below.

**6**

Computation of  
3.75 Fee

**BLOCK A: TELEVISION MARKETS**

Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981?

Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7.

No—Complete blocks B and C below.

**BLOCK B: CARRIAGE OF PERMITTED DSEs**

**Column 1: CALL SIGN** List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)

**Column 2: BASIS OF PERMITTED CARRIAGE** Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)

A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]

B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)

C Noncommercial educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]

D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).

E Carried pursuant to individual waiver of FCC rules (76.7)

\*F A station previously carried on a part-time or substitute basis prior to June 25, 1981

G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]

M Retransmission of a distant multicast stream.

**Column 3:** List the DSE for each distant station listed in parts 2, 3, and 4 of the schedule.  
 \*(Note: For those stations identified by the letter "F" in column 2, you must complete the worksheet on page 14 of this schedule to determine the DSE.)

1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE
KMCI	A	1.00						
KMCI-DT2	M	1.00						
KMCI-DT3	M	1.00						
KTAJ	A	1.00						
KCPT	E	0.25						
KCPT-DT2	M	0.25						

**4.50**

**BLOCK C: COMPUTATION OF 3.75 FEE**

Line 1: Enter the total number of DSEs from part 5 of this schedule \_\_\_\_\_

Line 2: Enter the sum of permitted DSEs from block B above \_\_\_\_\_

Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate.  
 (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule) \_\_\_\_\_

Line 4: Enter gross receipts from space K (page 7) \_\_\_\_\_  
x 0.0375

Line 5: Multiply line 4 by 0.0375 and enter sum here \_\_\_\_\_  
x

Line 6: Enter total number of DSEs from line 3 \_\_\_\_\_

Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7) \_\_\_\_\_

**0.00**

Do any of the DSEs represent partially permitted/partially nonpermitted carriage? If yes, see part 9 instructions.



<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#:</b> <b>63486</b>
-------------	--	------------------------------------

**Worksheet for  
Computating  
the DSE  
Schedule for  
Permitted  
Part-Time and  
Substitute  
Carriage**

**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 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 identified by the letter "F" in column 2 of part 6 of the DSE schedule.

Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981.

Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1).

Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters:  
(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  
A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1), 76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).  
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 file in the Licensing Division.

PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS

1. CALL SIGN	2. PRIOR DSE	3. ACCOUNTING PERIOD	4. BASIS OF CARRIAGE	5. PRESENT DSE	6. PERMITTED DSE

**7  
Computation  
of the  
Syndicated  
Exclusivity  
Surcharge**

**Instructions:** Block A must be completed.  
In block A:  
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.

**BLOCK A: MAJOR TELEVISION MARKET**

• 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																																																																																
<p>Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole or in part, over the cable system?</p> <p><input type="checkbox"/> Yes—List each station below with its appropriate permitted DSE  <input checked="" type="checkbox"/> No—Enter zero and proceed to part 8.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">CALL SIGN</th> <th style="width:12.5%;">DSE</th> <th style="width:25%;">CALL SIGN</th> <th style="width:12.5%;">DSE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="2" style="text-align: right;">TOTAL DSEs</td> <td colspan="2" style="text-align: right;"><b>0.00</b></td> </tr> </tbody> </table>	CALL SIGN	DSE	CALL SIGN	DSE																																	TOTAL DSEs		<b>0.00</b>		<p>Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)</p> <p><input type="checkbox"/> Yes—List each station below with its appropriate permitted DSE  <input checked="" type="checkbox"/> No—Enter zero and proceed to part 8.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">CALL SIGN</th> <th style="width:12.5%;">DSE</th> <th style="width:25%;">CALL SIGN</th> <th style="width:12.5%;">DSE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="2" style="text-align: right;">TOTAL DSEs</td> <td colspan="2" style="text-align: right;"><b>0.00</b></td> </tr> </tbody> </table>	CALL SIGN	DSE	CALL SIGN	DSE																																	TOTAL DSEs		<b>0.00</b>	
CALL SIGN	DSE	CALL SIGN	DSE																																																																														
TOTAL DSEs		<b>0.00</b>																																																																															
CALL SIGN	DSE	CALL SIGN	DSE																																																																														
TOTAL DSEs		<b>0.00</b>																																																																															



<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>7</b>  <b>Computation of the Syndicated Exclusivity Surcharge</b>	<p>Section 4b If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.</p> <p>A. Enter 0.00300 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>B. Enter 0.00189 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>C. Multiply line B by 3.000 and enter here. . . . . ▶ \$ _____</p> <p>D. Enter 0.00089 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. . . . . ▶ _____</p> <p>F. Multiply line D by line E and enter here . . . . . ▶ \$ _____</p> <p>G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)</p> <p><b>Syndicated Exclusivity Surcharge.</b> . . . . . ▶ \$ _____</p>	
<b>8</b>  <b>Computation of Base Rate Fee</b>	<p><b>Instructions:</b> You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5.</p> <ul style="list-style-type: none"> <li>• In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.</li> <li>• If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.</li> <li>• If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank.</li> </ul> <p><b>What is a partially distant station?</b> A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.</p>	
<b>BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS</b>		
<p>• Did your cable system retransmit the signals of any partially distant television stations during the accounting period?</p> <p><input checked="" type="checkbox"/> Yes—Complete part 9 of this schedule.                      <input type="checkbox"/> No—Complete the following sections.</p>		
<b>BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE</b>		
Section 1	Enter the amount of gross receipts from space K (page 7). . . . . ▶ \$ _____	
Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.). . . . . ▶ _____	
Section 3	<p>If the figure in section 2 is <b>4.000 or less</b>, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.</p> <p>A. Enter 0.01064 of gross receipts (the amount in section 1). . . . . ▶ \$ _____</p> <p>B. Enter 0.00701 of gross receipts (the amount in section 1). . . . . ▶ _____</p> <p>C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. . . . . ▶ _____</p> <p>D. Multiply line B by line C and enter here. . . . . ▶ \$ _____</p> <p>E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)</p> <p><b>Base Rate Fee.</b> . . . . . ▶ \$ <span style="border: 1px solid black; padding: 2px;">0.00</span></p>	

