

This form is effective beginning with the July 1 to December 30, 2025, accounting period (2025/2).  
If you are filing for a prior accounting period, contact the Licensing Section 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            |
| <b>08/28/2026</b>             | \$                |
|                               | ALLOCATION NUMBER |

Return completed workbook by  
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Office Licensing Section at  
(202) 707-8150.

|                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                       |                              |  |                                                                                  |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--|----------------------------------------------------------------------------------|
| <b>A</b><br>Accounting<br>Period                                       | <b>ACCOUNTING PERIOD COVERED BY THIS STATEMENT:</b><br><b>2026/1</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                       | <b>Licensing<br/>Section</b> |  | Digitally signed by<br>Licensing Section<br>Date: 2026.09.18<br>13:59:52 -04'00' |
| <b>B</b><br>Owner                                                      | <b>Instructions:</b><br>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.<br>List any other name or names under which the owner conducts the business of the cable system.<br><i>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.</i><br><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 Section. <b>034160</b> |                                                                                                                                       |                              |  |                                                                                  |
|                                                                        | <b>LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM</b><br><b>COX COMMUNICATIONS GULF COAST, LLC</b><br><br><b>03416020261</b><br><b>034160 2026/1</b><br><br><b>6205 PEACHTREE DUNWOODY ROAD - 12 FLOOR</b><br><b>ATLANTA, GEORIGIA 30328</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                       |                              |  |                                                                                  |
| <b>C</b><br>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><br>(Number, street, rural route, apartment, or suite number)<br>(City, town, state, zip code) |                              |  |                                                                                  |
| <b>D</b><br>Area<br>Served<br><br>First<br>Community<br><br><br>Sample | <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.<br>CITY OR TOWN STATE<br><b>PENSACOLA FL</b><br>Below is a sample for reporting communities if you report multiple channel line-ups in Space G.<br>CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP#<br>Alda MD A 1<br>Alliance MD B 2<br>Gering MD B 3                                                                                                                                                                                                                                                                                                                      |                                                                                                                                       |                              |  |                                                                                  |

**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.

U.S. Copyright Office

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

**COX COMMUNICATIONS GULF COAST, LLC**

SYSTEM ID#  
034160

Name

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

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

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

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

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

**Column 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 AA

| 1. CALL SIGN | 2. B'CAST NUMBER | 3. TYPE OF STATION | 4. DISTANT?<br>(YES OR NO) | 5. BASIS OF<br>CARRIAGE (if distant) | 6. LOCATION OF STATION |
|--------------|------------------|--------------------|----------------------------|--------------------------------------|------------------------|
| WALA-1       | 10.1             | I                  | No                         |                                      | MOBILE, AL             |
| WALA-2       | 10.2             | I-M                | No                         |                                      | MOBILE, AL             |
| WALA-5       | 10.5             | I-M                | No                         |                                      | MOBILE, AL             |
| WALA-7       | 10.7             | I-M                |                            |                                      | MOBILE, AL             |
| WAWD-1       | 58.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WDPM-1       | 18.1             | I                  | No                         |                                      | MOBILE, AL             |
| WEAR-1       | 3.1              | N                  | No                         |                                      | PENSACOLA, FL          |
| WEAR-2       | 3.2              | N                  | No                         |                                      | PENSACOLA, FL          |
| WFBD-1       | 48.1             | I                  | No                         |                                      | DESTIN, FL             |
| WFGX-1       | 35.1             | I                  |                            |                                      | FT WALTON BEACH, FL    |
| WFGX-2       | 35.2             | I-M                | No                         |                                      | FT WALTON BEACH, FL    |
| WFGX-3       | 35.3             | I-M                | No                         |                                      | FT WALTON BEACH, FL    |
| WFNA-1       | 55.1             | I                  | No                         |                                      | GULF SHORES, AL        |
| WFNA-3       | 55.3             | I-M                | No                         |                                      | GULF SHORES, AL        |
| WFNA-4       | 55.4             | I-M                | No                         |                                      | GULF SHORES, AL        |
| WJTC-1       | 44.1             | I                  | No                         |                                      | PENSACOLA, FL          |
| WJTC-2       | 44.2             | I-M                | No                         |                                      | PENSACOLA, FL          |
| WKRK-1       | 5.1              | N                  | No                         |                                      | MOBILE, AL             |
| WKRK-3       | 5.3              | I-M                | No                         |                                      | MOBILE, AL             |
| WKRK-4       | 5.4              | I-M                | No                         |                                      | MOBILE, AL             |
| WMBP-1       | 31.1             | I                  | No                         |                                      | MOBILE, AL             |
| WMPV-1       | 21.1             | I                  | No                         |                                      | MOBILE, AL             |
| WPAN-1       | 53.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WPMI-1       | 15.1             | I                  | No                         |                                      | MOBILE, AL             |
| WPMI-2       | 15.2             | I-M                | No                         |                                      | MOBILE, AL             |
| WPMI-3       | 15.3             | I-M                | No                         |                                      | MOBILE, AL             |
| WSRE-1       | 23.1             | E                  | No                         |                                      | PENSACOLA, FL          |
| WSRE-2       | 23.2             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-3       | 23.3             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-4       | 23.4             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-5       | 23.5             | E-M                | No                         |                                      | PENSACOLA, FL          |
|              |                  |                    |                            |                                      |                        |

## G

**Primary Transmitters:**  
**Television**

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Name

**PRIMARY TRANSMITTERS: TELEVISION**

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

**Primary  
Transmitters:  
Television**

**CHANNEL LINE-UP AB**

U.S. Copyright Office

**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:

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- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

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

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

**CHANNEL LINE-UP** AC

| 1. CALL SIGN | 2. B'CAST NUMBER | 3. TYPE OF STATION | 4. DISTANT?<br>(YES OR NO) | 5. BASIS OF<br>CARRIAGE (if distant) | 6. LOCATION OF STATION |
|--------------|------------------|--------------------|----------------------------|--------------------------------------|------------------------|
| WALA-1       | 10.1             | I                  | No                         |                                      | MOBILE, AL             |
| WALA-2       | 10.2             | I-M                | No                         |                                      | MOBILE, AL             |
| WALA-5       | 10.5             | I-M                | No                         |                                      | MOBILE, AL             |
| WALA-7       | 10.7             | I-M                | No                         |                                      | MOBILE, AL             |
| WAWD-1       | 58.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WDPM-1       | 18.1             | I                  | No                         |                                      | MOBILE, AL             |
| WEAR-1       | 3.1              | N                  | No                         |                                      | PENSACOLA, FL          |
| WEAR-2       | 3.2              | N                  | No                         |                                      | PENSACOLA, FL          |
| WECP-1       | 21.1             | N                  | No                         |                                      | PANAMA CITY, FL        |
| WFBD-DT1     | 48.1             | I                  | No                         |                                      | DESTIN, FL             |
| WFGX-1       | 35.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WFGX-2       | 35.2             | I-M                | No                         |                                      | FT WALTON BEACH, FL    |
| WFGX-3       | 35.3             | I-M                | No                         |                                      | FT WALTON BEACH, FL    |
| WFNA-1       | 55.1             | I                  | No                         |                                      | GULF SHORES, AL        |
| WFNA-3       | 55.3             | I-M                | No                         |                                      | GULF SHORES, AL        |
| WFNA-4       | 55.4             | I-M                | No                         |                                      | GULF SHORES, AL        |
| WJHG-1       | 7.1              | N                  | No                         |                                      | PANAMA CITY, FL        |
| WJTC-1       | 44.1             | I                  | No                         |                                      | PENSACOLA, FL          |
| WJTC-2       | 44.2             | I-M                | No                         |                                      | PENSACOLA, FL          |
| WKRQ-1       | 5.1              | N                  | No                         |                                      | MOBILE, AL             |
| WKRQ-3       | 5.3              | I-M                | No                         |                                      | MOBILE, AL             |
| WKRQ-4       | 5.4              | I-M                | No                         |                                      | MOBILE, AL             |
| WMBB-1       | 13.1             | N                  | No                         |                                      | PANAMA CITY, FL        |
| WMBP-LD      | 31.1             | I                  | No                         |                                      | MOBILE, AL             |
| WMPV-1       | 21.1             | I                  | No                         |                                      | MOBILE, AL             |
| WPAN-1       | 53.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WPMI-1       | 15.1             | I                  | No                         |                                      | MOBILE, AL             |
| WPMI-2       | 15.2             | I-M                | No                         |                                      | MOBILE, AL             |
| WPMI-3       | 15.3             | I-M                | No                         |                                      | MOBILE, AL             |
| WSRE-1       | 23.1             | E                  | No                         |                                      | PENSACOLA, FL          |
| WSRE-2       | 23.2             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-3       | 23.3             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-4       | 23.4             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-5       | 23.5             | E-M                | No                         |                                      | PENSACOLA, FL          |
|              |                  |                    |                            |                                      |                        |
|              |                  |                    |                            |                                      |                        |
|              |                  |                    |                            |                                      |                        |
|              |                  |                    |                            |                                      |                        |