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	SYSTEM ID# <b>63486</b>	Name
<p>Section 4</p>	<p>If the figure in section 2 is <b>more than 4.000</b>, compute your base rate fee here and leave section 3 blank.</p> <p>A. Enter 0.01064 of gross receipts (the amount in section 1) ..... ▶ \$ _____</p> <p>B. Enter 0.00701 of gross receipts (the amount in section 1) ..... ▶ \$ _____</p> <p>C. Multiply line B by 3.000 and enter here ..... ▶ \$ _____</p> <p>D. Enter 0.00330 of gross receipts (the amount in section 1) ..... ▶ \$ _____</p> <p>E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ..... ▶ _____</p> <p>F. Multiply line D by line E and enter here ..... ▶ \$ _____</p> <p>G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) <b>Base Rate Fee</b> ..... ▶ \$ <span style="border: 1px solid black; padding: 2px;">0.00</span></p>	<p style="text-align: center; font-size: 24pt;"><b>8</b></p> <p style="text-align: center;">Computation of Base Rate Fee</p>
	<p><b>IMPORTANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G.</p> <p><b>In General:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must:</p> <p><b>First:</b> Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.</p> <p><b>Finally:</b> Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.</p> <p>NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.</p> <p><b>How to Identify a Subscriber Group for Partially Distant Stations</b></p> <p><b>Step 1:</b> For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.</p> <p><b>Step 2:</b> For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)</p> <p><b>Step 3:</b> Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.</p> <p><b>Computing the base rate fee for each subscriber group:</b> Block A contains separate sections, one for each of your system's subscriber groups.</p> <p>In each section:</p> <ul style="list-style-type: none"> <li>• Identify the communities/areas represented by each subscriber group.</li> <li>• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group.</li> <li>• If:             <ol style="list-style-type: none"> <li>1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,</li> <li>2) 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.</li> </ol> </li> <li>• Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.</li> <li>• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.</li> <li>• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.</li> </ul>	<p style="text-align: center; font-size: 24pt;"><b>9</b></p> <p style="text-align: center;">Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations, and for Partially Permitted Stations</p>

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>Clinton and Clay Counties</b>					COMMUNITY/ AREA <b>Gentry, Holt, Worth, Daviess, and No</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
				<b>KCPT</b>	<b>0.25</b>						
				<b>KCPT-DT2</b>	<b>0.25</b>						
				<b>KTAJ</b>	<b>1.00</b>						
Total DSEs				<b>0.00</b>		Total DSEs				<b>1.50</b>	
Gross Receipts First Group				\$ <b>458,002.17</b>		Gross Receipts Second Group				\$ <b>315,615.21</b>	
Base Rate Fee First Group				\$ <b>0.00</b>		Base Rate Fee Second Group				\$ <b>4,464.38</b>	
THIRD SUBSCRIBER GROUP					FOURTH SUBSCRIBER GROUP						
COMMUNITY/ AREA <b>Andrew, Buchanan, and DeKalb C</b>					COMMUNITY/ AREA <b>Andrew and DeKalb Counties</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
				<b>KMCI</b>	<b>1.00</b>						
				<b>KMCI-DT2</b>	<b>1.00</b>						
				<b>KMCI-DT3</b>	<b>1.00</b>						
Total DSEs				<b>0.00</b>		Total DSEs				<b>3.00</b>	
Gross Receipts Third Group				\$ <b>865,960.49</b>		Gross Receipts Fourth Group				\$ <b>100,604.18</b>	
Base Rate Fee Third Group				\$ <b>0.00</b>		Base Rate Fee Fourth Group				\$ <b>2,480.90</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <b>6,945.28</b>					

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						<b>SYSTEM ID# 63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
FIFTH SUBSCRIBER GROUP				SIXTH SUBSCRIBER GROUP				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
SEVENTH SUBSCRIBER GROUP				EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
NINTH SUBSCRIBER GROUP				TENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>	
Gross Receipts First Group			\$ <u>0.00</u>	Gross Receipts Second Group			\$ <u>0.00</u>	
Base Rate Fee First Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Second Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	
ELEVENTH SUBSCRIBER GROUP				TWELVTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>	
Gross Receipts Third Group			\$ <u>0.00</u>	Gross Receipts Fourth Group			\$ <u>0.00</u>	
Base Rate Fee Third Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Fourth Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; padding: 2px;"> </span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
THIRTEENTH SUBSCRIBER GROUP				FOURTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
FIFTEENTH SUBSCRIBER GROUP				SIXTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SEVENTEENTH SUBSCRIBER GROUP					EIGHTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
NINETEENTH SUBSCRIBER GROUP					TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**9**  
 Computation  
 of  
 Base Rate Fee  
 and  
 Syndicated  
 Exclusivity  
 Surcharge  
 for  
 Partially  
 Distant  
 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
TWENTY-FIRST SUBSCRIBER GROUP				TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
TWENTY-THIRD SUBSCRIBER GROUP				TWENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
TWENTY-FIFTH SUBSCRIBER GROUP				TWENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
TWENTY-SEVENTH SUBSCRIBER GROUP				TWENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
TWENTY-NINTH SUBSCRIBER GROUP				THIRTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<u>0.00</u>		Total DSEs		<u>0.00</u>		
Gross Receipts First Group		\$ <u>0.00</u>		Gross Receipts Second Group		\$ <u>0.00</u>		
Base Rate Fee First Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		Base Rate Fee Second Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		
THIRTY-FIRST SUBSCRIBER GROUP				THIRTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<u>0.00</u>		Total DSEs		<u>0.00</u>		
Gross Receipts Third Group		\$ <u>0.00</u>		Gross Receipts Fourth Group		\$ <u>0.00</u>		
Base Rate Fee Third Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		Base Rate Fee Fourth Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTY-THIRD SUBSCRIBER GROUP					THIRTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
THIRTY-FIFTH SUBSCRIBER GROUP					THIRTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
THIRTY-SEVENTH SUBSCRIBER GROUP				THIRTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
THIRTY-NINTH SUBSCRIBER GROUP				FORTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FORTY-FIRST SUBSCRIBER GROUP				FORTY-SECOND SUBSCRIBER GROUP					<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>		
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>		
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>		
FORTY-THIRD SUBSCRIBER GROUP				FORTY-FOURTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>		
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>		
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>			

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
FORTY-FIFTH SUBSCRIBER GROUP				FORTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
FORTY-SEVENTH SUBSCRIBER GROUP				FORTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b>	
FORTY-NINTH SUBSCRIBER GROUP				FIFTIETH SUBSCRIBER GROUP					Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>		
Gross Receipts First Group			\$ <u>0.00</u>	Gross Receipts Second Group			\$ <u>0.00</u>		
Base Rate Fee First Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>	Base Rate Fee Second Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		
FIFTY-FIRST SUBSCRIBER GROUP				FIFTY-SECOND SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>		
Gross Receipts Third Group			\$ <u>0.00</u>	Gross Receipts Fourth Group			\$ <u>0.00</u>		
Base Rate Fee Third Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>	Base Rate Fee Fourth Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>			

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
FIFTY-THIRD SUBSCRIBER GROUP				FIFTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
FIFTY-FIFTH SUBSCRIBER GROUP				FIFTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
FIFTY-SEVENTH SUBSCRIBER GROUP				FIFTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
FIFTY-NINTH SUBSCRIBER GROUP				SIXTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
SIXTY-FIRST SUBSCRIBER GROUP				SIXTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
SIXTY-THIRD SUBSCRIBER GROUP				SIXTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
SIXTY-FIFTH SUBSCRIBER GROUP				SIXTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
SIXTY-SEVENTH SUBSCRIBER GROUP				SIXTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
SIXTY-NINTH SUBSCRIBER GROUP				SEVENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
SEVENTY-FIRST SUBSCRIBER GROUP				SEVENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
SEVENTY-THIRD SUBSCRIBER GROUP				SEVENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
SEVENTY-FIFTH SUBSCRIBER GROUP				SEVENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
SEVENTY-SEVENTH SUBSCRIBER GROUP				SEVENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
SEVENTY-NINTH SUBSCRIBER GROUP				EIGHTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
EIGHTY-FIRST SUBSCRIBER GROUP				EIGHTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
EIGHTY-THIRD SUBSCRIBER GROUP				EIGHTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
EIGHTY-FIFTH SUBSCRIBER GROUP				EIGHTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
EIGHTY-SEVENTH SUBSCRIBER GROUP				EIGHTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
EIGHTY-NINTH SUBSCRIBER GROUP				NINTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
NINETY-FIRST SUBSCRIBER GROUP				NINETY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
NINETY-THIRD SUBSCRIBER GROUP				NINETY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
NINETY-FIFTH SUBSCRIBER GROUP				NINETY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
NINETY-SEVENTH SUBSCRIBER GROUP				NINETY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<u>0.00</u>		Total DSEs		<u>0.00</u>		
Gross Receipts First Group		\$ <u>0.00</u>		Gross Receipts Second Group		\$ <u>0.00</u>		
Base Rate Fee First Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		Base Rate Fee Second Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		
NINETY-NINTH SUBSCRIBER GROUP				ONE HUNDREDTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<u>0.00</u>		Total DSEs		<u>0.00</u>		
Gross Receipts Third Group		\$ <u>0.00</u>		Gross Receipts Fourth Group		\$ <u>0.00</u>		
Base Rate Fee Third Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		Base Rate Fee Fourth Group		\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <u>0.00</u>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED FIRST SUBSCRIBER GROUP				ONE HUNDRED SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED THIRD SUBSCRIBER GROUP				ONE HUNDRED FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
ONE HUNDRED FIFTH SUBSCRIBER GROUP				ONE HUNDRED SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED SEVENTH SUBSCRIBER GROUP				ONE HUNDRED EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
ONE HUNDRED NINTH SUBSCRIBER GROUP				ONE HUNDRED TENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED ELEVENTH SUBSCRIBER GROUP				ONE HUNDRED TWELVTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP				ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP				ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP				ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED NINETEENTH SUBSCRIBER GROUP				ONE HUNDRED TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP					ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP					ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP				ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
<b>Base Rate Fee First Group</b>			\$ <b>0.00</b>	<b>Base Rate Fee Second Group</b>			\$ <b>0.00</b>	
ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP				ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee Third Group</b>			\$ <b>0.00</b>	<b>Base Rate Fee Fourth Group</b>			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED THIRTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>	
Gross Receipts First Group			\$ <u>0.00</u>	Gross Receipts Second Group			\$ <u>0.00</u>	
Base Rate Fee First Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Second Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	
ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>	
Gross Receipts Third Group			\$ <u>0.00</u>	Gross Receipts Fourth Group			\$ <u>0.00</u>	
Base Rate Fee Third Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	Base Rate Fee Fourth Group			\$ <span style="border: 1px solid black; padding: 2px;">0.00</span>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; padding: 2px; background-color: yellow;"> </span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP					ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP					ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP				ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED FORTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP				ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP				ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED FIFTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts First Group		\$ <b>0.00</b>		Gross Receipts Second Group		\$ <b>0.00</b>		
Base Rate Fee First Group		\$ <b>0.00</b>		Base Rate Fee Second Group		\$ <b>0.00</b>		
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP				ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		<b>0.00</b>		Total DSEs		<b>0.00</b>		
Gross Receipts Third Group		\$ <b>0.00</b>		Gross Receipts Fourth Group		\$ <b>0.00</b>		
Base Rate Fee Third Group		\$ <b>0.00</b>		Base Rate Fee Fourth Group		\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP				ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>	
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>	
ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED SIXTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>	
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>	
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>Clinton and Clay Counties</b>					COMMUNITY/ AREA <b>Gentry, Holt, Worth, Daviess, and No</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Total DSEs				<b>0.00</b>	Total DSEs				<b>0.00</b>
Gross Receipts First Group				\$ <b>458,002.17</b>	Gross Receipts Second Group				\$ <b>315,615.21</b>
Base Rate Fee First Group				\$ <b>0.00</b>	Base Rate Fee Second Group				\$ <b>0.00</b>
THIRD SUBSCRIBER GROUP					FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA <b>Andrew, Buchanan, and DeKalb (</b>					COMMUNITY/ AREA <b>Andrew and DeKalb Counties</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs				<b>0.00</b>	Total DSEs				<b>0.00</b>
Gross Receipts Third Group				\$ <b>865,960.49</b>	Gross Receipts Fourth Group				\$ <b>100,604.18</b>
Base Rate Fee Third Group				\$ <b>0.00</b>	Base Rate Fee Fourth Group				\$ <b>0.00</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <b>0.00</b>			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FIFTH SUBSCRIBER GROUP					SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
SEVENTH SUBSCRIBER GROUP					EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px;"></div>			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
NINTH SUBSCRIBER GROUP					TENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
ELEVENTH SUBSCRIBER GROUP					TWELVTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<div style="border: 1px solid black; width: 100%; height: 20px; background-color: yellow;"></div>			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTEENTH SUBSCRIBER GROUP					FOURTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
FIFTEENTH SUBSCRIBER GROUP					SIXTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			