## G

**Primary Transmitters:**  
**Television**

**COX COMMUNICATIONS GULF COAST, LLC**

**SYSTEM ID#**  
**034160**

Name

**PRIMARY TRANSMITTERS: TELEVISION**

**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 AD

| 1. CALL SIGN | 2. B'CAST NUMBER | 3. TYPE OF STATION | 4. DISTANT?<br>(YES OR NO) | 5. BASIS OF<br>CARRIAGE (if distant) | 6. LOCATION OF STATION |
|--------------|------------------|--------------------|----------------------------|--------------------------------------|------------------------|
| WALA-1       | 10.1             | I                  | No                         |                                      | MOBILE, AL             |
| WALA-2       | 10.2             | I-M                | No                         |                                      | MOBILE, AL             |
| WALA-5       | 10.5             | I-M                | No                         |                                      | MOBILE, AL             |
| WALA-7       | 10.7             | I-M                | No                         |                                      | MOBILE, AL             |
| WAWD-1       | 58.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WDPM-1       | 18.1             | I                  | No                         |                                      | MOBILE, AL             |
| WEAR-1       | 3.1              | N                  | No                         |                                      | PENSACOLA, FL          |
| WEAR-2       | 3.2              | N                  | No                         |                                      | PENSACOLA, FL          |
| WECP-1       | 21.1             | N                  | No                         |                                      | PANAMA CITY, FL        |
| WFBD-DT1     | 48.1             | I                  | No                         |                                      | DESTIN, FL             |
| WFGX-1       | 35.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WFGX-2       | 35.2             | I-M                | No                         |                                      | FT WALTON BEACH, FL    |
| WFGX-3       | 35.3             | I-M                | No                         |                                      | FT WALTON BEACH, FL    |
| WFNA-1       | 55.1             | I                  | No                         |                                      | GULF SHORES, AL        |
| WFNA-3       | 55.3             | I-M                | No                         |                                      | GULF SHORES, AL        |
| WFNA-4       | 55.4             | I-M                | No                         |                                      | GULF SHORES, AL        |
| WJHG-1       | 7.1              | N                  | No                         |                                      | PANAMA CITY, FL        |
| WJTC-1       | 44.1             | I                  | No                         |                                      | PENSACOLA, FL          |
| WJTC-2       | 44.2             | I-M                | No                         |                                      | PENSACOLA, FL          |
| WKRQ-1       | 5.1              | N                  | No                         |                                      | MOBILE, AL             |
| WKRQ-3       | 5.3              | I-M                | No                         |                                      | MOBILE, AL             |
| WKRQ-4       | 5.4              | I-M                | No                         |                                      | MOBILE, AL             |
| WMBP-1 LD    | 31.1             | I                  | No                         |                                      | MOBILE, AL             |
| WMPV-1       | 21.1             | I                  | No                         |                                      | MOBILE, AL             |
| WPAN-1       | 53.1             | I                  | No                         |                                      | FT WALTON BEACH, FL    |
| WPMI-1       | 15.1             | I                  | No                         |                                      | MOBILE, AL             |
| WPMI-2       | 15.2             | I-M                | No                         |                                      | MOBILE, AL             |
| WPMI-3       | 15.3             | I-M                | No                         |                                      | MOBILE, AL             |
| WSRE-1       | 23.1             | E                  | No                         |                                      | PENSACOLA, FL          |
| WSRE-2       | 23.2             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-3       | 23.3             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-4       | 23.4             | E-M                | No                         |                                      | PENSACOLA, FL          |
| WSRE-5       | 23.5             | E-M                | No                         |                                      | PENSACOLA, FL          |
|              |                  |                    |                            |                                      |                        |
|              |                  |                    |                            |                                      |                        |
|              |                  |                    |                            |                                      |                        |
|              |                  |                    |                            |                                      |                        |

FORM SA3E, PAGE 4.

| LEGAL NAME OF OWNER OF CABLE SYSTEM:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |                    |                         |                                   |                        | SYSTEM ID#    | Name                                                    |
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| <b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                    |                         |                                   |                        | <b>034160</b> |                                                         |
| <b>PRIMARY TRANSMITTERS: TELEVISION</b><br><br><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.<br><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:<br>• 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.<br>• 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.<br><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).<br><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.<br><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.<br><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.<br><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.<br>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.<br><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.<br><b>Note:</b> If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. |                  |                    |                         |                                   |                        |               | <b>G</b><br><br><b>Primary Transmitters: Television</b> |
| <b>CHANNEL LINE-UP AE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                    |                         |                                   |                        |               |                                                         |
| 1. CALL SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2. B'CAST NUMBER | 3. TYPE OF STATION | 4. DISTANT? (YES OR NO) | 5. BASIS OF CARRIAGE (if distant) | 6. LOCATION OF STATION |               |                                                         |
| WALA-5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 10.5             | I-M                | Yes                     | 0                                 | MOBILE, AL             |               |                                                         |
| WALA-7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 10.7             | I-M                | Yes                     | 0                                 | MOBILE, AL             |               |                                                         |
| WECP-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21.1             | N                  | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WECP-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21.2             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WECP-4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21.4             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WECP-5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21.5             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WFSG-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 56.1             | E                  | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WFSG-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 56.2             | E-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WFSG-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 56.3             | E-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WFSG-4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 56.4             | E-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WJHG-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 7.1              | N                  | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WJHG-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 7.2              | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WJHG-6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 7.6              | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WMBB-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.1             | N                  | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WMBB-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.2             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WMBB-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.3             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WMBB-4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.4             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WPGX-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 28.1             | I                  | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WPGX-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 28.2             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WPGX-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 28.3             | I-M                | No                      |                                   | PANAMA CITY, FL        |               |                                                         |
| WWEO-LD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 24.1             | I                  | No                      |                                   | DEFUNIAK SPRINGS, FL   |               |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  |                    |                         |                                   |                        |               |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  |                    |                         |                                   |                        |               |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  |                    |                         |                                   |                        |               |                                                         |

FORM SA3E, PAGE 4.

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>SYSTEM ID#</b><br><b>034160</b> | <b>Name</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 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 AF</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                    |                    |                            |                                         |                        |
| 1. CALL SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2. B'CAST NUMBER                   | 3. TYPE OF STATION | 4. DISTANT?<br>(YES OR NO) | 5. BASIS OF<br>CARRIAGE (if distant)    | 6. LOCATION OF STATION |
| WALA-5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 10.5                               | I-M                | Yes                        | 0                                       | MOBILE, AL             |
| WALA-7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 10.7                               | I-M                | Yes                        | 0                                       | MOBILE, AL             |
| WAWD-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 58.1                               | I                  | No                         |                                         | FT WALTON BEACH, FL    |
| WEAR-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 3.1                                | N                  | No                         |                                         | PENSACOLA, FL          |
| WEAR-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 3.2                                | N                  | Yes                        | 0                                       | PENSACOLA, FL          |
| WECP-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21.1                               | N                  | No                         |                                         | PANAMA CITY, FL        |
| WECP-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21.2                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WECP-5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21.5                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WECP-DT5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 21.5                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WJHG-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 7.1                                | N                  | No                         |                                         | PANAMA CITY, FL        |
| WJHG-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 7.2                                | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WJHG-6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 7.6                                | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WJTC-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 44.1                               | I                  | Yes                        | 0                                       | PENSACOLA, FL          |
| WMBB-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.1                               | N                  | No                         |                                         | PANAMA CITY, FL        |
| WMBB-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.2                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WMBB-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.3                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WMBB-4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 13.4                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WMPV-TV-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 21.1                               | I                  | Yes                        | O                                       | Mobile, AL             |
| WPGX-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 28.1                               | I                  | No                         |                                         | PANAMA CITY, FL        |
| WPGX-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 28.2                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WPGX-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 28.3                               | I-M                | No                         |                                         | PANAMA CITY, FL        |
| WPMI-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 15.1                               | I                  | Yes                        |                                         | MOBILE, AL             |
| WPMI-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 15.2                               | I-M                | Yes                        |                                         | MOBILE, AL             |
| WPMI-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 15.3                               | I-M                | Yes                        | 0                                       | MOBILE, AL             |
| WSRE-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 23.1                               | E                  | Yes                        |                                         | PENSACOLA, FL          |
| WSRE-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 23.2                               | E-M                | Yes                        |                                         | PENSACOLA, FL          |
| WSRE-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 23.3                               | E-M                | Yes                        |                                         | PENSACOLA, FL          |
| WSRE-4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 23.4                               | E-M                | Yes                        |                                         | PENSACOLA, FL          |
| WSRE-5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 23.5                               | E-M                | Yes                        | 0                                       | PENSACOLA, FL          |
| WJTC-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 44.2                               | I-M                | Yes                        | 0                                       | PENSACOLA, FL          |

[illegible]

[illegible]

[illegible]

[illegible]



[illegible]

**COX COMMUNICATIONS GULF COAST, LLC**

**PRIMARY TRANSMITTERS: TELEVISION**

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

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

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

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

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

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

**Column 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 AM

[illegible]

# G

**Primary Transmitters:**  
**Television**

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

U.S. Copyright Office



Form SA3E Long Form (F

[illegible]