**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
TWENTY-FIRST SUBSCRIBER GROUP					TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
TWENTY-THIRD SUBSCRIBER GROUP					TWENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name		
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
TWENTY-FIFTH SUBSCRIBER GROUP					TWENTY-SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>						
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>						
TWENTY-SEVENTH SUBSCRIBER GROUP					TWENTY-EIGHTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>						
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>						
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____				

**9**  
 Computation  
 of  
 Base Rate Fee  
 and  
 Syndicated  
 Exclusivity  
 Surcharge  
 for  
 Partially  
 Distant  
 Stations



**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTY-THIRD SUBSCRIBER GROUP					THIRTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
THIRTY-FIFTH SUBSCRIBER GROUP					THIRTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<div style="border: 1px solid black; width: 100%; height: 20px; background-color: yellow;"> <span style="float: left; margin-right: 5px;">\$</span> </div>			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
THIRTY-SEVENTH SUBSCRIBER GROUP					THIRTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
THIRTY-NINTH SUBSCRIBER GROUP					FORTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
FORTY-FIRST SUBSCRIBER GROUP					FORTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
FORTY-THIRD SUBSCRIBER GROUP					FORTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<div style="border: 1px solid black; width: 150px; height: 20px; background-color: yellow;"></div>			

### Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						<b>SYSTEM ID#</b> <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								
<b>FORTY-FIFTH SUBSCRIBER GROUP</b>				<b>FORTY-SIXTH SUBSCRIBER GROUP</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA ..... <b>0</b>				COMMUNITY/ AREA ..... <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>	
Gross Receipts First Group			\$ <u>0.00</u>	Gross Receipts Second Group			\$ <u>0.00</u>	
<b>Base Rate Fee</b> First Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <b>0.00</b>	<b>Base Rate Fee</b> Second Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <b>0.00</b>	
<b>FORTY-SEVENTH SUBSCRIBER GROUP</b>				<b>FORTY-EIGHTH SUBSCRIBER GROUP</b>				
COMMUNITY/ AREA ..... <b>0</b>				COMMUNITY/ AREA ..... <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>	
Gross Receipts Third Group			\$ <u>0.00</u>	Gross Receipts Fourth Group			\$ <u>0.00</u>	
<b>Base Rate Fee</b> Third Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <b>0.00</b>	<b>Base Rate Fee</b> Fourth Group			\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>		



**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name		
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
FIFTY-THIRD SUBSCRIBER GROUP					FIFTY-FOURTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>						
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>						
FIFTY-FIFTH SUBSCRIBER GROUP					FIFTY-SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>						
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>						
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____				

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

### Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						<b>SYSTEM ID#</b> <b>63486</b>		<b>Name</b>			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
FIFTY-SEVENTH SUBSCRIBER GROUP				FIFTY-EIGHTH SUBSCRIBER GROUP					<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations		
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs _____			<b>0.00</b>			Total DSEs _____			<b>0.00</b>		
Gross Receipts First Group \$ _____			<b>0.00</b>			Gross Receipts Second Group \$ _____			<b>0.00</b>		
<b>Base Rate Fee</b> First Group \$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span>			<b>0.00</b>			<b>Base Rate Fee</b> Second Group \$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span>			<b>0.00</b>		
FIFTY-NINTH SUBSCRIBER GROUP				SIXTIETH SUBSCRIBER GROUP							
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs _____			<b>0.00</b>			Total DSEs _____			<b>0.00</b>		
Gross Receipts Third Group \$ _____			<b>0.00</b>			Gross Receipts Fourth Group \$ _____			<b>0.00</b>		
<b>Base Rate Fee</b> Third Group \$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span>			<b>0.00</b>			<b>Base Rate Fee</b> Fourth Group \$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span>			<b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span>					