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                    |                                                                                                                                                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>SYSTEM ID#</b><br><b>034160</b> | <b>Name</b>                                                                                                                                                            |
| <b>GROSS RECEIPTS</b><br><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.<br>Gross receipts from subscribers for secondary transmission service(s) during the accounting period. _____<br><b>IMPORTANT:</b> You must complete a statement in space P concerning gross receipts.                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                    | <b>K</b><br><b>Gross Receipts</b>                                                                                                                                      |
| <b>COPYRIGHT ROYALTY FEE</b><br><b>Instructions:</b> Use the blocks in this space L to determine the royalty fee you owe:<br>• Complete block 1, showing your minimum fee.<br>• Complete block 2, showing whether your system carried any distant television stations.<br>• 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.<br>• 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.<br>▶ If part 8, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.<br>▶ 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. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                    | <b>L</b><br><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.<br>Line 1. Enter the amount of gross receipts from space K. <span style="float: right;">\$ 15,567,257.44</span><br>Line 2. Multiply the amount in line 1 by 0.01064.<br>Enter the result here. _____<br>This is your minimum fee. <span style="float: right;">\$ 165,635.62</span>                                                                                                                                                                                                                                                                                                                                                                                           |                                    |                                                                                                                                                                        |
| 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.<br>• Did your cable system carry any distant television stations during the accounting period?<br><input 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 7, section 3 or 4, or part 8, block A of the DSE schedule. If none, enter zero. <span style="float: right;">\$ 29,652.54</span><br>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;">70,222.30</span><br>Line 3. Add lines 1 and 2 and enter here. <span style="float: right;">\$ 99,874.84</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;">\$ 165,635.62</span><br>Line 2. <b>INTEREST CHARGE:</b> Enter the amount from line 4, space Q, page 9 (Interest Worksheet) ..... <span style="float: right;">0.00</span><br>Line 3. <b>FILING FEE.</b> ..... <span style="float: right;">\$ 725.00</span><br><b>TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.</b><br>Add Lines 1, 2 and 3 of block 4 and enter total here ..... <span style="float: right;">\$ 166,360.62</span><br>EFT Trace # or TRANSACTION ID # <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span><br><a href="#">Remit this amount via electronic payment payable to Register of Copyrights. (See Circular 74 for more information)</a> |                                    | Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing Section for the appropriate form for submitting the additional fees. |

|                                                                    |                                                                                                                                                                                                                                                                                                                                                                   |                                 |                             |
|--------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------|
| <b>Name</b>                                                        | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                 |                                 | SYSTEM ID#<br><b>034160</b> |
| <b>M</b><br><br>Channels                                           | <b>CHANNELS</b><br><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.                                                                                                  |                                 |                             |
|                                                                    | 1. Enter the total number of channels on which the cable system carried television broadcast stations .....                                                                                                                                                                                                                                                       | 34                              |                             |
|                                                                    | 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services .....                                                                                                                                                                                                                   | 383                             |                             |
| <b>N</b><br><br>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 <b>Delicia Nwadike</b>                                                                                                                                                                                                                                                                                                                                       | Telephone <b>(404) 269-7471</b> |                             |
|                                                                    | Address <b>6205 PEACHTREE DUNWOODY ROAD - 21 FLOOR</b><br>(Number, street, rural route, apartment, or suite number)                                                                                                                                                                                                                                               |                                 |                             |
|                                                                    | <b>ATLANTA, GEORGIA 30328</b><br>(City, town, state, zip)                                                                                                                                                                                                                                                                                                         |                                 |                             |
|                                                                    | Email <b>Delicia.Nwadike@cox.com</b>                                                                                                                                                                                                                                                                                                                              | Fax (optional) .....            |                             |
| <b>O</b><br><br>Certification                                      | <b>CERTIFICATION</b> (This statement of account must be certified and signed in accordance with Copyright Office regulations.)                                                                                                                                                                                                                                    |                                 |                             |
|                                                                    | • I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)                                                                                                                                                                                                                                                                        |                                 |                             |
|                                                                    | <input type="checkbox"/> (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or                                                                                                                                                                                                                  |                                 |                             |
|                                                                    | <input type="checkbox"/> (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or                                                                                                                     |                                 |                             |
|                                                                    | <input checked="" type="checkbox"/> (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.                                                                                                                                                     |                                 |                             |
|                                                                    | • 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.<br>[18 U.S.C., Section 1001(1986)]                                                                              |                                 |                             |
|                                                                    | <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; display: flex; align-items: center;"> <div style="font-size: 2em; margin-right: 5px;">X</div> <div style="flex-grow: 1;">/s/ Tim Montz</div> </div> </div>                                                                                                   |                                 |                             |
|                                                                    | 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 "F2" button will avoid enabling Excel's Lotus compatibility settings. |                                 |                             |
|                                                                    | Typed or printed name: <b>Tim Montz</b>                                                                                                                                                                                                                                                                                                                           |                                 |                             |
|                                                                    | Title: <b>SVP, Enterprise Accounting</b><br>(Title of official position held in corporation or partnership)                                                                                                                                                                                                                                                       |                                 |                             |
|                                                                    | Date: <b>August 19, 2026</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:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                             | <b>SYSTEM ID#</b><br><b>034160</b>                                                                                               | <b>Name</b>                                                                                                                                 |                                            |
| <b>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</b><br>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:<br>"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."<br><br>For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.<br><br>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?<br><br><input checked="checked" type="checkbox"/> NO<br><br><input type="checkbox"/> YES. Enter the total here and list the satellite carrier(s) below. . . . . \$ <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                             |                                                                                                                                  | <b>P</b><br><br><b>Special Statement Concerning Gross Receipts Exclusion</b>                                                                |                                            |
| Name <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Mailing Address <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span> | Name <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span> | Mailing Address <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span> |                                            |
| <b>INTEREST ASSESSMENTS</b><br><br>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.<br><br><div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">           Line 1 Enter the amount of late payment or underpayment . . . . .<br/><br/>           Line 2 Multiply line 1 by the interest rate* and enter the sum here . . . . .<br/><br/>           Line 3 Multiply line 2 by the number of days late and enter the sum here . . . . .<br/><br/>           Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L (page 7) . . . . .         </div> <div style="width: 35%; text-align: right;"> <div style="background-color: yellow; height: 1.2em; margin-bottom: 5px;"></div> <div style="display: flex; align-items: center; justify-content: center;">x <span style="background-color: yellow; padding: 0 5px;">1%</span></div> <div style="border-top: 1px solid black; margin: 5px 0;"></div> <div style="display: flex; align-items: center; justify-content: center;">x <span style="background-color: yellow; padding: 0 5px;">200</span> days</div> <div style="border-top: 1px solid black; margin: 5px 0;"></div> <div style="display: flex; align-items: center; justify-content: center;">x 0.00274</div> <div style="border-top: 1px solid black; margin: 5px 0;"></div> <div style="display: flex; align-items: center; justify-content: center;">\$ -</div> <div style="margin-top: 5px;">(interest charge)</div> </div> </div> <div style="margin-top: 10px;"> <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> </div> <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> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">           Owner <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span><br/>           Address <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span><br/><br/>           First community served <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span><br/>           Accounting period <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span><br/>           ID number <span style="background-color: yellow; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span> </div> </div> |                                                                                                                                             |                                                                                                                                  |                                                                                                                                             | <b>Q</b><br><br><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.

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

|             |                                                                                   |  |  |  |  |  |                                    |
|-------------|-----------------------------------------------------------------------------------|--|--|--|--|--|------------------------------------|
| <b>Name</b> | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b> |  |  |  |  |  | <b>SYSTEM ID#</b><br><b>034160</b> |
|-------------|-----------------------------------------------------------------------------------|--|--|--|--|--|------------------------------------|

  

## 3

Computation  
of DSEs for  
Stations  
Carried Part  
Time Due to  
Lack of  
Activated  
Channel  
Capacity

**Instructions: CAPACITY**  
**Column 1:** List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3).  
**Column 2:** For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station.  
**Column 3:** For each station, give the total number of hours that the station broadcast over the air during the accounting period.  
**Column 4:** Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  
**Column 5:** For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  
**Column 6:** Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.

| CATEGORY LAC STATIONS: COMPUTATION OF DSEs |                                      |                                   |                            |               |        |
|--------------------------------------------|--------------------------------------|-----------------------------------|----------------------------|---------------|--------|
| 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             | =      |
|                                            | ÷                                    | =                                 |                            | x             | =      |
|                                            | ÷                                    | =                                 |                            | x             | =      |
|                                            | ÷                                    | =                                 |                            | x             | =      |
|                                            | ÷                                    | =                                 |                            | x             | =      |

**SUM OF DSEs OF CATEGORY LAC STATIONS:**  
Add the DSEs of each station.  
Enter the sum here and in line 2 of part 5 of this schedule, ..... 0.00

  

## 4

Computation  
of DSEs for  
Substitute-  
Basis Stations

**Instructions:**  
**Column 1:** Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station:  
• Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and 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).  
**Column 2:** For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.  
**Column 3:** Enter the number of days in the calendar year: 365, except in a leap year.  
**Column 4:** Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).

| SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs |                       |                           |        |              |                       |                           |        |
|------------------------------------------------|-----------------------|---------------------------|--------|--------------|-----------------------|---------------------------|--------|
| 1. CALL SIGN                                   | 2. NUMBER OF PROGRAMS | 3. NUMBER OF DAYS IN YEAR | 4. DSE | 1. CALL SIGN | 2. NUMBER OF PROGRAMS | 3. NUMBER OF DAYS IN YEAR | 4. DSE |
|                                                | ÷                     | =                         |        |              | ÷                     | =                         |        |
|                                                | ÷                     | =                         |        |              | ÷                     | =                         |        |
|                                                | ÷                     | =                         |        |              | ÷                     | =                         |        |
|                                                | ÷                     | =                         |        |              | ÷                     | =                         |        |
|                                                | ÷                     | =                         |        |              | ÷                     | =                         |        |
|                                                | ÷                     | =                         |        |              | ÷                     | =                         |        |
|                                                | ÷                     | =                         |        |              | ÷                     | =                         |        |

**SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS:**  
Add the DSEs of each station.  
Enter the sum here and in line 3 of part 5 of this schedule, ..... 0.00

  

## 5

Total Number  
of DSEs

**TOTAL NUMBER OF DSEs:** 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 ● | ➤ | 6.00 |
| 2. Number of DSEs from part 3 ● | ➤ | 0.00 |
| 3. Number of DSEs from part 4 ● | ➤ | 0.00 |