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SIXTY-FIRST SUBSCRIBER GROUP					SIXTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
SIXTY-THIRD SUBSCRIBER GROUP					SIXTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**9**

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

### Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SIXTY-FIFTH SUBSCRIBER GROUP					SIXTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>		
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>		
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>		
SIXTY-SEVENTH SUBSCRIBER GROUP					SIXTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>		
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>		
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)							\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>		

**9**

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

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
SIXTY-NINTH SUBSCRIBER GROUP					SEVENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>					Total DSEs _____ <b>0.00</b>				
Gross Receipts First Group \$ _____ <b>0.00</b>					Gross Receipts Second Group \$ _____ <b>0.00</b>				
Base Rate Fee First Group \$ _____ <b>0.00</b>					Base Rate Fee Second Group \$ _____ <b>0.00</b>				
SEVENTY-FIRST SUBSCRIBER GROUP					SEVENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>					Total DSEs _____ <b>0.00</b>				
Gross Receipts Third Group \$ _____ <b>0.00</b>					Gross Receipts Fourth Group \$ _____ <b>0.00</b>				
Base Rate Fee Third Group \$ _____ <b>0.00</b>					Base Rate Fee Fourth Group \$ _____ <b>0.00</b>				
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>								SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
SEVENTY-THIRD SUBSCRIBER GROUP						SEVENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>						COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>						
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>						
SEVENTY-FIFTH SUBSCRIBER GROUP						SEVENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>						COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>						
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>						
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)										\$ _____

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
SEVENTY-SEVENTH SUBSCRIBER GROUP					SEVENTY-EIGHTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts First Group \$ _____				<b>0.00</b>		Gross Receipts Second Group \$ _____				<b>0.00</b>	
Base Rate Fee First Group \$ _____				<b>0.00</b>		Base Rate Fee Second Group \$ _____				<b>0.00</b>	
SEVENTY-NINTH SUBSCRIBER GROUP					EIGHTIETH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts Third Group \$ _____				<b>0.00</b>		Gross Receipts Fourth Group \$ _____				<b>0.00</b>	
Base Rate Fee Third Group \$ _____				<b>0.00</b>		Base Rate Fee Fourth Group \$ _____				<b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____					

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations





**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
EIGHTY-NINTH SUBSCRIBER GROUP					NINTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group    \$ _____ <b>0.00</b>				Gross Receipts Second Group    \$ _____ <b>0.00</b>					
Base Rate Fee First Group    \$ _____ <b>0.00</b>				Base Rate Fee Second Group    \$ _____ <b>0.00</b>					
NINETY-FIRST SUBSCRIBER GROUP					NINETY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group    \$ _____ <b>0.00</b>				Gross Receipts Fourth Group    \$ _____ <b>0.00</b>					
Base Rate Fee Third Group    \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group    \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

### Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						<b>SYSTEM ID#</b> <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
NINETY-THIRD SUBSCRIBER GROUP				NINETY-FOURTH SUBSCRIBER GROUP					<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
COMMUNITY/ AREA ..... <b>0</b>				COMMUNITY/ AREA ..... <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>		
Gross Receipts First Group			\$ <u>0.00</u>	Gross Receipts Second Group			\$ <u>0.00</u>		
Base Rate Fee First Group			\$ <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Second Group			\$ <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> <u>0.00</u>		
NINETY-FIFTH SUBSCRIBER GROUP				NINETY-SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA ..... <b>0</b>				COMMUNITY/ AREA ..... <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<u>0.00</u>	Total DSEs			<u>0.00</u>		
Gross Receipts Third Group			\$ <u>0.00</u>	Gross Receipts Fourth Group			\$ <u>0.00</u>		
Base Rate Fee Third Group			\$ <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> <u>0.00</u>	Base Rate Fee Fourth Group			\$ <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> <u>0.00</u>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 80px; height: 15px;"></span>			



**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
ONE HUNDRED FIRST SUBSCRIBER GROUP					ONE HUNDRED SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
ONE HUNDRED THIRD SUBSCRIBER GROUP					ONE HUNDRED FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**9**

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

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name		
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
ONE HUNDRED FIFTH SUBSCRIBER GROUP					ONE HUNDRED SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>						
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>						
ONE HUNDRED SEVENTH SUBSCRIBER GROUP					ONE HUNDRED EIGHTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>						
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>						
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____				

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
ONE HUNDRED NINTH SUBSCRIBER GROUP					ONE HUNDRED TENTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs				<b>0.00</b>		Total DSEs				<b>0.00</b>	
Gross Receipts First Group				\$ <b>0.00</b>		Gross Receipts Second Group				\$ <b>0.00</b>	
Base Rate Fee First Group				\$ <b>0.00</b>		Base Rate Fee Second Group				\$ <b>0.00</b>	
ONE HUNDRED ELEVENTH SUBSCRIBER GROUP					ONE HUNDRED TWELVTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs				<b>0.00</b>		Total DSEs				<b>0.00</b>	
Gross Receipts Third Group				\$ <b>0.00</b>		Gross Receipts Fourth Group				\$ <b>0.00</b>	
Base Rate Fee Third Group				\$ <b>0.00</b>		Base Rate Fee Fourth Group				\$ <b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>					