TOTAL NUMBER OF DSEs 6.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |        |              |                    |        |                                    |                    |             |  |   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------|--------------|--------------------|--------|------------------------------------|--------------------|-------------|--|---|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |        |              |                    |        | <b>SYSTEM ID#</b><br><b>034160</b> |                    | <b>Name</b> |  |   |
| <b>Instructions:</b> Block A must be completed.<br>In block A:<br>• If your answer is "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule.<br>• If your answer is "No," complete blocks B and C below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |        |              |                    |        |                                    |                    |             |  | 6 |
| <b>BLOCK A: TELEVISION MARKETS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                    |        |              |                    |        |                                    |                    |             |  |   |
| 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?<br><input type="checkbox"/> Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7.<br><input checked="" type="checkbox"/> No—Complete blocks B and C below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                    |        |              |                    |        |                                    |                    |             |  |   |
| <b>BLOCK B: CARRIAGE OF PERMITTED DSEs</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                    |        |              |                    |        |                                    |                    |             |  |   |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Column 1:<br/>CALL SIGN</p> <p>Column 2:<br/>BASIS OF PERMITTED CARRIAGE</p> </div> <div style="width: 50%;"> <p>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.)</p> <p>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.)</p> <p>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)]</p> <p>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))</p> <p>C Noncommercial educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]</p> <p>D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).</p> <p>E Carried pursuant to individual waiver of FCC rules (76.7)</p> <p>*F A station previously carried on a part-time or substitute basis prior to June 25, 1981</p> <p>M Retransmission of a distant multicast stream.</p> </div> </div> <p>Column 3: List the DSE for each distant station listed in parts 2, 3, and 4 of the schedule.<br/>         *(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.)</p> |                    |        |              |                    |        |                                    |                    |             |  |   |
| 1. CALL SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN | 2. PERMITTED BASIS | 3. DSE | 1. CALL SIGN                       | 2. PERMITTED BASIS | 3. DSE      |  |   |
| WPMI-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | M                  | 1.00   | WMPV-TV      | B                  | 1.00   |                                    |                    |             |  |   |
| WPMI-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | M                  | 1.00   |              |                    |        |                                    |                    |             |  |   |
| WSRE-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | C                  | 0.25   |              |                    |        |                                    |                    |             |  |   |
| WSRE-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | M                  | 0.25   |              |                    |        |                                    |                    |             |  |   |
| WSRE-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | M                  | 0.25   |              |                    |        |                                    |                    |             |  |   |
| WSRE-4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | M                  | 0.25   |              |                    |        |                                    |                    |             |  |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |        |              |                    |        |                                    |                    | <b>4.00</b> |  |   |
| <b>BLOCK C: COMPUTATION OF 3.75 FEE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    |        |              |                    |        |                                    |                    |             |  |   |
| 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.<br>(If zero, leave lines 4–7 blank and proceed to part 7 of this schedule) ..... <b>0.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |        |              |                    |        |                                    |                    |             |  |   |
| Line 4: Enter gross receipts from space K (page 7) .....<br><div style="text-align: right; margin-right: 50px;">x 0.0375</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                    |        |              |                    |        |                                    |                    |             |  |   |
| Line 5: Multiply line 4 by 0.0375 and enter sum here .....<br><div style="text-align: right; margin-right: 50px;">x</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                    |        |              |                    |        |                                    |                    |             |  |   |
| Line 6: Enter total number of DSEs from line 3 .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |        |              |                    |        |                                    |                    |             |  |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |        |              |                    |        |                                    |                    | <b>0.00</b> |  |   |
| Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |        |              |                    |        |                                    |                    |             |  |   |

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

[illegible]

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

|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Name                                                 | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | SYSTEM ID#<br><b>034160</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| <div>7</div> <div>Computation of Base Rate Fee</div> | <b>Instructions:</b><br>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.<br>• In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.<br>• If your answer is "No," compute your system's base rate fee in block B. Leave part 8 blank.<br>• If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 8. Leave block B below blank.<br><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. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|                                                      | <b>BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|                                                      | • Did your cable system retransmit the signals of any partially distant television stations during the accounting period?<br><input checked="" type="checkbox"/> Yes—Complete part 8 of this schedule. <input type="checkbox"/> No—Complete the following sections.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|                                                      | <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.<br>(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.<br/>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<br/>(the amount in section 1). . . . . ▶ \$</p> <p>B. Enter 0.00701 of gross receipts<br/>(the amount in section 1). . . . . ▶</p> <p>C. Subtract 1.000 from total DSEs<br/>(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<br/>and in block 3, line 1, space L (page 7)</p> <p><b>Base Rate Fee.</b> . . . . . ▶ <div>\$0.00</div></p> |  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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ID#<br><b>034160</b> | Name                                                                                                     |
| <b>Section 4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <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)</p> <p><b>Base Rate Fee</b> ..... ▶ \$ <span style="border: 1px solid black; padding: 2px 10px;"><b>0.00</b></span></p> | <b>7</b>                    | <b>Computation of Base Rate Fee</b>                                                                      |
| <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><b>NOTE:</b> 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> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>8</b>                    | <b>Computation of Base Rate Fee for Partially Distant Stations, and for Partially Permitted Stations</b> |

|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------|-----|-----------------------------|------------------------------------------------------|-----------------------------|-----|-------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |             |                        |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                      |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| FIRST SUBSCRIBER GROUP                                                                                                                                            |             |                        |     |                             | SECOND SUBSCRIBER GROUP                              |                             |     |                                                                                           |  |
| COMMUNITY/ AREA <b>Channel Line-up A Sub-group 1</b>                                                                                                              |             |                        |     |                             | COMMUNITY/ AREA <b>Channel Line-up B Sub-group 2</b> |                             |     |                                                                                           |  |
| CALL SIGN                                                                                                                                                         | DSE         | CALL SIGN              | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| Total DSEs                                                                                                                                                        |             | <b>0.00</b>            |     | Total DSEs                  |                                                      | <b>0.00</b>                 |     |                                                                                           |  |
| Gross Receipts First Group                                                                                                                                        |             | \$ <b>7,484,430.60</b> |     | Gross Receipts Second Group |                                                      | \$ <b>1,367,395.82</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>Channel Line-up C Sub-group 3</b>                                                                                                              |             |                        |     |                             | COMMUNITY/ AREA <b>Channel Line-up C Sub-group 4</b> |                             |     |                                                                                           |  |
| CALL SIGN                                                                                                                                                         | DSE         | CALL SIGN              | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                           |  |
| <b>WPMI-2</b>                                                                                                                                                     | <b>1.00</b> |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| <b>WPMI-3</b>                                                                                                                                                     | <b>1.00</b> |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| <b>WSRE-1</b>                                                                                                                                                     | <b>0.25</b> |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| <b>WSRE-2</b>                                                                                                                                                     | <b>0.25</b> |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| <b>WSRE-3</b>                                                                                                                                                     | <b>0.25</b> |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| <b>WSRE-4</b>                                                                                                                                                     | <b>0.25</b> |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| <b>WMPV-TV-1</b>                                                                                                                                                  | <b>1.00</b> |                        |     |                             |                                                      |                             |     |                                                                                           |  |
|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |             |                        |     |                             |                                                      |                             |     |                                                                                           |  |
| Total DSEs                                                                                                                                                        |             | <b>4.00</b>            |     | Total DSEs                  |                                                      | <b>0.00</b>                 |     |                                                                                           |  |
| Gross Receipts Third Group                                                                                                                                        |             | \$ <b>936,297.36</b>   |     | Gross Receipts Fourth Group |                                                      | \$ <b>2,509,879.49</b>      |     |                                                                                           |  |
| Base Rate Fee Third Group                                                                                                                                         |             | \$ <b>29,652.54</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.<br>Enter here and in block 3, line 1, space L (page 7) |             |                        |     |                             |                                                      |                             |     | \$ <b>29,652.54</b>                                                                       |  |

|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                                      |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                      |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                 |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                      |     |                             |                                                      |                             |     |                                                                                                      |  |
| FIFTH SUBSCRIBER GROUP                                                                                                                                            |     |                      |     |                             | SIXTH SUBSCRIBER GROUP                               |                             |     |                                                                                                      |  |
| COMMUNITY/ AREA <b>Channel Line-up D Sub-group 5</b>                                                                                                              |     |                      |     |                             | COMMUNITY/ AREA <b>Channel Line-up D Sub-group 6</b> |                             |     |                                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN            | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations            |  |
|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                                      |  |
|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                                      |  |
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|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                                      |  |
| Total DSEs                                                                                                                                                        |     | <b>0.00</b>          |     | Total DSEs                  |                                                      | <b>0.00</b>                 |     |                                                                                                      |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ <b>82,441.50</b>  |     | Gross Receipts Second Group |                                                      | \$ <b>2,819,523.41</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>Channel Line-up E Sub-group 7</b>                                                                                                              |     |                      |     |                             | COMMUNITY/ AREA <b>None</b>                          |                             |     |                                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN            | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                      |  |
|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                                      |  |
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|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                                      |  |
| Total DSEs                                                                                                                                                        |     | <b>0.00</b>          |     | Total DSEs                  |                                                      | <b>0.00</b>                 |     |                                                                                                      |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ <b>346,782.71</b> |     | Gross Receipts Fourth Group |                                                      | \$ <b>20,506.55</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.<br>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;"></span> |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                |     |                             |                                                      |                             |     |      |  |
| NINTH SUBSCRIBER GROUP                                                                                                                                            |     |                |     |                             | TENTH SUBSCRIBER GROUP                               |                             |     |      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |      |  |
| ELEVENTH SUBSCRIBER GROUP                                                                                                                                         |     |                |     |                             | TWELVTH SUBSCRIBER GROUP                             |                             |     |      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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; vertical-align: middle;"></span>                                      |     |                |     |                             |                                                      |                             |     |      |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-----------------------------|------------------------------------------------------|------------------------------------|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                                                                |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                     |  |
| THIRTEENTH SUBSCRIBER GROUP                                                                                                                                       |     |           |     |                             | FOURTEENTH SUBSCRIBER GROUP                          |                                    |     |                                                                                                                                                                                                     |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                     |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 5px;">8</div> Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations                                           |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                     |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                     |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                     |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                     |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                     |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                     |  |
| FIFTEENTH SUBSCRIBER GROUP                                                                                                                                        |     |           |     |                             | SIXTEENTH SUBSCRIBER GROUP                           |                                    |     |                                                                                                                                                                                                     |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                     |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                     |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                     |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                     |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                     |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                     |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                     |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; height: 20px; width: 100%; background-color: yellow;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; background-color: yellow;"></div> |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                       |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                            |  |
| SEVENTEENTH SUBSCRIBER GROUP                                                                                                                                      |     |           |     |                             | EIGHTEENTH SUBSCRIBER GROUP                          |                                    |     |                                                                                                                                                            |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                            |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                            |  |
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| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                            |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                            |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                            |  |
| NINETEENTH SUBSCRIBER GROUP                                                                                                                                       |     |           |     |                             | TWENTIETH SUBSCRIBER GROUP                           |                                    |     |                                                                                                                                                            |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                            |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                            |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                            |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                            |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                            |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                            |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 100%; height: 20px;"></div>                                                          |  |

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                    |  |
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| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |                                                                                                    |  |
| TWENTY-THIRD SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | TWENTY-FOURTH SUBSCRIBER GROUP                       |                             |     |                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                    |  |
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| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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> |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                    |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
| 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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                    |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
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| 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.<br>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> |  |

**8**

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                |     |                             |                                                      |                             |     |      |  |
| TWENTY-NINTH SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | THIRTIETH SUBSCRIBER GROUP                           |                             |     |      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |      |  |
| THIRTY-FIRST SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | THIRTY-SECOND SUBSCRIBER GROUP                       |                             |     |      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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;"></span>                                                              |     |                |     |                             |                                                      |                             |     |      |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----|-----------------------------|------------------------------------------------------|-----------------------------|-----|-----------|-----|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |           |     |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | CALL SIGN | DSE |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |           |     |
| THIRTY-FIFTH SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | THIRTY-SIXTH SUBSCRIBER GROUP                        |                             |     |           |     |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |           |     |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | CALL SIGN | DSE |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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; vertical-align: middle;"></span>                                      |     |                |     |                             |                                                      |                             |     |           |     |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----|-----------------------------|------------------------------------------------------|-----------------------------|-----|-------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                     |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                     |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                     |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                     |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                     |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |                                                                                     |  |
| THIRTY-NINTH SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | FORTIETH SUBSCRIBER GROUP                            |                             |     |                                                                                     |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                     |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                     |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                     |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                     |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                                      |                             |     | <div style="border: 1px solid black; padding: 2px; display: inline-block;">\$</div> |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |           |     |                               |                             |                             |     |                                                                                                                                                                |             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-------------------------------|-----------------------------|-----------------------------|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                               |                             | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                                                                           |             |
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP                                                                                                  |     |           |     |                               |                             |                             |     | <div style="text-align: center; font-size: 2em;"><b>8</b></div> <div>Computation<br/>of<br/>Base Rate Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</div> |             |
| 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 |                                                                                                                                                                |             |
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|                                                                                                                                                                   |     |           |     |                               |                             |                             |     |                                                                                                                                                                |             |
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|                                                                                                                                                                   |     |           |     |                               |                             |                             |     |                                                                                                                                                                |             |
| 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 |                                                                                                                                                                |             |
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|                                                                                                                                                                   |     |           |     |                               |                             |                             |     |                                                                                                                                                                |             |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                               |                             |                             |     |                                                                                                                                                                |             |

[illegible]

|                                                                                                                                                                   |     |           |     |                                   |                             |                             |     |                                                                                                                                                                |             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-----------------------------------|-----------------------------|-----------------------------|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                   |                             | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                                                                           |             |
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP                                                                                                  |     |           |     |                                   |                             |                             |     |                                                                                                                                                                |             |
| FORTY-NINTH SUBSCRIBER GROUP                                                                                                                                      |     |           |     | FIFTIETH SUBSCRIBER GROUP         |                             |                             |     |                                                                                                                                                                |             |
| COMMUNITY/ AREA<br>..... <b>0</b>                                                                                                                                 |     |           |     | COMMUNITY/ AREA<br>..... <b>0</b> |                             |                             |     |                                                                                                                                                                |             |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                         | DSE                         | CALL SIGN                   | DSE | <div style="text-align: center; font-size: 2em;"><b>8</b></div> <div>Computation<br/>of<br/>Base Rate Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</div> |             |
|                                                                                                                                                                   |     |           |     |                                   |                             |                             |     |                                                                                                                                                                |             |
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| 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-FIRST SUBSCRIBER GROUP                                                                                                                                      |     |           |     | FIFTY-SECOND SUBSCRIBER GROUP     |                             |                             |     |                                                                                                                                                                |             |
| COMMUNITY/ AREA<br>..... <b>0</b>                                                                                                                                 |     |           |     | COMMUNITY/ AREA<br>..... <b>0</b> |                             |                             |     |                                                                                                                                                                |             |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                         | DSE                         | CALL SIGN                   | DSE |                                                                                                                                                                |             |
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| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                                   |                             |                             |     |                                                                                                                                                                |             |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                  |     | <b>SYSTEM ID#<br/>034160</b> |     | <b>Name</b>                                                                                                                                                                     |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                                                  |     |                              |     | <div style="text-align: center; font-size: 2em; margin-bottom: 10px;"><b>8</b></div> <b>Computation<br/>of<br/>Base Rate Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</b> |
| <b>SIXTY-FIRST SUBSCRIBER GROUP</b>                                                                                                                               |     |           |     | <b>SIXTY-SECOND 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 |                                                                                                                                                                                 |
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| 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>  |     |                              |     |                                                                                                                                                                                 |
| <b>SIXTY-THIRD SUBSCRIBER GROUP</b>                                                                                                                               |     |           |     | <b>SIXTY-FOURTH 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 |                                                                                                                                                                                 |
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| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                                                  |     |                              |     |                                                                                                                                                                                 |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                          |     |           |     |                                         |             | SYSTEM ID#<br><b>034160</b>       |     | Name<br> |             |  |             |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                    |     |           |     |                                         |             |                                   |     |          |             |  |             |
| <b>SEVENTY-SEVENTH SUBSCRIBER GROUP</b>                                                                                                                    |     |           |     | <b>SEVENTY-EIGHTTH 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 |          |             |  |             |
|                                                                                                                                                            |     |           |     |                                         |             |                                   |     |          |             |  |             |
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|                                                                                                                                                            |     |           |     |                                         |             |                                   |     |          |             |  |             |
| 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                                                                                                                           | \$  |           |     |                                         | <b>0.00</b> | <b>Base Rate Fee</b> Second Group | \$  |          |             |  | <b>0.00</b> |
| <b>SEVENTY-NINTH SUBSCRIBER GROUP</b>                                                                                                                      |     |           |     | <b>EIGHTIETH 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 |          |             |  |             |
|                                                                                                                                                            |     |           |     |                                         |             |                                   |     |          |             |  |             |
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| 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                                                                                                                           | \$  |           |     |                                         | <b>0.00</b> | <b>Base Rate Fee</b> 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                                         |             |                                   |     |          |             |  |             |
| \$                                                                                                                                                         |     |           |     |                                         |             |                                   |     |          |             |  |             |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                |     |                             |                                                      |                             |     |      |  |
| EIGHTY-FIFTH SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | EIGHTY-SIXTH SUBSCRIBER GROUP                        |                             |     |      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
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| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |      |  |
| EIGHTY-SEVENTH SUBSCRIBER GROUP                                                                                                                                   |     |                |     |                             | EIGHTY-EIGHTH SUBSCRIBER GROUP                       |                             |     |      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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;"></span>                                                              |     |                |     |                             |                                                      |                             |     |      |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----|-----------------------------|------------------------------------------------------|-----------------------------|-----|----------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                               |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
| EIGHTY-NINTH SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | NINTIETH SUBSCRIBER GROUP                            |                             |     |                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                    |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |                                                                                                    |  |
| NINETY-FIRST SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | NINETY-SECOND SUBSCRIBER GROUP                       |                             |     |                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                    |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                                    |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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> |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-----------|------------------------------------------------------|-----------------------------|-----|-----------|-----|---------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |           |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name      |     |         |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |           |                                                      |                             |     |           |     |         |  |
| NINETY-THIRD SUBSCRIBER GROUP                                                                                                                                     |     |           |     |           | NINETY-FOURTH SUBSCRIBER GROUP                       |                             |     |           |     |         |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |           | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |           |     |         |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN | DSE                                                  | CALL SIGN                   | DSE | CALL SIGN | DSE |         |  |
|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
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|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
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|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
| Total DSEs                                                                                                                                                        |     |           |     | 0.00      |                                                      | Total DSEs                  |     |           |     | 0.00    |  |
| Gross Receipts First Group                                                                                                                                        |     |           |     | \$ 0.00   |                                                      | Gross Receipts Second Group |     |           |     | \$ 0.00 |  |
| Base Rate Fee First Group                                                                                                                                         |     |           |     | \$ 0.00   |                                                      | Base Rate Fee Second Group  |     |           |     | \$ 0.00 |  |
| NINETY-FIFTH SUBSCRIBER GROUP                                                                                                                                     |     |           |     |           | NINETY-SIXTH SUBSCRIBER GROUP                        |                             |     |           |     |         |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |           | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |           |     |         |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN | DSE                                                  | CALL SIGN                   | DSE | CALL SIGN | DSE |         |  |
|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
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|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
|                                                                                                                                                                   |     |           |     |           |                                                      |                             |     |           |     |         |  |
| Total DSEs                                                                                                                                                        |     |           |     | 0.00      |                                                      | Total DSEs                  |     |           |     | 0.00    |  |
| Gross Receipts Third Group                                                                                                                                        |     |           |     | \$ 0.00   |                                                      | Gross Receipts Fourth Group |     |           |     | \$ 0.00 |  |
| Base Rate Fee Third Group                                                                                                                                         |     |           |     | \$ 0.00   |                                                      | Base Rate Fee Fourth Group  |     |           |     | \$ 0.00 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |           |                                                      |                             |     |           |     |         |  |
| \$                                                                                                                                                                |     |           |     |           |                                                      |                             |     |           |     |         |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----|-----------------------------|------------------------------------------------------|-----------------------------|-----|-------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                      |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
| NINETY-SEVENTH SUBSCRIBER GROUP                                                                                                                                   |     |                |     |                             | NINETY-EIGHTH SUBSCRIBER GROUP                       |                             |     |                                                                                           |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                           |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |                                                                                           |  |
| NINETY-NINTH SUBSCRIBER GROUP                                                                                                                                     |     |                |     |                             | ONE HUNDREDTH SUBSCRIBER GROUP                       |                             |     |                                                                                           |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                           |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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;"></span>                                                              |     |                |     |                             |                                                      |                             |     |                                                                                           |  |