**9**

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

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP					ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts First Group \$ _____				<b>0.00</b>		Gross Receipts Second Group \$ _____				<b>0.00</b>	
Base Rate Fee First Group \$ _____				<b>0.00</b>		Base Rate Fee Second Group \$ _____				<b>0.00</b>	
ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP					ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts Third Group \$ _____				<b>0.00</b>		Gross Receipts Fourth Group \$ _____				<b>0.00</b>	
Base Rate Fee Third Group \$ _____				<b>0.00</b>		Base Rate Fee Fourth Group \$ _____				<b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____					

**9**

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

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP					ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
ONE HUNDRED NINETEENTH SUBSCRIBER GROUP					ONE HUNDRED TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						<div style="border: 1px solid black; width: 100%; height: 20px; background-color: yellow;"></div>			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP					ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts First Group \$ _____				<b>0.00</b>		Gross Receipts Second Group \$ _____				<b>0.00</b>	
Base Rate Fee First Group \$ _____				<b>0.00</b>		Base Rate Fee Second Group \$ _____				<b>0.00</b>	
ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP					ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts Third Group \$ _____				<b>0.00</b>		Gross Receipts Fourth Group \$ _____				<b>0.00</b>	
Base Rate Fee Third Group \$ _____				<b>0.00</b>		Base Rate Fee Fourth Group \$ _____				<b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____					

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>											
ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP					ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts First Group \$ _____				<b>0.00</b>		Gross Receipts Second Group \$ _____				<b>0.00</b>	
Base Rate Fee First Group \$ _____				<b>0.00</b>		Base Rate Fee Second Group \$ _____				<b>0.00</b>	
ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs _____				<b>0.00</b>		Total DSEs _____				<b>0.00</b>	
Gross Receipts Third Group \$ _____				<b>0.00</b>		Gross Receipts Fourth Group \$ _____				<b>0.00</b>	
Base Rate Fee Third Group \$ _____				<b>0.00</b>		Base Rate Fee Fourth Group \$ _____				<b>0.00</b>	
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____					

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations



**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name		
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>			
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>			
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>			
ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP				ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP						
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>			
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>			
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>			
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.										
Enter here and in block 3, line 1, space L (page 7)						\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>				

**9**

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

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name		
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>						
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>						
ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP					ONE HUNDRED FORTIETH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>						
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>						
<b>Base Rate Fee:</b> 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)						\$ _____				

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>		SYSTEM ID# <b>63486</b>		Name			
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>							
ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP			
COMMUNITY/ AREA ..... <b>0</b>				COMMUNITY/ AREA ..... <b>0</b>			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>
Gross Receipts First Group			\$ <b>0.00</b>	Gross Receipts Second Group			\$ <b>0.00</b>
Base Rate Fee First Group			\$ <b>0.00</b>	Base Rate Fee Second Group			\$ <b>0.00</b>
ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP			
COMMUNITY/ AREA ..... <b>0</b>				COMMUNITY/ AREA ..... <b>0</b>			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			<b>0.00</b>	Total DSEs			<b>0.00</b>
Gross Receipts Third Group			\$ <b>0.00</b>	Gross Receipts Fourth Group			\$ <b>0.00</b>
Base Rate Fee Third Group			\$ <b>0.00</b>	Base Rate Fee Fourth Group			\$ <b>0.00</b>
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)							
\$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; background-color: yellow;"></span>							

9

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

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP					ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>				<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name		
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>										
ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP					ONE HUNDRED FIFTIETH SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>						
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>						
ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP					ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>						
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>						
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>						
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____				

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>								<b>9</b> Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<u><b>0.00</b></u>	Total DSEs			<u><b>0.00</b></u>	
Gross Receipts First Group			\$ <u><b>0.00</b></u>	Gross Receipts Second Group			\$ <u><b>0.00</b></u>	
Base Rate Fee First Group			\$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	Base Rate Fee Second Group			\$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP				ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>				COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			<u><b>0.00</b></u>	Total DSEs			<u><b>0.00</b></u>	
Gross Receipts Third Group			\$ <u><b>0.00</b></u>	Gross Receipts Fourth Group			\$ <u><b>0.00</b></u>	
Base Rate Fee Third Group			\$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	Base Rate Fee Fourth Group			\$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
<b>Base Rate Fee:</b> 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)						\$ <span style="border: 1px solid black; padding: 2px;"> </span>		

**Nonpermitted 3.75 Stations**

LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>						SYSTEM ID# <b>63486</b>		Name	
<b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>									
ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts First Group \$ _____ <b>0.00</b>				Gross Receipts Second Group \$ _____ <b>0.00</b>					
Base Rate Fee First Group \$ _____ <b>0.00</b>				Base Rate Fee Second Group \$ _____ <b>0.00</b>					
ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP					ONE HUNDRED SIXTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ <b>0</b>					COMMUNITY/ AREA _____ <b>0</b>				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Total DSEs _____ <b>0.00</b>				Total DSEs _____ <b>0.00</b>					
Gross Receipts Third Group \$ _____ <b>0.00</b>				Gross Receipts Fourth Group \$ _____ <b>0.00</b>					
Base Rate Fee Third Group \$ _____ <b>0.00</b>				Base Rate Fee Fourth Group \$ _____ <b>0.00</b>					
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$ _____			

**9**  
Computation  
of  
Base Rate Fee  
and  
Syndicated  
Exclusivity  
Surcharge  
for  
Partially  
Distant  
Stations

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>FIRST SUBSCRIBER GROUP</b>	<b>SECOND SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>THIRD SUBSCRIBER GROUP</b>	<b>FOURTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>	
<h1 style="margin: 0;">9</h1> <p style="margin: 5px 0;"><b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b></p>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>		
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market             </p>		
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>		
	<b>FIFTH SUBSCRIBER GROUP</b>	<b>SIXTH SUBSCRIBER GROUP</b>	
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<b>SEVENTH SUBSCRIBER GROUP</b>	<b>EIGHTH SUBSCRIBER GROUP</b>		
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>		
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>			