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----|-----------------------------|------------------------------------------------------|-----------------------------|-----|------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |      |  |
| ONE HUNDRED THIRD SUBSCRIBER GROUP                                                                                                                                |     |                |     |                             | ONE HUNDRED FOURTH SUBSCRIBER GROUP                  |                             |     |      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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; vertical-align: middle;"></span>                                      |     |                |     |                             |                                                      |                             |     |      |  |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-------------------------------------|-------------|-----------------------------|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--|-------------|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                     |             | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                                                                           |             |  |             |
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP                                                                                                  |     |           |     |                                     |             |                             |     | <div style="text-align: center; font-size: 2em;"><b>8</b></div> <div>Computation<br/>of<br/>Base Rate Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</div> |             |  |             |
| 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 |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
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|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
| Total DSEs                                                                                                                                                        |     |           |     | <b>0.00</b>                         | Total DSEs  |                             |     |                                                                                                                                                                | <b>0.00</b> |  |             |
| Gross Receipts First Group                                                                                                                                        | \$  |           |     |                                     | <b>0.00</b> | Gross Receipts Second Group | \$  |                                                                                                                                                                |             |  |             |
| 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 |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
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|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
|                                                                                                                                                                   |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                                     |             |                             |     |                                                                                                                                                                |             |  |             |

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |           |     |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | CALL SIGN | DSE |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |           |     |
| ONE HUNDRED ELEVENTH SUBSCRIBER GROUP                                                                                                                             |     |                |     |                             | ONE HUNDRED TWELVTH SUBSCRIBER GROUP                 |                             |     |           |     |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |           |     |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | CALL SIGN | DSE |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |           |     |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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; vertical-align: middle;"></span>                                      |     |                |     |                             |                                                      |                             |     |           |     |

8

Computation  
of  
Base Rate Fee  
for  
Partially  
Distant  
Stations

|                                                                                                                                                                   |     |                |     |                             |                                         |                             |     |                                                                                           |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----|-----------------------------|-----------------------------------------|-----------------------------|-----|-------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                         | SYSTEM ID#<br><b>034160</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 | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                         |                             |     |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                         |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                         |                             |     |                                                                                           |  |
| 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 |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                         |                             |     |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                         |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                         |                             |     |                                                                                           |  |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                         |                             |     |                                                                                           |  |
| \$                                                                                                                                                                |     |                |     |                             |                                         |                             |     |                                                                                           |  |

[illegible]

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold;">8</div> <div>Computation<br/>of<br/>Base Rate Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</div>                                          |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP                                                                                                                         |     |           |     |                             | ONE HUNDRED TWENTY-FOURTH SUBSCRIBER GROUP           |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
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| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                            | SYSTEM ID#<br><b>034160</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>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
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| 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 |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
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| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                            |                             |     |                                                                                           |  |
| \$                                                                                                                                                                |     |                |     |                             |                                            |                             |     |                                                                                           |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                   |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                        |  |
| ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP                                                                                                                         |     |           |     |                             | ONE HUNDRED THIRTIETH SUBSCRIBER GROUP               |                                    |     |                                                                                                                                                        |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                        |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold;">8</div> <div>Computation<br/>of<br/>Base Rate Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</div> |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                        |  |
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| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                        |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                        |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                        |  |
| ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP                                                                                                                         |     |           |     |                             | ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP           |                                    |     |                                                                                                                                                        |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                        |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                        |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                        |  |
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| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                        |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                        |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                        |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: #ffffcc; width: 100%; height: 20px;"></div>                                                     |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                            | SYSTEM ID#<br><b>034160</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 | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
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| 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 |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                            |                             |     |                                                                                           |  |
| \$                                                                                                                                                                |     |                |     |                             |                                            |                             |     |                                                                                           |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                            | SYSTEM ID#<br><b>034160</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>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
| 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 |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                            |                             |     |                                                                                           |  |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                            |                             |     |                                                                                           |  |
| \$                                                                                                                                                                |     |                |     |                             |                                            |                             |     |                                                                                           |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                             | SYSTEM ID#<br><b>034160</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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                                                                |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations                                      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                                                                |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                                                                |  |
| 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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                                                                |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                   | DSE |                                                                                                                                |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                                                                |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                                                                |  |
| 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.<br>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> |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                           |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |                                                                                           |  |
| ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP                                                                                                                        |     |                |     |                             | ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP            |                             |     |                                                                                           |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                           |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                           |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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; vertical-align: middle;"></span>                                      |     |                |     |                             |                                                      |                             |     |                                                                                           |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                           | SYSTEM ID#<br><b>034160</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 | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations                                    |  |
|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                                                              |  |
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|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                                                              |  |
| 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 |                                                                                                                              |  |
|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                                                              |  |
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|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                                                              |  |
| 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.<br>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; vertical-align: middle;"></span> |  |

|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                           |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                           | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                      |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                |     |                             |                                           |                             |     |                                                                                           |  |
| 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 | <b>8</b><br>Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                           |  |
| 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 |                                                                                           |  |
|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                           |  |
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|                                                                                                                                                                   |     |                |     |                             |                                           |                             |     |                                                                                           |  |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                           |                             |     |                                                                                           |  |
| \$                                                                                                                                                                |     |                |     |                             |                                           |                             |     |                                                                                           |  |

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                                                            |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP                                                                                                                        |     |           |     |                             | ONE HUNDRED FIFTY-EIGHTTH SUBSCRIBER GROUP           |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>Base Rate Fee<br>for<br>Partially<br>Distant<br>Stations                                      |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP                                                                                                                          |     |           |     |                             | ONE HUNDRED SIXTIETH SUBSCRIBER GROUP                |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |



**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------|-----|-----------------------------|------------------------------------------------------|-----------------------------|-----|--------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                      |     |                             |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                 |  |
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP                                                                                                  |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
| FIFTH SUBSCRIBER GROUP                                                                                                                                            |     |                      |     |                             | SIXTH SUBSCRIBER GROUP                               |                             |     |                                                                                      |  |
| COMMUNITY/ AREA <b>Channel Line-up D Sub-group 5</b>                                                                                                              |     |                      |     |                             | COMMUNITY/ AREA <b>Channel Line-up D Sub-group 6</b> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN            | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
| Total DSEs                                                                                                                                                        |     | <b>0.00</b>          |     | Total DSEs                  |                                                      | <b>0.00</b>                 |     |                                                                                      |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ <b>82,441.50</b>  |     | Gross Receipts Second Group |                                                      | \$ <b>2,819,523.41</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>Channel Line-up E Sub-group 7</b>                                                                                                              |     |                      |     |                             | COMMUNITY/ AREA <b>None</b>                          |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN            | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                      |  |
|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                      |     |                             |                                                      |                             |     |                                                                                      |  |
| Total DSEs                                                                                                                                                        |     | <b>0.00</b>          |     | Total DSEs                  |                                                      | <b>0.00</b>                 |     |                                                                                      |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ <b>346,782.71</b> |     | Gross Receipts Fourth Group |                                                      | \$ <b>20,506.55</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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                      |     |                             |                                                      |                             |     | \$                                                                                   |  |

### Nonpermitted 3.75 Stations

|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------------|-------------|-----------------------------------|-----|-----------------------------|-------------|------|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                          |     |             |             |                                   |     | SYSTEM ID#<br><b>034160</b> |             | Name |
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP                                                                                           |     |             |             |                                   |     |                             |             |      |
| NINTH SUBSCRIBER GROUP                                                                                                                                     |     |             |             | TENTH SUBSCRIBER GROUP            |     |                             |             |      |
| COMMUNITY/ AREA<br>..... <b>0</b>                                                                                                                          |     |             |             | COMMUNITY/ AREA<br>..... <b>0</b> |     |                             |             |      |
|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
| CALL SIGN                                                                                                                                                  | DSE | CALL SIGN   | DSE         | CALL SIGN                         | DSE | CALL SIGN                   | DSE         |      |
|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
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| 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>                 |             |      |
|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
| ELEVENTH SUBSCRIBER GROUP                                                                                                                                  |     |             |             | TWELVTH SUBSCRIBER GROUP          |     |                             |             |      |
| COMMUNITY/ AREA<br>..... <b>0</b>                                                                                                                          |     |             |             | COMMUNITY/ AREA<br>..... <b>0</b> |     |                             |             |      |
|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
| CALL SIGN                                                                                                                                                  | DSE | CALL SIGN   | DSE         | CALL SIGN                         | DSE | CALL SIGN                   | DSE         |      |
|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
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|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
|                                                                                                                                                            |     |             |             |                                   |     |                             |             |      |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |             |             |                                   |     |                             | \$          |      |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|------------------------------------------------------------------------|------------------------------------------------------|-----------------------------|-----|--------------------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                               |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| THIRTEENTH SUBSCRIBER GROUP                                                                                                                                       |     |           |     |                                                                        | FOURTEENTH SUBSCRIBER GROUP                          |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                               |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                                                    |  |
| FIFTEENTH SUBSCRIBER GROUP                                                                                                                                        |     |           |     |                                                                        | SIXTEENTH SUBSCRIBER GROUP                           |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>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; margin: 0 auto;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-----------------------------|------------------------------------------------------|------------------------------------|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                  |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| SEVENTEENTH SUBSCRIBER GROUP                                                                                                                                      |     |           |     |                             | EIGHTEENTH SUBSCRIBER GROUP                          |                                    |     |                                                                                                                                                       |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| NINETEENTH SUBSCRIBER GROUP                                                                                                                                       |     |           |     |                             | TWENTIETH SUBSCRIBER GROUP                           |                                    |     |                                                                                                                                                       |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 100%; height: 20px;"></div>                                                     |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| TWENTY-THIRD SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                             | TWENTY-FOURTH SUBSCRIBER GROUP                       |                                    |     |                                                                                                                                                       |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 100%; height: 20px;"></div>                                                     |  |

## Nonpermitted 3.75 Stations

|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                       |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                        |     |                                                                                                                                                       |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                     |     |                                                                                                                                                       |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                     |     |                                                                                                                                                       |  |
| TWENTY-SEVENTH SUBSCRIBER GROUP                                                                                                                                   |     |           |     |                             | TWENTY-EIGHTH SUBSCRIBER GROUP                       |                             |     |                                                                                                                                                       |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                        |     |                                                                                                                                                       |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                     |     |                                                                                                                                                       |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                     |     |                                                                                                                                                       |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                             |     | <div style="border: 1px solid black; background-color: yellow; width: 100%; height: 20px;"></div>                                                     |  |





**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                           |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| THIRTY-NINTH SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                             | FORTIETH SUBSCRIBER GROUP                            |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

## Nonpermitted 3.75 Stations

|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                                                                 |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                           |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                        |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                     |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                     |     |                                                                                                                                                                                                 |  |
| FORTY-THIRD SUBSCRIBER GROUP                                                                                                                                      |     |           |     |                             | FORTY-FOURTH SUBSCRIBER GROUP                        |                             |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                             |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                        |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                     |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                     |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                             |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                               |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| FORTY-FIFTH SUBSCRIBER GROUP                                                                                                                                      |     |           |     |                                                                        | FORTY-SIXTH SUBSCRIBER GROUP                         |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                               |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                                                    |  |
| FORTY-SEVENTH SUBSCRIBER GROUP                                                                                                                                    |     |           |     |                                                                        | FORTY-EIGHTH SUBSCRIBER GROUP                        |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>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; margin: 0 auto;"></div> |  |



## Nonpermitted 3.75 Stations

|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                      |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Second Group  |                                                      | \$ <u>0.00</u>              |     |                                                                                      |  |
| FIFTY-FIFTH SUBSCRIBER GROUP                                                                                                                                      |     |                |     |                             | FIFTY-SIXTH SUBSCRIBER GROUP                         |                             |     |                                                                                      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                   | DSE |                                                                                      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                             |     |                                                                                      |  |
| 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                                                                                                                                         |     | \$ <u>0.00</u> |     | Base Rate Fee Fourth Group  |                                                      | \$ <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.<br>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; vertical-align: middle;"></span>                                      |     |                |     |                             |                                                      |                             |     |                                                                                      |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                           |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| FIFTY-NINTH SUBSCRIBER GROUP                                                                                                                                      |     |           |     |                             | SIXTIETH SUBSCRIBER GROUP                            |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                               |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                                                    |  |
| SIXTY-THIRD SUBSCRIBER GROUP                                                                                                                                      |     |           |     |                                                                        | SIXTY-FOURTH SUBSCRIBER GROUP                        |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>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; margin: 0 auto;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |                |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| 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 <span style="float: right;">0</span>                                                                                                              |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |                |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| 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.<br>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; margin: 0 auto;"></div>                                    |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-----------------------------|------------------------------------------------------|------------------------------------|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                  |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| SIXTY-NINTH SUBSCRIBER GROUP                                                                                                                                      |     |           |     |                             | SEVENTIETH SUBSCRIBER GROUP                          |                                    |     |                                                                                                                                                       |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| SEVENTY-FIRST SUBSCRIBER GROUP                                                                                                                                    |     |           |     |                             | SEVENTY-SECOND SUBSCRIBER GROUP                      |                                    |     |                                                                                                                                                       |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 100%; height: 20px;"></div>                                                     |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                           |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| SEVENTY-FIFTH SUBSCRIBER GROUP                                                                                                                                    |     |           |     |                             | SEVENTY-SIXTH SUBSCRIBER GROUP                       |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| SEVENTY-NINTH SUBSCRIBER GROUP                                                                                                                                    |     |           |     |                             | EIGHTIETH SUBSCRIBER GROUP                           |                                    |     |                                                                                                                                                       |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                       |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                       |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                       |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 100%; height: 20px;"></div>                                                     |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                 |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |
| EIGHTY-FIRST SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                                                                        | EIGHTY-SECOND SUBSCRIBER GROUP                       |                             |     |                                                                                      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                      |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                      |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                      |  |
| EIGHTY-THIRD SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                                                                        | EIGHTY-FOURTH SUBSCRIBER GROUP                       |                             |     |                                                                                      |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                      |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                      |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                      |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |
| \$                                                                                                                                                                |     |           |     |                                                                        |                                                      |                             |     |                                                                                      |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                                                            |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| EIGHTY-FIFTH SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                             | EIGHTY-SIXTH SUBSCRIBER GROUP                        |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                           |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| EIGHTY-SEVENTH SUBSCRIBER GROUP                                                                                                                                   |     |           |     |                             | EIGHTY-EIGHTH SUBSCRIBER GROUP                       |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                    |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                               |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                                                                        |                                                      |                             |     |                                                                                                    |  |
| EIGHTY-NINTH SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                                                                        | NINTIETH SUBSCRIBER GROUP                            |                             |     |                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations               |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                    |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                    |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                                    |  |
| NINETY-FIRST SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                                                                        | NINETY-SECOND SUBSCRIBER GROUP                       |                             |     |                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                    |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                    |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>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**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                                                            |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| NINETY-THIRD SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                             | NINETY-FOURTH SUBSCRIBER GROUP                       |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                           |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| NINETY-FIFTH SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                             | NINETY-SIXTH SUBSCRIBER GROUP                        |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|------------------------------------------------------------------------|------------------------------------------------------|-----------------------------|-----|--------------------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                               |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| NINETY-SEVENTH SUBSCRIBER GROUP                                                                                                                                   |     |           |     |                                                                        | NINETY-EIGHTH SUBSCRIBER GROUP                       |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                               |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                                                    |  |
| NINETY-NINTH SUBSCRIBER GROUP                                                                                                                                     |     |           |     |                                                                        | ONE HUNDREDTH SUBSCRIBER GROUP                       |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>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; margin: 0 auto;"></div> |  |

### Nonpermitted 3.75 Stations

|                                                                                                                                                     |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|-----|-----------|--|-------------------------------------|-----------|--|-----------------------------|--|--------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                   |  |     |           |  |                                     |           |  | SYSTEM ID#<br><b>034160</b> |  | Name                                                                                                   |  |
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP                                                                                    |  |     |           |  |                                     |           |  |                             |  | <div>8</div> <div>Computation<br/>of<br/>3.75 Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</div> |  |
| ONE HUNDRED FIRST SUBSCRIBER GROUP                                                                                                                  |  |     |           |  | ONE HUNDRED SECOND SUBSCRIBER GROUP |           |  |                             |  |                                                                                                        |  |
| COMMUNITY/ AREA 0                                                                                                                                   |  |     |           |  | COMMUNITY/ AREA 0                   |           |  |                             |  |                                                                                                        |  |
| CALL SIGN                                                                                                                                           |  | DSE | CALL SIGN |  | DSE                                 | CALL SIGN |  | DSE                         |  |                                                                                                        |  |
|                                                                                                                                                     |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |
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|                                                                                                                                                     |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |
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|                                                                                                                                                     |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |
| Total DSEs 0.00                                                                                                                                     |  |     |           |  | Total DSEs 0.00                     |           |  |                             |  |                                                                                                        |  |
| Gross Receipts First Group \$ 0.00                                                                                                                  |  |     |           |  | Gross Receipts Second Group \$ 0.00 |           |  |                             |  |                                                                                                        |  |
| Base Rate Fee First Group \$ 0.00                                                                                                                   |  |     |           |  | Base Rate Fee Second Group \$ 0.00  |           |  |                             |  |                                                                                                        |  |
| ONE HUNDRED THIRD SUBSCRIBER GROUP                                                                                                                  |  |     |           |  | ONE HUNDRED FOURTH SUBSCRIBER GROUP |           |  |                             |  |                                                                                                        |  |
| COMMUNITY/ AREA 0                                                                                                                                   |  |     |           |  | COMMUNITY/ AREA 0                   |           |  |                             |  |                                                                                                        |  |
| CALL SIGN                                                                                                                                           |  | DSE | CALL SIGN |  | DSE                                 | CALL SIGN |  | DSE                         |  |                                                                                                        |  |
|                                                                                                                                                     |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |
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|                                                                                                                                                     |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |
| Total DSEs 0.00                                                                                                                                     |  |     |           |  | Total DSEs 0.00                     |           |  |                             |  |                                                                                                        |  |
| Gross Receipts Third Group \$ 0.00                                                                                                                  |  |     |           |  | Gross Receipts Fourth Group \$ 0.00 |           |  |                             |  |                                                                                                        |  |
| Base Rate Fee Third Group \$ 0.00                                                                                                                   |  |     |           |  | Base Rate Fee Fourth Group \$ 0.00  |           |  |                             |  |                                                                                                        |  |
| Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |
| \$                                                                                                                                                  |  |     |           |  |                                     |           |  |                             |  |                                                                                                        |  |