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market         </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>NINTH SUBSCRIBER GROUP</b>	<b>TENTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>ELEVENTH SUBSCRIBER GROUP</b>	<b>TWELVTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	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 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: <input type="checkbox"/> First 50 major television market <input type="checkbox"/> Second 50 major television market	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>THIRTEENTH SUBSCRIBER GROUP</b>	<b>FOURTEENTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width:100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width:100px;" type="text"/>
	<b>FIFTEENTH SUBSCRIBER GROUP</b>	<b>SIXTEENTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width:100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width:100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width:100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"><input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market</p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>SEVENTEENTH SUBSCRIBER GROUP</b>	<b>EIGHTEENTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>NINEENTH SUBSCRIBER GROUP</b>	<b>TWENTYTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	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 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:	
	<input type="checkbox"/> First 50 major television market <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.		
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
<b>TWENTY-FIRST SUBSCRIBER GROUP</b>		<b>TWENTY-SECOND SUBSCRIBER GROUP</b>
Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/>	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/>	
Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/>	Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/>	
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/>	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/>	
<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>	
First Group . . . . . \$ <input style="width: 100px;" type="text"/>	Second Group . . . . . \$ <input style="width: 100px;" type="text"/>	
<b>TWENTY-THIRD SUBSCRIBER GROUP</b>		<b>TWENTY-FOURTH SUBSCRIBER GROUP</b>
Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/>	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/>	
Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/>	Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/>	
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/>	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/>	
<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>	
Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>	
<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . .		\$ <input style="width: 100px;" type="text"/>

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>TWENTY-FIFTH SUBSCRIBER GROUP</b>	<b>TWENTY-SIXTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>TWENTY-SEVENTH SUBSCRIBER GROUP</b>	<b>TWENTY-EIGHTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>TWENTY-NINTH SUBSCRIBER GROUP</b>	<b>THIRTIETH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>THIRTY-FIRST SUBSCRIBER GROUP</b>	<b>THIRTY-SECOND SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market         </p> <p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>THIRTY-THIRD SUBSCRIBER GROUP</b>	<b>THIRTY-FOURTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width:100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width:100px;" type="text"/>
	<b>THIRTY-FIFTH SUBSCRIBER GROUP</b>	<b>THIRTY-SIXTH SUBSCRIBER GROUP</b>
Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -	
<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width:100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width:100px;" type="text"/>	
<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width:100px;" type="text"/>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>THIRTY-SEVENTH SUBSCRIBER GROUP</b>	<b>THIRTY-EIGHTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>THIRTY-NINTH SUBSCRIBER GROUP</b>	<b>FORTIETH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>FORTY-FIRST SUBSCRIBER GROUP</b>	<b>FORTY-SECOND SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>FORTY-THIRD SUBSCRIBER GROUP</b>	<b>FORTY-FOURTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>FORTY-FIFTH SUBSCRIBER GROUP</b>	<b>FORTY-SIXTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>FORTY-SEVENTH SUBSCRIBER GROUP</b>	<b>FORTY-EIGHTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>FORTY-NINTH SUBSCRIBER GROUP</b>	<b>FIFTIETH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>FIFTY-FIRST SUBSCRIBER GROUP</b>	<b>FIFTY-SECOND SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>FIFTY-THIRD SUBSCRIBER GROUP</b>	<b>FIFTY-FOURTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>FIFTY-FIFTH SUBSCRIBER GROUP</b>	<b>FIFTY-SIXTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>FIFTY-SEVENTH SUBSCRIBER GROUP</b>	<b>FIFTY-EIGHTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>FIFTY-NINTH SUBSCRIBER GROUP</b>	<b>SIXTIETH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>SIXTY-FIRST SUBSCRIBER GROUP</b>	<b>SIXTY-SECOND SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SIXTY-THIRD SUBSCRIBER GROUP</b>	<b>SIXTY-FOURTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>SIXTY-FIFTH SUBSCRIBER GROUP</b>	<b>SIXTY-SIXTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>SIXTY-SEVENTH SUBSCRIBER GROUP</b>	<b>SIXTY-EIGHTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>SIXTY-NINTH SUBSCRIBER GROUP</b>	<b>SEVENTIETH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SEVENTY-FIRST SUBSCRIBER GROUP</b>	<b>SEVENTY-SECOND SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"><input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market</p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>SEVENTY-THIRD SUBSCRIBER GROUP</b>	<b>SEVENTY-FOURTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/>	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/>
	Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/>	Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/>
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/>	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>
	First Group . . . . . \$ <input style="width:100px;" type="text"/>	Second Group . . . . . \$ <input style="width:100px;" type="text"/>
	<b>SEVENTY-FIFTH SUBSCRIBER GROUP</b>	<b>SEVENTY-SIXTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/>	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/>
	Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/>	Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/>
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/>	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b>
	Third Group . . . . . \$ <input style="width:100px;" type="text"/>	Fourth Group . . . . . \$ <input style="width:100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width:100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>SEVENTY-SEVENTH SUBSCRIBER GROUP</b>	<b>SEVENTY-EIGHTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SEVENTY-NINTH SUBSCRIBER GROUP</b>	<b>EIGHTIETH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>EIGHTY-FIRST SUBSCRIBER GROUP</b>	<b>EIGHTY-SECOND SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>EIGHTY-THIRD SUBSCRIBER GROUP</b>	<b>EIGHTY-FOURTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>EIGHTY-FIFTH SUBSCRIBER GROUP</b>	<b>EIGHTY-SIXTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>EIGHTY-SEVENTH SUBSCRIBER GROUP</b>	<b>EIGHTY-EIGHTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
<p><b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b></p>	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p> <p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	EIGHTY-NINTH SUBSCRIBER GROUP	NINETIETH SUBSCRIBER GROUP
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
	NINETY-FIRST SUBSCRIBER GROUP	NINETY-SECOND SUBSCRIBER GROUP
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
	<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market         </p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>NINETY-THIRD SUBSCRIBER GROUP</b>	<b>NINETY-FOURTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>NINETY-FIFTH SUBSCRIBER GROUP</b>	<b>NINETY-SIXTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<h1 style="margin: 0;">9</h1> <p style="margin: 0;"><b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b></p>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>NINETY-SEVENTH SUBSCRIBER GROUP</b>	<b>NINETY-EIGHTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
	<b>NINETY-NINTH SUBSCRIBER GROUP</b>	<b>ONE HUNDREDTH SUBSCRIBER GROUP</b>
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED FIRST SUBSCRIBER GROUP</b>	<b>ONE HUNDRED SECOND SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>ONE HUNDRED THIRD SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FOURTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<h1 style="margin: 0;">9</h1> <p style="margin: 0;"><b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b></p>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED FIFTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED SIXTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
	<b>ONE HUNDRED SEVENTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED EIGHTH SUBSCRIBER GROUP</b>
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>		SYSTEM ID# <b>63486</b>
<h1 style="margin: 0;">9</h1> <p style="margin: 0;">Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</p>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>		
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p>		
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>		
	ONE HUNDRED NINTH SUBSCRIBER GROUP	ONE HUNDRED TENTH SUBSCRIBER GROUP	
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
	ONE HUNDRED ELEVENTH SUBSCRIBER GROUP	ONE HUNDRED TWELVTH SUBSCRIBER GROUP	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>		
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>		SYSTEM ID# <b>63486</b>
<h1 style="margin: 0;">9</h1> <p style="margin: 0;">Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</p>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>		
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>		
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>		
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP	ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP	
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
	ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP	ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>		
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>			

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>ONE HUNDRED NINETEENTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED TWENTIETH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP</b>	<b>ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP</b>	<b>ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"><input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market</p>	
	<b>INSTRUCTIONS:</b>	
	<b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.	
	<b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
	<b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	
<b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	<b>ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width:100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width:100px;" type="text"/>
	<b>ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width:100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width:100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width:100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width:100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width:100px;" type="text"/>
	<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width:100px;" type="text"/>	

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED THIRTIETH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP</b>	<b>ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>		SYSTEM ID# <b>63486</b>
<h1 style="margin: 0;">9</h1> <p style="margin: 0;">Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</p>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>		
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>		
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>		
	ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP	
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
	ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>		
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>			

<p><b>Name</b></p>	<p>LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b></p>		<p><b>SYSTEM ID#</b> <b>63486</b></p>
<p><b>9</b></p> <p><b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b></p>	<p><b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b></p>		
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market                      <input type="checkbox"/> Second 50 major television market         </p>		
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>		
	<p><b>ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP</b></p>	<p><b>ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP</b></p>	
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
	<p><b>ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP</b></p>	<p><b>ONE HUNDRED FORTIETH SUBSCRIBER GROUP</b></p>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>		
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>		<b>SYSTEM ID#</b> <b>63486</b>
<h1 style="margin: 0;">9</h1> <p style="margin: 0;"><b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b></p>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>		
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 150px;"><input type="checkbox"/> Second 50 major television market</span> </p>		
	<p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>		
	ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP	ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP	
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
	ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP	ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>		
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>			

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	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 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:  <input type="checkbox"/> First 50 major television market <input type="checkbox"/> Second 50 major television market	
	<b>INSTRUCTIONS:</b> <b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. <b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. <b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. <b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.	
	<b>ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -  <b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -  <b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
<b>ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP</b>	
Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -  <b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -  <b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>	
<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p> <p><b>INSTRUCTIONS:</b></p> <p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FIFTIETH SUBSCRIBER GROUP</b>
	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -
	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> First Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Second Group . . . . . \$ <input style="width: 100px;" type="text"/>
	<b>ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP</b>
Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/> Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/> Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/> -	
<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Third Group . . . . . \$ <input style="width: 100px;" type="text"/>	<b>SYNDICATED EXCLUSIVITY SURCHARGE</b> Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/>	
<b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		

<b>Name</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM: <b>United Fiber, LLC</b>	<b>SYSTEM ID#</b> <b>63486</b>
<b>9</b>  <b>Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations</b>	<b>BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP</b>	
	<p>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 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:</p> <p style="text-align: center;"> <input type="checkbox"/> First 50 major television market             <span style="margin-left: 200px;"><input type="checkbox"/> Second 50 major television market</span> </p>	
	<b>INSTRUCTIONS:</b>	
	<p><b>Step 1:</b> In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</p> <p><b>Step 2:</b> In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</p> <p><b>Step 3:</b> In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</p> <p><b>Step 4:</b> Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</p>	
	<b>ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP</b>
	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>First Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Second Group . . . . . \$ <input style="width: 100px;" type="text"/></p>
<b>ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP</b>	<b>ONE HUNDRED SIXTIETH SUBSCRIBER GROUP</b>	
<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Third Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	<p>Line 1: Enter the VHF DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 2: Enter the Exempt DSEs . . . . . <input style="width: 100px;" type="text"/></p> <p>Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation . . . . . <input style="width: 100px;" type="text"/></p> <p><b>SYNDICATED EXCLUSIVITY SURCHARGE</b></p> <p>Fourth Group . . . . . \$ <input style="width: 100px;" type="text"/></p>	
<p><b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7) . . . . . \$ <input style="width: 100px;" type="text"/></p>		