### Nonpermitted 3.75 Stations

|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                          |     |           |                |                                     |     | <b>SYSTEM ID#<br/>034160</b> |                | <b>Name</b>                                                                                       |
| BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP                                                                                           |     |           |                |                                     |     |                              |                |                                                                                                   |
| 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            |                                                                                                   |
|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
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|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
| 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            |                                                                                                   |
|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
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|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
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|                                                                                                                                                            |     |           |                |                                     |     |                              |                |                                                                                                   |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |                |                                     |     |                              |                | <div style="border: 1px solid black; height: 20px; width: 100%; background-color: yellow;"></div> |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                       |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                             | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">8</div> Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                       |  |
| 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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                                    |     |                                                                                                                                                       |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                          | DSE |                                                                                                                                                       |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                       |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                       |  |
| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                                             |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin: 0 auto;"></div>                                    |  |

### Nonpermitted 3.75 Stations

[illegible]

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|-----------------------------|------------------------------------------------------|------------------------------------|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                             |                                                      | <b>SYSTEM ID#</b><br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE | <div style="font-size: 2em; font-weight: bold;">8</div> <div>Computation<br/>of<br/>3.75 Fee<br/>for<br/>Partially<br/>Distant<br/>Stations</div>                                               |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts First Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Second Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee First Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Second Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| ONE HUNDRED NINETEENTH SUBSCRIBER GROUP                                                                                                                           |     |           |     |                             | ONE HUNDRED TWENTIETH SUBSCRIBER GROUP               |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                             | COMMUNITY/ AREA <span style="float: right;">0</span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                   | DSE                                                  | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |           |     |                             |                                                      |                                    |     |                                                                                                                                                                                                 |  |
| Total DSEs                                                                                                                                                        |     | 0.00      |     | Total DSEs                  |                                                      | 0.00                               |     |                                                                                                                                                                                                 |  |
| Gross Receipts Third Group                                                                                                                                        |     | \$ 0.00   |     | Gross Receipts Fourth Group |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| Base Rate Fee Third Group                                                                                                                                         |     | \$ 0.00   |     | Base Rate Fee Fourth Group  |                                                      | \$ 0.00                            |     |                                                                                                                                                                                                 |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                             |                                                      |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |                |     |                                                             |     |                             |     |                                                                                                    |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                                                             |     | SYSTEM ID#<br><b>034160</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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |     |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                                                   | DSE | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations               |  |
|                                                                                                                                                                   |     |                |     |                                                             |     |                             |     |                                                                                                    |  |
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|                                                                                                                                                                   |     |                |     |                                                             |     |                             |     |                                                                                                    |  |
| 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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |     |                             |     |                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                                                   | DSE | CALL SIGN                   | DSE |                                                                                                    |  |
|                                                                                                                                                                   |     |                |     |                                                             |     |                             |     |                                                                                                    |  |
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|                                                                                                                                                                   |     |                |     |                                                             |     |                             |     |                                                                                                    |  |
| 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.<br>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**

|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                             | SYSTEM ID#<br><b>034160</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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
| 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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                   | DSE |                                                                                      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
| 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.<br>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; vertical-align: middle;"></span>                                      |     |                |     |                             |                                                             |                             |     |                                                                                      |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                                                                 |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                             | <b>SYSTEM ID#</b><br><b>034160</b> |     | Name                                                                                                                                                                                            |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                                                                 |  |
| ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP                                                                                                                         |     |                |     |                             | ONE HUNDRED THIRTIETH SUBSCRIBER GROUP                      |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                          | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                                                                                            |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                                                                 |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                                                                 |  |
| 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-FIRST SUBSCRIBER GROUP                                                                                                                         |     |                |     |                             | ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP                  |                                    |     |                                                                                                                                                                                                 |  |
| COMMUNITY/ AREA <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                                    |     |                                                                                                                                                                                                 |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                          | DSE |                                                                                                                                                                                                 |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                                    |     |                                                                                                                                                                                                 |  |
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| 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.<br>Enter here and in block 3, line 1, space L (page 7) |     |                |     |                             |                                                             |                                    |     | <div style="border: 1px solid black; background-color: yellow; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> |  |

**Nonpermitted 3.75 Stations**

|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |                |     |                             |                                                             | SYSTEM ID#<br><b>034160</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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
| 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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |                |     |                             | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                      |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN      | DSE | CALL SIGN                   | DSE                                                         | CALL SIGN                   | DSE |                                                                                      |  |
|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
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|                                                                                                                                                                   |     |                |     |                             |                                                             |                             |     |                                                                                      |  |
| 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.<br>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;"></span>                                                              |     |                |     |                             |                                                             |                             |     |                                                                                      |  |



**Nonpermitted 3.75 Stations**

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                               |                                                             | SYSTEM ID#<br><b>034160</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 <span style="float: right;"><b>0</b></span>                                                                                                       |     |           |     |                                                                               | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                                                                     |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                                     | DSE                                                         | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                                                |  |
|                                                                                                                                                                   |     |           |     |                                                                               |                                                             |                             |     |                                                                                                                                     |  |
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|                                                                                                                                                                   |     |           |     |                                                                               |                                                             |                             |     |                                                                                                                                     |  |
| Total DSEs <span style="float: right;"><b>0.00</b></span>                                                                                                         |     |           |     | Total DSEs <span style="float: right;"><b>0.00</b></span>                     |                                                             |                             |     |                                                                                                                                     |  |
| Gross Receipts First Group <span style="float: right;"><b>\$ 0.00</b></span>                                                                                      |     |           |     | Gross Receipts Second Group <span style="float: right;"><b>\$ 0.00</b></span> |                                                             |                             |     |                                                                                                                                     |  |
| Base Rate Fee First Group <span style="float: right;"><b>\$ 0.00</b></span>                                                                                       |     |           |     | Base Rate Fee Second Group <span style="float: right;"><b>\$ 0.00</b></span>  |                                                             |                             |     |                                                                                                                                     |  |
| ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP                                                                                                                          |     |           |     |                                                                               | ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP                   |                             |     |                                                                                                                                     |  |
| COMMUNITY/ AREA <span style="float: right;"><b>0</b></span>                                                                                                       |     |           |     |                                                                               | COMMUNITY/ AREA <span style="float: right;"><b>0</b></span> |                             |     |                                                                                                                                     |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                                     | DSE                                                         | CALL SIGN                   | DSE |                                                                                                                                     |  |
|                                                                                                                                                                   |     |           |     |                                                                               |                                                             |                             |     |                                                                                                                                     |  |
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| Total DSEs <span style="float: right;"><b>0.00</b></span>                                                                                                         |     |           |     | Total DSEs <span style="float: right;"><b>0.00</b></span>                     |                                                             |                             |     |                                                                                                                                     |  |
| Gross Receipts Third Group <span style="float: right;"><b>\$ 0.00</b></span>                                                                                      |     |           |     | Gross Receipts Fourth Group <span style="float: right;"><b>\$ 0.00</b></span> |                                                             |                             |     |                                                                                                                                     |  |
| Base Rate Fee Third Group <span style="float: right;"><b>\$ 0.00</b></span>                                                                                       |     |           |     | Base Rate Fee Fourth Group <span style="float: right;"><b>\$ 0.00</b></span>  |                                                             |                             |     |                                                                                                                                     |  |
| <b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as shown in the boxes above.<br>Enter here and in block 3, line 1, space L (page 7) |     |           |     |                                                                               |                                                             |                             |     | <b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span> |  |



**Nonpermitted 3.75 Stations**

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| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</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 <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                               |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                                                    |  |
| ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP                                                                                                                          |     |           |     |                                                                        | ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP            |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>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; margin: 0 auto;"></div> |  |

## Nonpermitted 3.75 Stations

|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|------------------------------------------------------------------------|------------------------------------------------------|-----------------------------|-----|--------------------------------------------------------------------------------------------------------------------|--|
| LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>COX COMMUNICATIONS GULF COAST, LLC</b>                                                                                 |     |           |     |                                                                        |                                                      | SYSTEM ID#<br><b>034160</b> |     | Name                                                                                                               |  |
| <b>BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP</b>                                                                                           |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP                                                                                                                          |     |           |     |                                                                        | ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP            |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE | <b>8</b><br>Computation<br>of<br>3.75 Fee<br>for<br>Partially<br>Distant<br>Stations                               |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts First Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Second Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee First Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Second Group <span style="float: right;">\$ 0.00</span>  |                                                      |                             |     |                                                                                                                    |  |
| ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP                                                                                                                          |     |           |     |                                                                        | ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP             |                             |     |                                                                                                                    |  |
| COMMUNITY/ AREA <span style="float: right;">0</span>                                                                                                              |     |           |     |                                                                        | COMMUNITY/ AREA <span style="float: right;">0</span> |                             |     |                                                                                                                    |  |
| CALL SIGN                                                                                                                                                         | DSE | CALL SIGN | DSE | CALL SIGN                                                              | DSE                                                  | CALL SIGN                   | DSE |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
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|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
|                                                                                                                                                                   |     |           |     |                                                                        |                                                      |                             |     |                                                                                                                    |  |
| Total DSEs <span style="float: right;">0.00</span>                                                                                                                |     |           |     | Total DSEs <span style="float: right;">0.00</span>                     |                                                      |                             |     |                                                                                                                    |  |
| Gross Receipts Third Group <span style="float: right;">\$ 0.00</span>                                                                                             |     |           |     | Gross Receipts Fourth Group <span style="float: right;">\$ 0.00</span> |                                                      |                             |     |                                                                                                                    |  |
| Base Rate Fee Third Group <span style="float: right;">\$ 0.00</span>                                                                                              |     |           |     | Base Rate Fee Fourth Group <span style="float: right;">\$ 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.<br>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; margin: 0 auto;"></div> |  |

